



# HEALING TO ACTION

**Healing Generations: A Survivor-  
Led Experiment to Build a Future  
Free From Gender-Based Violence**

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Women Unite!

# Executive Summary

In 2017, Healing to Action partnered with community organizations and survivors across Chicago to create and pilot Healing Generations, a grassroots leadership development program designed by and for survivors. In sharing the development, implementation, and lessons learned from Healing Generations, this report provides specific grassroots strategies, rooted in the experiences and creativity of survivors, to reduce gender-based violence in communities most impacted.

## Healing Generations Community- Led Program Design

To design Healing Generations, HTA used a method called concept mapping, a participatory, mixed-methods research process. Sixty-nine survivors from across Chicagoland provided key insights that shaped the priorities and content of the program. Major themes included:

- The need for intergenerational approaches to addressing gender-based violence, including a deeper understanding of LGBTQ identity among adult participants.
- The difficulty of bringing survivors to a program specifically focused on gender-based violence due to social stigma.
- The importance of incorporating healing justice into political education to ensure that survivors could sustain their leadership.

Based on the information collected, HTA designed and piloted Healing Generations in October 2018, and offered a second cohort in June 2020. Seventeen leaders participated in each cohort, and graduates included survivors from Latinx, API, Black, immigrant, indigenous, and survivors with disabilities. The curriculum contained healing and relationship-building activities, political education about the origins and root causes of gender-based violence, skills to combat gender-based violence in participants' communities, and organizing and advocacy training.

# Healing Generations Program Outcomes

HTA administered a pre-test and post-test to program participants each year to assess changes in behaviors and attitudes as a result of their participation in the program. Notable post-test findings include that at the end of the program:

- The majority of respondents in both cohorts were more likely to engage in bystander intervention.
- Over half of 2018 respondents and two-thirds of 2020 respondents reported lower emotional loneliness.
- After completing the program, 63% of 2018 respondents were less likely to accept stereotypes, and 73% of 2020 respondents reported decreased anti-trans prejudice/attitudes.
- Over half of 2020 respondents either talked to more or the same number of people about gender-based violence within the three-month period of the leadership program as they had in the whole year preceding the program.

# Long-Term Outcomes:

**Upon graduating in 2018, Healing Generations' survivor leaders launched a grassroots community campaign, SexEd Works, to address a root cause of gender-based violence in their communities - the lack of access to comprehensive sexual health education.**

They have organized town halls, teach-ins, listening sessions, meetings with school board members, press conferences, and media interviews.

In the summer of 2020, HTA staff conducted a focus group with 2018 graduates to learn about changes in their leadership attitudes and behavior since their graduation from the program over 18 months before. Key themes that emerged included increased feelings of self-confidence and self-efficacy, a deeper understanding of gender identity and gender-based violence, and greater comfort talking about gender-based violence in leaders' own communities. In the fall of 2020, shortly after graduating, several 2020 graduates of Healing Generations also joined SexEd Works and became active in HTA's membership base.

# Recommendations

1

**Survivor leadership requires a new way of community organizing – one that centers and values the experiences of communities most impacted by gender-based violence.**

HTA worked to find ways of organizing survivors that centered their lived realities rather than try to fit them into organizing models that did not reflect their economic, social, and cultural circumstances.

2

**Organizing across marginalized identities breaks the isolation of survivors, but requires care and intentionality to ensure all leaders can thrive.**

Uniting survivors from across identity groups enabled them to see their experiences were not their fault, but stemmed from intersecting systems of oppression, such as white supremacy, xenophobia, income inequality, and ableism. At the same time, cultivating a space that built trust and vulnerability across different experiences required careful planning and adaptation.

3

**Multidisciplinary collaboration and risk-taking is key to building survivor power.**

It was critical to work with partners from mental health, trauma recovery, legal, community organizing, and related sectors who embraced innovating on their own disciplines to address gaps in existing responses and recast survivors from being vulnerable victims to powerful leaders in the fight to end gender-based violence.

4

**Survivor-led organizing requires intersectional analysis and flexibility in issue-based organizing and advocacy.**

Addressing the complex realities of survivors' lives requires adaptive and flexible thinking, and sometimes challenging siloed advocacy or organizing agendas that other organizations and movements use to focus their own work.

5

**“Power concedes nothing without a demand.” – Frederick Douglass**

Creating accountability when survivors are routinely shut out of decision-making processes, while simultaneously processing the trauma of these experiences, is a persistent challenge of survivor-led organizing.

# Introduction

The #MeToo movement is an opportunity to channel the brewing collective outrage long felt amongst those most impacted by gender-based violence: low-income, disabled, LGBTQ, immigrant, black, indigenous, and communities of color. One in three women have experienced some form of gender-based violence<sup>1</sup>, but people living in poverty experience intimate partner violence at a rate 286% higher than high-income people<sup>2</sup>. 40-60% of black women experience sexual abuse before the age of 18;<sup>3</sup> 44% of Latinx women under 25 know a survivor of domestic violence;<sup>4</sup> and one in two Native women and girls are survivors of gender-based violence.<sup>5</sup> People with intellectual disabilities are up to seven times more likely to experience sexual violence.<sup>6</sup> LGBTQ students are almost twice as likely as non-LGBTQ students to miss school due to concerns about personal safety,<sup>7</sup> and young black and brown survivors experience disproportionate discipline and incarceration in what some have called the sexual abuse to prison pipeline.<sup>8</sup>

While gender-based violence is pervasive across marginalized communities, underreporting of these experiences is staggering. Globally, less than 40% of survivors of gender-based violence seek help of any sort, and less than 10% seek help from the police.<sup>9</sup> Upwards of 75% of American workers who report sexual violence on the job experience retaliation.<sup>10</sup> Undocumented survivors are even less likely to seek support

1 "Global and Regional Estimates of Violence Against Women: Prevalence and Health Effects of Intimate Partner Violence and Non-Intimate Partner Sexual Violence," World Health Organization, London School of Hygiene and Tropical Medicine, South African Medical Research Council, 2017.

2 "Cycle of Risk: The Intersection of Poverty, Violence and Trauma," Heartland Alliance, March 2017.

3 "The Truth Commission on Black Women and Sexual Violence," Black Women's Blueprint, 2012

4 THE NO MÁS STUDY: Domestic Violence and Sexual Assault in the Latin@ Community, Casa de Esperanza National Latin@ Network, Avon Foundation, 2015.

5 "Impact of Sexual Violence in Tribal Communities: 2019 Briefing," Coalition to Stop Violence Against Native Women.

6 Joseph Shapiro, "The Sexual Assault Epidemic No One Talks About", NPR, Jan. 8, 2018.

7 "From Teasing to Torment: School Climate Revisited," GLSEN, 2016.a

8 "The Sexual Abuse to Prison Pipeline: The Girls' Story," Human Rights for Girls, Georgetown Law Center on Poverty and Inequality, Ms. Foundation, 2015.a

9 "Facts and Figures: Ending Violence Against Women," UN Women, available at: <https://www.unwomen.org/en/what-we-do/ending-violence-against-women/facts-and-figures#notes>

10 Chai Feldblum and Victoria Lipnic, Select Taskforce on the Study of Harassment in the Workplace, Equal Employment

from state agencies.<sup>11</sup> The dramatic underreporting of gender-based violence reveals the insufficiency of existing laws to reduce gender-based violence if there is not equal attention to dismantling the culture of fear and shame that prevent the most marginalized survivors from coming forward. Current policies focus almost exclusively on responding to gender-based violence, rather than working towards its prevention through addressing its root causes.

While #MeToo caused thousands of survivors to come forward, responses continue to be ad hoc and individualized, limited to calling for high-profile abusers to be punished,<sup>12</sup> costly and opaque litigation,<sup>13</sup> or policies that fail to address the myriad reasons that survivors are deterred from enforcing their rights.<sup>14</sup> These strategies fail to address the social and economic power imbalances which enable gender-based violence to occur at disproportionately high rates against low-income, disabled, LGBTQ, immigrant, black, indigenous, and communities of color. They also do not center the needs, voices, or solutions of people who are most impacted by gender-based violence. As a result, the national conversation has been co-opted by some into a debate over which behaviors are bad enough to warrant repercussions against powerful abusers. This narrative distracts from a deeper and more radical analysis of the root causes of sexual violence, and how cultural entrenchment of gender norms, coupled with structural power inequities, enable violence to occur with impunity.<sup>15</sup>

In the wake of #MeToo, many organizations are emphasizing the need to center survivors and their vision for change as a critical component of shifting the culture and norms that enable gender-based violence. But there is no uniform understanding of how social movement organizing can be “survivor-led.” This has led to several initiatives that promote survivor leadership in different ways – whether it is through surveys that allow survivors

Opportunity Commission, 2016.

11 “Immigrant Survivors Fear Reporting Gender-Based Violence,” Tahirih Justice Center, 2019.

12 See, e.g., “NBC News fires Matt Lauer after sexual misconduct review,” NBC News, Nov. 30, 2017.

13 Minna Kotkin, *Reconsidering Confidential Settlements in the #MeToo Era*

14 Jocelyn Frye, et al. “Transforming the Culture of Power: An Examination of Gender-Based Violence in the United States,” Center for American Progress, 2019.

15 Elizabeth Harris, “Despite #MeToo Glare, Efforts to Ban Secret Settlements Fall Short,” New York Times, June 14, 2019.

to select key policy objectives, mobilizing survivors behind legislative campaigns, or using digital organizing to build community and crowd-source ideas from survivors.

In 2016, before the #MeToo movement went viral, Healing to Action partnered with Chicago-based community organizations to develop grassroots strategies that take direct aim at the cultural stigma that enables gender-based violence, and address the disconnect between the rights and realities of marginalized survivors. This collective effort came out of years of organizing work across Chicago to address a lack of attention to low-wage workers experiencing gender-based violence at work, home, and in public spaces.<sup>16</sup> It culminated in a citywide symposium in 2016 called “Restoring Dignity,” which brought together survivors from different neighborhoods, cultures, and industries in Chicago, and generated a clear call to action from survivors to lead their communities’ responses to gender-based violence. To meet this call to action, HTA embarked on a year-long participatory research process that enabled survivors from across Chicagoland to collectively create a leadership development program to organize against gender-based violence in their communities. The outcome of the community research was Healing Generations, a grassroots leadership development program designed by and for survivors, that HTA piloted in the fall of 2018. In 2019, graduates of the program created and launched SexEd Works, HTA’s first survivor-led grassroots campaign. A second cohort graduated from Healing Generations in the summer of 2020, growing HTA’s membership base to 30 powerful survivors.

In sharing the development, implementation, and lessons learned from Healing Generations, this report outlines specific strategies, rooted in the experiences and creativity of survivors, to reduce gender-based violence. It also documents a four-year process of building strong relationships, trust, and healing opportunities for survivors to ignite new, radical approaches to ending gender-based violence.

<sup>16</sup> Sheerine Alemzadeh & Stephanie Farmer, *Digging Deep Into Our Movements: Strategies to Stop Gender-Based Violence Against Low-Wage Workers*, Coalition Against Workplace Sexual Violence, Healing to Action, Roosevelt University, 2017.

# Research Philosophy & Methodology

## Research Design

To design Healing Generations, HTA used a method called concept mapping.<sup>17</sup> Concept mapping is a participatory, mixed methods research process that engages participants in brainstorming, sorting, rating, and interpretative activities. HTA pursued this method to ensure that survivors drove the process as much as possible and the program created by the process belonged to them. Participants were recruited through local organizations that partnered with HTA, and through one-on-one interviews with a member of the research team in the community. Six Spanish-speaking community members participated on the research team. These research team members had deep and trusting relationships in their communities, and eventually became participants in Healing Generations. Having their expertise on the research team ensured HTA could reach some of the communities most impacted by gender-based violence to inform the development of Healing Generations. The objective of the project was to identify and prioritize the skills, knowledge, and resources that participants<sup>18</sup> needed to reduce gender-based violence against low-wage and precarious workers in their communities.



Research training for community researchers and HTA staff by research partners (University of Illinois - Chicago, 2017)

<sup>17</sup> HTA received research training and support from UIC's School of Public Health to create and implement its research plan.

<sup>18</sup> Originally, the research project referred to research participants as "worker leaders" and focused specifically on violence against workers. As HTA's work progressed, it became clear this phrase did not represent the full range of leaders' experiences, and HTA changed the way it described its key constituents to "members of communities that disproportionately experience gender-based violence." This includes low-income and low-wage workers, but also Black and brown communities, immigrants, people with disabilities, and LGBTQ people.

# Data Collection

## Demographics

In total, 69 unique participants were included in this research project: 31 participants completed brainstorming only, 22 completed sorting and/or rating only, and 16 completed both. Participants mostly identified as female, fell predominantly in the 35–54 age category, and identified as Latinx, Asian/Pacific Islander, and white. Employment status included full- and part-time workers, homemakers, unemployed people, retirees, and people unable to work. (Appendix 1, Table 1).<sup>19</sup>

## Brainstorming

The research team started with a central question that would serve as the discussion point for brainstorming potential solutions.

**“One resource or skill that worker-leaders in my community would need to effectively reduce gender-based violence would be \_\_\_\_\_.”**

Figure 1: Focal statement.

Forty-seven participants engaged in group brainstorming in Spanish, Korean, and English at research partner agencies. These agencies included Hana Center, KAN-WIN, Kedzie Center, Apna Ghar, and Telpochcalli Community Education Project. Brainstorming yielded a variety of responses to the central question.<sup>20</sup> Ideas ranged from addressing bullying in adolescence, education about gender identity, challenging traditional ideas of gender roles, and creating resources and organizations in the community to support violence prevention efforts. Numerous brainstorming responses centered on educating and working with men and children to address gender-based violence.

<sup>19</sup> Many communities disproportionately impacted by gender-based violence were not represented in this limited sample. Specifically, no participants in the sample identified as Black, and participants were not asked about their sexual orientation or disability status. The program design would greatly benefit from the participation of survivors from a broader cross-section of survivor communities, and further research is needed to reflect their experiences and ideas.

<sup>20</sup> Members of the academic research team, Healing to Action, and the community researchers systematically condensed 90 responses into a list of 21 unique responses by eliminating duplicate responses and combining similar ideas (Table 2).

Table 2: Final Concept Mapping Items, by Cluster				
Item #	Item Detail	Rank: Effectiveness	Rank: Likelihood	Go-Zone
Workplace Violence		4.64	3.72	
1	Training to intervene and address gender-based violence when someone sees it happening in the workplace to someone else.			2
18	Training on how to go into a workplace and educate workers about their rights to be free from gender-based violence at work.			2
19	Training on how to support survivors of gender-based violence, including those who do not want to speak up and need help coming forward.			2
Legal Resources and Interdisciplinary Networks to Support Survivors		4.52	3.75	
7	A strong network that includes medical professionals, clinics, social workers, lawyers, counselors and law enforcement working together to support survivors in the community.			1
14	Information about the legal rights for survivors of gender-based violence, and how to enforce them through the legal system, including resources to support survivors going through a legal process.			2
8	Resources that provide justice for survivors outside of the legal system, like alternative conflict resolution or peace circles.			3
Employee and Survivor Support		4.64	4.05	
5	Free access to organizations that support and protect survivors, including healing services like psychological and emotional support.			1
16	Information and resources about job opportunities, both for oneself and to help others.			4
21	Negotiation skills to confront employers who do not respect employees' rights and help other workers do this too.			1
Communication		4.55	3.70	
2	Skills to be able to communicate and share information about gender-based violence at events that unite the community like health fairs or cultural performances.			3
4	Skills to help men and women to talk about gender-based violence together.			2
15	Workshops on how to talk about gender-based violence as a family, particularly for parents to talk to their children.			1
Understanding GBV		4.51	4.05	
3	Workshops or classes to develop an understanding of gender-based violence, including what it means, who it affects, and how it affects people.			1
17	Opportunities to communicate and explore one's own needs and experiences around gender-based violence in different ways, like through art therapy.			4
Self Esteem and Bullying		4.52	3.90	
10	Workshops that boost personal self-esteem in order to help others.			1
11	Workshops to learn how to prevent bullying.			4
Addressing traditional beliefs of sex and gender		4.28	3.51	
6	Training in order to build trust and work with communities that have different beliefs.			2
12	Education about sex and gender that is open-minded and includes different age groups and sexual orientations.			1
20	Education about the root causes of gender-based violence, including its history and origins in different cultures.			3
9	Training specifically for men that is taught by other men to learn how to value women and families and overcome stereotypes about masculinity.			3
13	Training and skills on how to work with adults across cultures who may have "traditional" ideas about gender roles.			3

# Sorting and Rating Ideas

After distilling the responses down to a list of 21 unique ideas, the research team asked participants to sort each of the 21 ideas into groups or themes that made sense to them, and then designate a name or phrase to describe why the statements were grouped together.<sup>21</sup> Using computer software, the team entered participants' responses to visualize seven "clusters" that captured broader themes identified by the participant group as a whole (Appendix 1, Figure 3).

In addition to sorting ideas into themes that made sense to them, the research team asked participants to rate the effectiveness of the ideas in helping worker-leaders prevent gender-based violence and whether or not a worker-leader would be likely to attend a program or workshop centered on that topic (Table 2).

The team then used participants' rating responses to understand whether and to what extent the group as a whole believed that different themes would be effective in helping leaders to prevent gender-based violence (Effectiveness), and the likelihood of people in the community attending a program that incorporated the idea (Likelihood). In general, all of the clusters rated highly in terms of Effectiveness and Likelihood, although the Likelihood scores were significantly lower than the Effectiveness scores for all clusters except "Understanding Gender-Based Violence." The pattern match chart below (Figure 4) shows that most ideas were seen as effective, but relatively less likely to be used.

21 In the sorting and rating phase of concept mapping, participants were asked two questions about the 19 unique items. First, they were asked to rate how effective each idea would be in helping worker-leaders to prevent gender-based violence in their communities, with 1 = not very effective and 5 = very effective. Second, they were asked to rate the likelihood that worker-leaders would attend a program that focused on this skill or resource, with 1 = not very likely and 5 = very likely. The rank columns indicate median scores on

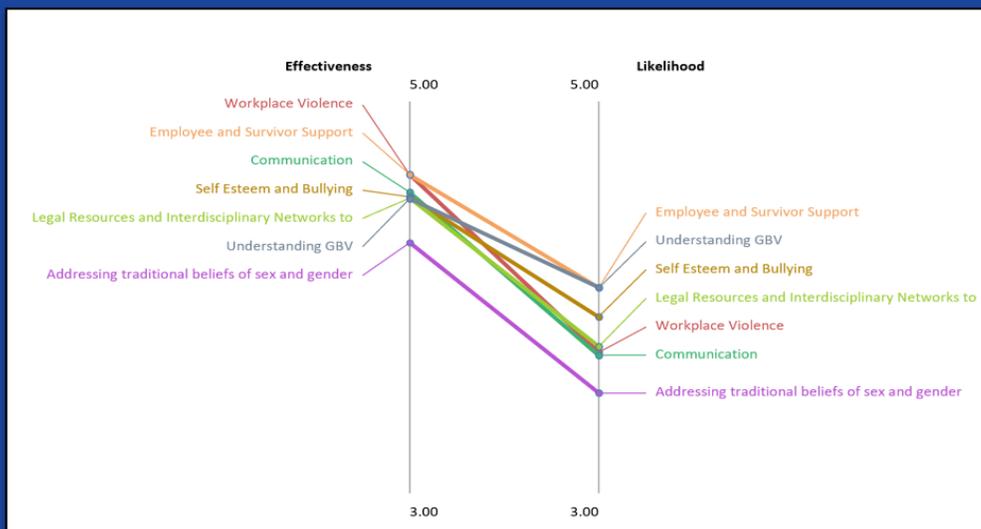


Figure 4: Pattern match showing a correlation between participants' perceptions of effectiveness at preventing gender-based violence and the likelihood that worker-leaders might attend a focused training on items in the cluster.



Community researchers leading a participatory brainstorming session (Telpochcalli Community Education Project, 2018)

## Go-Zones

Finally, the team compared the two rating scores of the individual items. This is illustrated by a quadrant map which shows the correlation of individual items by Effectiveness and Likelihood (Appendix 1, Figure 5). The top right-hand quadrant of the map represents the items which were rated as both most effective and most likely to be attended by participants (these are indicated with the number 1 in the “Go-zone” column in Table 2). From the items that fell in Quadrant I, key themes that emerged were the need for personal healing as a critical component of the program,<sup>22</sup> and providing skills training for leaders to have inclusive, intergenerational conversations about gender-based violence in their communities.<sup>23</sup>

22 For example, Item #5 (“Free access to organizations that support and protect survivors, including healing services like psychological and emotional support”) was rated highest in terms of Effectiveness and Likelihood. Also, Item #10 (“Workshops that boost personal self-esteem in order to help others”) fell into Quadrant I.

23 Item #12 (“Education about sex and gender that is open-minded and includes different age groups and sexual orientations”); #3 (“Workshops or classes to develop an understanding of gender-based violence, including what it means, who it affects, and how it affects people”) and #15 (“Workshops on how to talk about gender-based violence as a family, particularly for parents to talk to their children”) fell into Quadrant I.

# Interpreting Results

At the conclusion of the research process, HTA and the community members on the research team met with participants to have a more informal dialogue about the findings and gain insights that were not fully captured by the research results. A few major themes emerged from these conversations.

First, many participants emphasized the need for intergenerational approaches to address gender-based violence. Participants across neighborhoods and ethnic identities emphasized their lack of education around sexual health and healthy relationships, and how they felt unequipped to prevent gender-based violence from happening to their children and youth in their communities. They also discussed how gender-based violence became normalized to youth when they saw it in their homes and neighborhoods, and so early education was important to prevent the cycle of violence from repeating itself in future generations. Several participants indicated a need for further understanding and education about LGBTQ experiences (the majority of participants were cisgender, heterosexual women) and felt that they could learn from youth who had a more nuanced and developed an understanding of LGBTQ identity.

Second, participants discussed the difficulty of bringing survivors to a program specifically focused on gender-based violence. This explained why some items that had high ratings for being effective in addressing gender-based violence had lower ratings for likelihood of use. Participants explained that many survivors did not identify themselves as survivors. They also predicted that it would be difficult to motivate community members to attend a program about gender-based violence, as opposed to a topic with less social stigma, such as parenting skills or job training. Participants also shared that providing free resources such as legal advice or job readiness training might attract participants to a program about gender-based violence.

Finally, participants discussed the participation of different gender identity groups in a leadership program. Based on previous experiences, some felt skeptical they could speak openly about gender roles and their own survival experiences in a space shared with cisgender men. On the other hand, some participants emphasized the importance of cisgender men participating in conversations about gender-based violence, and envisioned the leadership program as a place where cisgender men could practice engaging in conversations with other gender identity groups in a more intentional manner. Maria is an active member of Telpochcalli Community Education Project (TCEP),

# “The fruits of the plants that we have grown together.”

a community organizing group in Little Village. She learned about HTA at TCEP’s weekly meetings when HTA staff came to share about a leadership program they were building with community members. She decided to join the community research project to develop the leadership program. After receiving training on concept mapping from researchers at the University of Illinois at Chicago, she worked to bring parents in her community to HTA’s concept mapping sessions. She also advised the research team about how to make the process more accessible to her community.

After a year of working with HTA to design the program, Maria joined the pilot cohort in the fall of 2018. Thanks to her work gaining input from community members, several of the people who attended research sessions at TCEP signed up for the program, too. Now, Maria is an active leader in HTA, and is mentoring new leaders in the organization. Recently she shared, “HTA has allowed me to meet warriors that are strong as an oak. We are seeing the fruits of the plants that we have grown together.”

# Implementation

## 2018 Cohort

In all, HTA conducted nine listening sessions at four community-based partner organizations with 69 community members over eight months. Based on the information collected, HTA designed a leadership curriculum that was piloted from October to December of 2018. 13 of the participants in the program design enrolled in the pilot cohort for the program, along with 4 other community members. The inaugural cohort was 17 people.

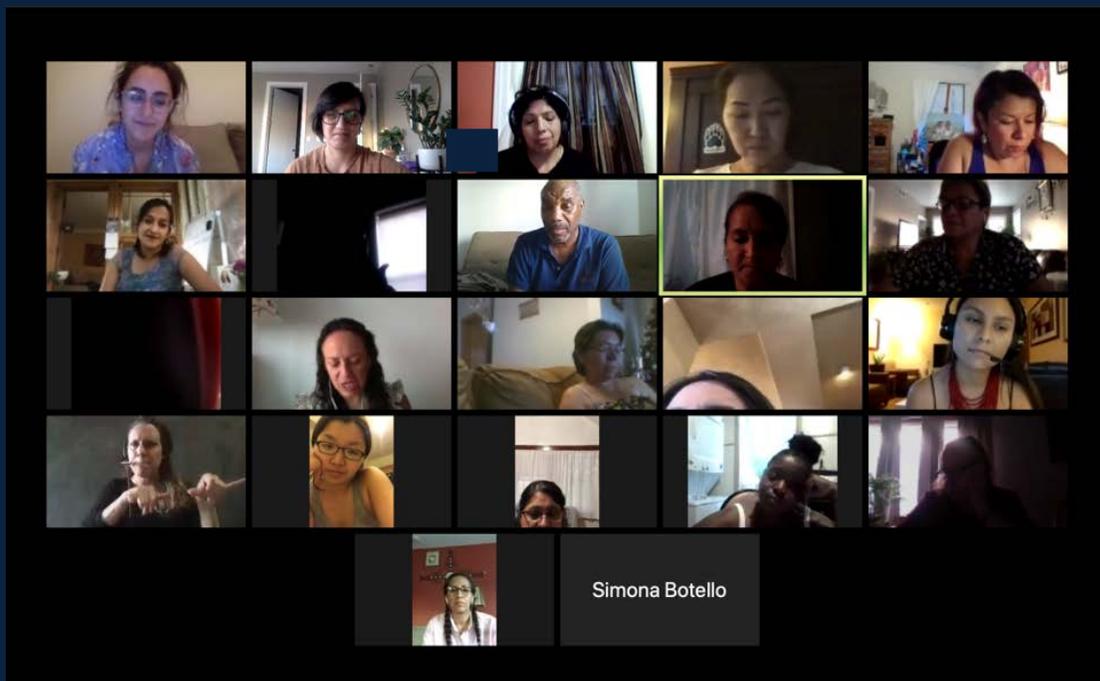
Based on learning priorities identified by research participants, the pilot curriculum covered topics such as the cultural and historical origins of gender norms, understanding sexuality and gender, exploring existing and alternative justice practices, supporting survivors of gender-based violence, communicating about gender-based violence with loved ones, and community and campaign organizing. HTA staff led the sessions, along with guest facilitators including LGBTQ activists, faith leaders, community educators, and organizers.

HTA also incorporated research participants' feedback into designing the program logistics to maximize community participation. HTA provided Spanish language interpretation (most members of the inaugural cohort were monolingual Spanish speakers), childcare, food, transportation, monetary benefits, and crisis intervention support during program sessions. Program session dates and times were determined based on the availability of cohort members. The program also did not outreach to "survivors;" instead, HTA promoted the program as developing the leadership of community members interested in ending gender-based violence. This way, people could join the program without needing to identify themselves as survivors; rather, the program served as a tool to grow their community leadership skills. This strategy proved successful as leaders emphasized time and again that they joined the program so they could help their communities.

To respond to research participants' emphasis on healing as a key need in a leadership development program for survivors, facilitators incorporated healing activities into each

program session. Program facilitators emphasized personal healing and processing trauma as a critical strategy for leaders to sustain their leadership. For example, in the introductory module, participants invented “magic spells” that explored how shameful or traumatic personal experiences could be recast as sources of power and strength. The final session featured a partner activity where each participant shared the superpower they brought to the campaign, which their partner then rendered into a portrait. These political education and relationship-building activities bonded the group together, enabling participants to share deeply personal stories in a safe environment.

In addition to program sessions, HTA partnered with Awakenings Art Gallery and Antonio Ancona, a community artist, to do a series of arts workshops with leaders. The arts collaboration was designed to be a culturally resonant and accessible medium for leaders to process political education outside of the program sessions. Not only did leaders build and adorn their altars, but they explored the cultural significance of altars in connecting people to their past, present, and future. Together, leaders constructed a group exhibit of altars paying tribute to their stories of healing and survival, which was a public exhibit for three months at Awakenings Art Gallery, which specifically features the art pieces of survivors. The leaders named the exhibit “Healing Generations: Hope of Tomorrow,” which later became the name of the leadership program itself. These kinds of healing partnerships were critical to creating the conditions where survivors could meaningfully explore the systemic causes of gender-based violence while equally honoring the trauma they personally experienced as a result of that violence.



Opening session of Healing Generations, Cohort 2 (Zoom, 2020)



# Patricia's Artist's Statement, Renovación

Hello! My name is Patricia; this beautiful object of art is me! Each part has a meaning in my life. During my childhood I grew up and lived with domestic violence. Each rock passes through a long process in the fire and darkness, but, at the end, it gets transformed into a precious stone with an incalculable value, and it is unique; it has incredible and brilliant colors.

1. Each stone represents an abuse or mistreatment; but today I try that it be a beautiful scar of learning and experience.
2. The butterfly represents a transformation; the wings have 4 hearts, which are my children. It means freedom and transformation.
3. The pearl goes through a transformation: from being trash to being a beautiful precious stone.
4. My body has stones with my favorite colors. Blue and green mean life, oxygen, fire and energy. It also has 3 pieces from my children.
5. In my head I have a crown, as I am the matriarch of my descendants and I have the responsibility of change and transformation. On the right hand I have a butterfly of freedom and transformation. On the left hand I have the key for love, gratitude, faith in God, and the book for education and generational change. I feel grateful to all.

## 2020 Cohort

The second cohort of Healing Generations was scheduled to happen in the summer of 2020. In March of 2020, the Covid-19 public health crisis hit Chicago, severely impeding efforts to recruit participants to the leadership program. HTA worked with community partners from the participatory research project, as well as other direct service organizations, to identify and nominate survivors of gender-based violence to apply to the program. This process, combined with outreach through pre-existing community relationships, yielded a second cohort of 17 leaders through phone and virtual recruitment. The second cohort included survivors from Black, Asian/Pacific Islander, Latinx, indigenous, immigrant, and disability communities. The program took place entirely virtually.

The content for the second iteration of the program incorporated feedback and lessons learned from the pilot cohort. The curriculum was revised to include deeper political education about intersectionality, as well as to focus more heavily on the concept of transformative justice. New healing modalities were integrated to ensure that leaders with differing abilities could equally benefit from the program offerings. For example, HTA partnered with Sangeetha Ravichandran, a local artist, activist, and trauma counselor to launch a series of workshops for leaders that culminated in a virtual performance piece called “Freedom Story,” which featured a group poem developed by leaders, accompanied by objects that signified freedom to them. “Freedom Story” allowed leaders to build relationships outside the formal structure of the leadership program, and process their political learnings through exploring storytelling, poetry, and performance art.

To ensure the program was accessible in a global pandemic, HTA provided Spanish, Korean, and American Sign Language interpretation, a technology stipend for leaders who needed support accessing the program, and virtual crisis intervention support during program sessions. HTA staff provided each leader a personalized orientation to acquaint them with the virtual tools used in the program. A notable distinction in the 2020 cohort of the program was that new leaders learned about community organizing through the concrete case study of SexEd Works, HTA’s first survivor-led campaign. 2018 graduates co-facilitated this session with HTA’s community organizer, and explained the genesis of SexEd Works and their own journeys of healing and organizing.

# Eye-Opening and Accepting

Antonio attended a workshop in 2019 at the University of Illinois at Chicago about sexual violence against people with disabilities. The workshop was co-facilitated by his friend, Susan, and an HTA staff member. He decided to get involved with organizing at HTA to spread awareness about gender-based violence in the deaf community. The following year, Susan and Antonio joined the second cohort of the Healing Generations program, and both participated as artists in creating the “Freedom Story” video. After the program ended, Antonio attended an artists’ retreat, where artists came together from the 2018 and 2020 cohorts of Healing Generations to share their work with each other and discuss the power of art in reclaiming our stories. Antonio taught fellow participants signs in American Sign Language to affirm each other’s work. Some of the words he taught his fellow leaders included “eye-opening” and “accepting.”

# Outcomes of the Leadership Program

## Short-Term Outcomes

For each group of graduates, HTA administered a pre-test and post-test to assess changes in leaders' knowledge, behaviors, and attitudes as a result of participating in the program.

In 2018, the questions assessed changes in acceptance of stereotypes and rape myths, likelihood of intervening to support a survivor, and feelings of community connectedness and cohesion. Seventeen community leaders participated in the leadership program who were assessed via the pre-test, and ten community leaders were assessed via the post-test. The final matched-pair sample of pre- and post-test participants was a total of eight, and formed the basis for 2018 results. The final sample was majority female,<sup>24</sup> identified as Hispanic/Latina,<sup>25</sup> and preferred Spanish as their first language.<sup>26</sup> The average age of the participants at the time of the post-test was 47.<sup>27</sup>

In 2020, the questions were expanded to assess anti-trans prejudice, root causes of gender-based violence, preparedness of talking to a family member about gender-based violence, number of people participants had spoken to about gender-based violence, number of people participants had referred to resources, and number of people who disclosed gender-based violence to participants in the year leading up to the program as compared to after completing the program. Overall, 17 community leaders participated in the leadership program who were assessed via the pre-test, and 15 community leaders were assessed via the post-test. The final matched-pair sample of pre- and post-test

<sup>24</sup> 88%, n=7

<sup>25</sup> 100%, n=8

<sup>26</sup> 100%, n=8

<sup>27</sup> The pre-tests were administered in the two weeks leading up to the start of the program, and the post-tests were administered within one month of completing the program. The tests were administered by staff, interns, and volunteers over Zoom, using an online survey form. Some participants also completed the form independently.

participants was a total of 15, which formed the basis of results presented for 2020. The final matched-pair sample<sup>28</sup> was majority female (92%, n=12). The second cohort was more racially diverse; 46% (n=6) of the sample identified as Hispanic/Latino/Latina/Latinx, 15% (n=2) identified as Black/African American, and the rest of the sample reported other racial and ethnic identities (e.g. Caucasian, Asian, Native American, and Mongolian).

## Attitudinal Changes

### Acceptance of Stereotypes

In 2018, the pre- and post-test assessed participants' acceptance of stereotypes. High average scores on the Acceptance of Stereotyping Questionnaire (ASQ) indicated a respondent was less likely to accept attitudes about stereotypes.<sup>29</sup> The average ASQ scores increased by 11.1%, and 63% of respondents<sup>30</sup> were less likely to accept stereotypes at the time of the post-test.<sup>31</sup>

### Acceptance of Rape Myths

In 2018 and 2020, the pre- and post-test assessed the participants' acceptance of common rape myth attitudes using the Illinois Rape Myth Acceptance Scale-Short Form. In 2018, five rape myths from the Illinois Rape Myth Acceptance Scale-Short Form were chosen to show percent changes from pre-test to post-test. Higher responses indicated participants were less

28 We were missing demographics from 2 participants of the final matched-pair sample.

29 An example of such a statement on the ASQ is: "Stereotypes are useful in daily life even though they are not always correct".

30 Five of eight matched data respondents

31 These questions were not asked in the second cohort—they were replaced by the questions about whether personal choices or structural inequalities cause gender-based violence.

**Table 1.** 2018 percent change and number improved from pre- to post-test on five rape myths.

Rape Myth Attitude	Percent Change	# of leaders improved
If a woman is raped while she is drunk, she is at least somewhat responsible for letting things get out of control.	+23.5%	6/8 (75%)
If a woman doesn't physically fight back, you can't really say that it was rape.	+9.8%	3/8 (38%)
It is usually only women who dress suggestively that are raped.	-2.7%	2/8 (25%)
Rape is unlikely to happen in the woman's own familiar neighborhood.	0%	1/8 (13%)
A lot of women lead a man on and then cry rape.	+20.7%	4/8 (50%)

likely to accept rape myth attitudes.<sup>32</sup> Table 1 indicates the five rape myth attitudes surveyed, the percentage change in scores from pre- to post-test, and the number of leaders who improved their scores after completing the program. In 2020, the pre- and post-tests asked participants about their agreement with all of the rape myths listed on the Illinois Rape Myth Acceptance Scale-Short Form. Although there was no change in the total average test scores of the cohort from pre- to post-test, nine leaders improved their score from pre- to post-test. This means that 60% of the 2020 cohort reported lower rape myth acceptance at the time of the post-test.<sup>33</sup>

## Genderism and Transphobia

In 2020 only, the pre- and post-test also asked how much participants agree with transphobic statements/endorse anti-trans prejudice.<sup>34</sup> Post-test scores showed an overall 13.66% increase in scores indicating an average decrease in anti-trans prejudice attitudes/behaviors,<sup>35</sup> and 73% of leaders reported lower anti-trans prejudice at the time of the post-test.<sup>36</sup>

32 An example of such a statement on the Illinois Rape Myth Acceptance Scale - Short Form is, "A lot of times, women who say they were raped agreed to have sex and then regret it."

33 Overall, scores were relatively low (meaning respondents had lower rape myth acceptance) at both pre-test (M=40.39) and post-test (M=40.40 out of a total possible score range of 22-110)).

34 An example of a statement used on the Genderism and Transphobia scale is "A man who dresses as a woman is a pervert."

35 Overall, scores were relatively high (meaning they had lower anti-trans prejudice) at both pre-test (M=66.16) and post-test (M=75.20 out of a total possible score range of 12-84)).

36 Eleven leaders improved their scores from pre- to post-test, (73% of matched data participants) improved their score on the post-test.

## Likelihood of Intervention

HTA also asked participants how likely they would be to engage in different bystander intervention behaviors.<sup>37</sup> In 2018, post-test scores showed an overall 6.14% increase in bystander intervention scores, indicating an increase in the likelihood of engaging in bystander intervention behaviors.<sup>38</sup> 63% of the cohort were more likely to intervene as bystanders at the time of the post-test.<sup>39</sup> In 2020, post-test scores showed an overall 12.36% increase in average bystander intervention scores, indicating an increase in the likelihood of engaging in bystander intervention behaviors.<sup>40</sup> 53% of the cohort were more likely to intervene in situations where someone could get hurt at the time of the post-test.<sup>41</sup> There was a larger improvement of bystander attitudes/likelihood of intervening in 2020 compared to 2018.<sup>42</sup>

## Self-Efficacy and Loneliness

In 2018, HTA asked leaders questions about their generalized self-efficacy (their belief in their abilities to meet challenges and successfully complete tasks), basic psychological needs, and reported feelings of loneliness. While total generalized self-efficacy scores mostly remained the same,<sup>43</sup> 71% of the cohort increased their basic psychological needs score at the time of the post-test, indicating that most cohort members felt greater general satisfaction with their lives after completing the program.<sup>44</sup> General reported feelings of loneliness, social loneliness, and emotional loneliness all decreased at the time of the post-test,<sup>45</sup> with 25% of the cohort reporting lower general loneliness,<sup>46</sup> 29% of the cohort reporting lower social

37 An example of a statement used on the Bystander Intervention scale is "If I saw someone I know grabbing, pushing, or insulting their partner I would confront them."

38 In 2018, overall scores were relatively high (meaning a high likelihood of engaging in bystander intervention behaviors) at both pre-test (M=50.86) and post-test (M=54.00 out of a total possible score range of 14-70).

39 Five leaders improved their scores from pre- to post-test.

40 Overall scores were relatively high (meaning a high likelihood of engaging in bystander intervention behaviors) at both pre-test (M=48.06) and post-test (M=54.00 out of a total possible score range of 13-65)).

41 Eight leaders improved their scores from pre- to post-test.

42 The pre-to post-test change from 2018 in average bystander attitude/behaviors was 50.88 to 54. The pre-to post-test change from 2020 in average bystander attitude/likelihood of intervening was 48.06 to 54.

43 There was a 1.8% increase in generalized self-efficacy scores; though 4 leaders improved their score, meaning 50% of the cohort reported higher self-efficacy at the time of the post-test.

44 Data for this question was missing for one leader, so percentages were calculated out of 7 total matched data respondents. Five leaders improved their basic psychological needs score. The cohort's basic psychological needs score increased by 10.9%.

45 General loneliness scores fell by 8.2%, social loneliness scores fell by 20%, and emotional loneliness scores fell by 11.1%.

46 2 out of 7 respondents improved their general loneliness scores.

EDUCATION NEWS CHICAGO

# CPS' new sex ed policy doesn't address important needs, advocates say

Teachers now will be required to undergo only a 90-minute training to earn a four-year certificate for sex ed.

By Nader Issa | @NaderDlssa | Dec 17, 2020, 7:07pm CST



Sofia Penglase (top right), Aurelia Aguilar (top left) and other sexual health education advocates discuss CPS' new policy with reporters. | Healing to Action/Screenshot

Healing Generations Leaders from 2018 and 2020 cohorts featured in Chicago Sun-Times after giving press conference about their campaign (2020)

loneliness,<sup>47</sup> and 57% of the cohort reporting lower emotional loneliness.<sup>48</sup> In 2020, HTA asked respondents about their emotional and social loneliness before and after the program. 67% of the cohort reported lower emotional loneliness at the time of the post-test<sup>49</sup> and 47% of the cohort reported lower social loneliness at the time of the post-test.<sup>50</sup>

## Responsibility for Gender-Based Violence

In 2020 only, the survey asked participants how much they agree with this statement: “People experience gender-based violence mostly because of personal decisions they have control over.” At the time of the pre-test, 35% of the cohort very much agreed with this statement, compared with 27% of the cohort in the post-test.<sup>51</sup> Leaders were also asked how much they agree with this statement: “People experience gender-based violence mostly because of social inequalities based on race, class, gender, and disability status.” At the time of the pre-test, 71% of the cohort very much agreed with this statement, compared with 80% of the cohort in the post-test.<sup>52</sup> This means that at the end of the leadership program, a relatively smaller percentage of respondents were likely to agree that gender-based violence was the result of personal choices within survivors’ control and a relatively larger percentage of respondents were likely to agree that people experience gender-based violence because of social inequalities.

47 2 out of 7 respondents improved their social loneliness scores.

48 4 out of 7 respondents improved their emotional loneliness scores.

49 Ten leaders improved their emotional loneliness scores and there was a 15.63% average decrease in the cohort’s emotional loneliness scores from pre- to post-test.

50 Seven leaders improved their social loneliness scores. There was a 7% increase in social loneliness scores from pre- to post-test, meaning that overall social loneliness decreased in the cohort from pre- to post-test.

51 At the time of the pre-test, six leaders (out of 17) very much agreed with this statement. At the time of the post-test, four leaders (out of 15) very much agreed with this statement.

52 At the time of the pre-test, 12 leaders (out of 17) very much agreed with this statement. At the time of the post-test, 12 leaders (out of 15) very much agreed with this statement.

## Preparedness to Talk about Gender-Based Stereotypes and Gender-Based Violence with Others

In 2020 only, HTA asked leaders how prepared they felt to address a family elder making a sexist comment<sup>53</sup> at the pre- and post-test. 53% of respondents<sup>54</sup> felt more prepared to challenge a family member's gender stereotyping at the time of the post-test.<sup>55</sup>

In the pre-test in 2020 only, HTA asked leaders how many people they spoke to about gender-based violence, how many people disclosed gender-based violence to them, and the number of people leaders referred to services for gender-based violence in the last year. On the post-test, leaders were asked the same questions except instead of the last year, they were asked how often these events took place since the start of the leadership program.

At the time of the post-test, 53% of the respondents either talked to the same or greater number of people about gender-based violence in just the three months from starting the program as they had in the whole year before the program.<sup>56</sup> 27% of respondents received disclosures from either the same or greater number of people in just the three months from starting the program as they had in the whole year before the program.<sup>57</sup> 13% of respondents reported making referrals for the same or greater number of people in just the three months from starting the program as they had in the whole year before the program.<sup>58</sup>

53 The question was: "Imagine a respected family elder in your family made a comment about your cousin, who identifies as a woman. The elder says, 'your cousin shouldn't be working as a truck driver - she's a woman and that job is for men only! If something happens to her, she brought it on herself.' You disagree with this statement. Right now, how prepared would you feel to voice your disagreement in a situation like this?"

54 8 out of 17 leaders reported higher levels of preparedness at the time of the post-test.

55 7 out of 17 leaders felt very prepared to voice their disagreement at the time of the pre-test, while 10 out of 15 leaders felt very prepared to voice their disagreement at the time of the post-test.

56 At the time of the pre-test, fourteen leaders spoke to three or more people about gender-based violence in the past year. At the time of the post-test, eight leaders either talked to the same or greater number of people about gender-based violence in the three months from starting the program as they had in the whole year preceding the program.

57 At the time of the pre-test, six leaders reported that three or more people had disclosed gender-based violence to them in the past year. Four leaders received disclosures from either the same or greater number of people in the three months from starting the program as they had in the whole year preceding the program.

58 At the time of the pre-test, seven leaders reported that they had referred people to services for gender-based violence in the past year. In the post-test, two leaders reported making referrals for the same or greater number of people in the three months from starting the program as they had in the whole year preceding the program.

# “I’m healing now.”

Cristina joined HTA through the 2020 summer cohort of the Healing Generations program, and met HTA through a lawyer at Metropolitan Family Services. She knew no one when joining the program. Over the summer, Cristina described the program as “an oasis in the desert,” a place for healing and self-growth amidst a year of simply struggling to survive. After graduating from the program, she attended a virtual retreat introducing first and second cohort leaders for the first time. She shared how the leadership program had helped her support a young person in her community who was suicidal. Since graduating from the program, Cristina has become a powerful spokesperson for HTA, meeting with school district officials about sexual health education, strengthening alliances between HTA’s leaders and parents from other community groups, and speaking with the media about the need to listen to survivors. She shared recently, “It’s marvelous to be able to share and grow... I love HTA ... I’m very happy and much more relaxed now. I’m healing now.”

## Long-Term Outcomes

It has been over two years since HTA’s first cohort of leaders graduated from Healing Generations. Since its conclusion, the inaugural graduates have put their skills into practice, coordinating a sophisticated and radical campaign to address a root cause of gender-based violence in their communities. The campaign, SexEd Works, was conceived during the 2020 Healing Generations program sessions through an intense and iterative process of consensus-building, caucusing, and voting. Leaders shared that a root cause of gender-based violence was the normalization of toxic masculinity and gender policing in their communities. They also realized that these community attitudes came from a lack of education for youth around critical issues like consent, healthy relationships, sexual autonomy, and gender identity. After dialogue over several months, HTA’s leaders decided to focus their attention on eradicating racial and economic inequities in access to comprehensive sexual health education for Chicago’s Black, indigenous and youth of color.

Since launching the campaign in 2019, the leaders have worked tirelessly to hold the school district accountable for failed implementation of its mandatory sexual health policy in Chicago’s low-income Black and brown communities. They have coordinated town halls, teach-ins, listening sessions, meetings with school board members, coalition meetings, press conferences, media interviews, and testimony at public hearings. They have mobilized hundreds of community members across neighborhoods, cultures, languages, generations, and genders. They have spoken to the press, authored op-eds, and secured commitments

from public officials. In 2020, during a global pandemic where many HTA leaders faced health, job, and care crises; 78% still participated in 1-2 campaign activities and 46% engaged in significantly more - an average of about 4-6 campaign activities.

In the summer of 2020, HTA staff conducted a focus group with a subset of Cohort 1 graduates to learn about changes in their leadership attitudes and behavior since their graduation from the program over 18 months before. The focus group answered questions about their relationships with each other, their confidence as experts on the issue of gender-based violence, and their comfort with community organizing.

## Increased Confidence and Self-Efficacy

Leaders shared their feelings of increased self-confidence and self-efficacy. Leaders shared some of the following quotes, edited for clarity:

"I've served on a local school council and I never spoke with a board member and now I realize that I can do this - others never thought this could happen."

"I know what I want and I know what my purpose is and I feel secure in what I'm doing."

"The cohort has helped me a lot and I've learned a lot, specifically around gender... I didn't go to school and I don't always understand words that I hear so this has helped me a lot. I feel like a leader because I know what I'm saying and I know how to talk about this issue with other groups or at home."

## Collective Power

2020 graduates also shared the impact of working with each other to advance a grassroots campaign. They shared the following reflections (edited for clarity):

"Learning and growing with my cohort has transformed my ideas of myself and my community - I feel like I can go out into my community now."

"It has helped me to think before judging someone... and look for a way to become more curious about a person's situation."

"Moms identify us and ask us questions - it makes us feel good because we can help - this helps us feel powerful."

In the fall of 2020, graduates of the second cohort of Healing Generations began participating in campaign activities, joining the first cohort of leaders in organizing for change in their communities.

# Recommendations

**“The way young people are taught about issues like masculinity, gender and healthy relationships could reshape communities.”**

A longtime community leader on immigrant and worker rights issues, Rocio graduated from Healing Generations in 2018. She joined the program to use her organizing skills and deeply rooted community relationships to shed light on the issue of domestic violence in her community. She worked alongside other leaders to develop HTA's first survivor-led campaign, SexEd Works. When the leaders discussed which system they should focus on to address the root causes of gender-based violence, Rocio argued that public education was “the cue ball in a game of billiards” to reform attitudes about gender across society. She, along with other leaders, believed that reshaping the way young people are taught about issues like masculinity, gender, and healthy relationships could reshape communities. In a recent meeting, Rocio shared, “what has worked in our meetings is identifying the skills of each one of us so that each of us can participate and we can boost each other up and motivate each other, this creates trust and self-confidence.”

Healing to Action's four-year exploration of survivor-led organizing yielded several powerful lessons. We hope these reflections will serve other organizations and collectives seeking to build survivor-led models of social change.

**Survivor leadership requires a new way of community organizing – that centers and values the experiences of communities most impacted by gender-based violence.**

Leaving a violent relationship, abusive workplace, or other unsafe situation requires resourcefulness, creativity, and courage. Survivors have tremendous power that, when recognized, has the potential to transform communities. In order to harness the power of survivors, HTA worked to find ways of organizing that centered their realities rather than try to fit them into organizing models that did not reflect their economic, social, and cultural circumstances. This included providing support for leaders to participate in leadership development and campaign activities, such as free childcare, multilingual interpretation, free transportation, food, and monetary program benefits to address the economic, social, and cultural barriers they faced to volunteering their time. It also meant incorporating healing and slowing down work to address the inevitable trauma that arose from using one's survival experiences to ignite and sustain social change.

## **Organizing across marginalized identities breaks the isolation of survivors, but requires care and intentionality to ensure safety and dignity so all leaders can thrive.**

Currently, HTA's leadership base includes Black, Latinx, API, immigrant, disability, and indigenous communities. Learning about the experiences of people with different backgrounds and identities enabled survivor leaders to see that the violence they survived was not caused by their personal choices, but rather by intersecting systems of oppression, such as white supremacy, xenophobia, income inequality, and ableism. This was a powerful and healing recognition for many survivors. At the same time, cultivating a space that built trust across different experiences required careful planning and flexibility. Facilitators used tools like setting ground rules, creating access plans for program sessions, debriefing with individual leaders after sessions, and incorporating political education about key concepts like intersectionality to proactively create the opportunity for generative and transformative conversations across different identity groups.

## **Multidisciplinary collaboration and innovation is key to supporting the leadership development of survivors.**

HTA's model could not have come to fruition without the support and collaboration of several allied organizations and individuals. It was critical to work with organizations that provided trauma-informed, culturally competent mental health support for survivors. Agencies like Mujeres Latinas en Accion, the Kedzie Center, KAN-WIN, and HANA Center were vital both in providing survivors with emotional support through their leadership journey, as well as identifying powerful survivor-leaders within their client and constituent bases to co-create and participate in the program. Grassroots partners like Telpochcalli Community Education Project were essential to establishing trust with community members, and instilling the program with a grassroots, participatory culture. Artists, healers, trauma therapists, researchers, attorneys and spiritual leaders came together to support the leadership development of survivors who lead HTA's work today. Each of these partners embraced risk-taking and challenging the boundaries of their own disciplines to try something new. In taking a chance in supporting an emerging social movement strategy that did not cleanly fit within their own training, they addressed critical gaps in existing responses to gender-based violence. This bold collective effort shifted the broader cultural narrative from survivors being victims in need of help to survivors being powerful leaders capable of enacting broad social change.

## **Survivor-led organizing requires intersectional analysis and a flexibility in issue-based organizing and advocacy.**

For HTA, the purpose of survivor-led organizing is not just to dismantle the systems of inequality that enable gender-based violence. It is also to return power and voice to survivors, and allow them to transform the course of gender-based violence in their own lives, the lives of those they love, and the generations that follow them. In order to do this, survivor-led organizing requires thinking outside of the normal parameters of grassroots organizing or issue-based advocacy. Creating this kind of change requires looking at survivors as whole humans, with complex and intersecting needs, desires, and dreams. To address the complex realities of survivors' lives requires adaptive and flexible thinking, and sometimes challenging the relatively stable categories that other organizations and movements use to focus their own work. An example of this challenge was when survivors chose to focus their campaign on comprehensive sexual health education, an issue that many stakeholders struggled to connect to gender-based violence. Only by deeply listening to survivors identify the root causes of violence in their own lives – including a lack of access to education about consent – was it possible to adopt a more expansive and visionary strategy for reducing gender-based violence in marginalized communities.

**“Power concedes nothing without a demand.”**

**-Frederick Douglass**

An ongoing challenge is ensuring survivors have access to processes of structural power. There were many moments during the SexEd Works campaign where it was necessary to educate power-holders that survivors are more than just clients, victims, or a population to be helped. HTA was constantly working to help institutions, decision-makers, elected officials, and the media understand that survivors hold deeply valuable expertise. Advancing this message required survivor-leaders to rigorously prepare for the many ways in which their voices might be dismissed or erased, and continuous education and accountability of power-holders about the tremendous costs of shutting survivors out of critical decisions and strategies to ensure safety, dignity, and opportunity in their communities. Creating accountability when survivors are routinely shut out of decision-making processes, while simultaneously processing the trauma these experiences cause, is a persistent challenge of survivor-led organizing.

# Conclusion

In one of the first sessions of Healing Generations, participants learn about the concept of gender liberation.<sup>59</sup> A basic premise of gender liberation is that every person should have the opportunity to be their full and whole selves, without fear of punishment for how they choose to express their gender. It is difficult to think of a loftier goal than gender liberation, in the face of deeply embedded attitudes and expectations about how a person should look, act, love, and think based on their perceived gender. Actualizing gender liberation in our world requires more than a good training, a campaign victory, or a powerful coalition. It requires a deep analysis of what causes people to use violence to enforce conformity, and what other futures are possible in the absence of this violence. It requires a new way of organizing. HTA strives to create opportunities for those most impacted by gender-based violence to explore these questions, and imagine the social, cultural, and economic conditions that could bring gender liberation into being. HTA is grateful to the insightful and unrelenting political commitment of the survivors who are building this future, and the allies who support their vision.

<sup>59</sup> In the past two cohorts, the concept has been taught by Mahdia Lynn, the founder of Masjid al-Rabia, the only trans-led mosque in North America.

## Appendix 1. Concept Mapping Data

Project Demographic Data*		
	Brainstorming (N=47) n (%)	Sorting & Rating (N=38) n (%)
Gender		
Female	44 (96)	33 (87)
Male	0	4 (11)
Gender Non-Conforming	1 (2)	0(0)
Unknown	2 (4)	1 (2)
Age		
18-24	1 (2)	2 (5)
24-34	5 (11)	6 (16)
35-44	17 (36)	9 (24)
45-54	11 (23)	9 (24)
55-64	7 (15)	10 (27)
65+	5 (11)	2 (5)
Language at home		
English	4 (9)	0 (0)
Spanish	26 (55)	27 (71)
Korean	7 (15)	5 (13)
Tagalog	1 (2)	0 (0)
English and another language	9 (19)	6 (16)
Ethnicity/Race		
Non-Hispanic White	4 (9)	4(11)
Hispanic/Latino/a	26 (55)	27 (71)
Asian/Pacific Islander	16 (34)	7 (18)
No Response	1 (2)	0 (0)
Employment Situation		
Full time, single employer, wages	10 (21)	9 (24)
Full time, single employer, tips	1 (2)	1 (2)
Part time, single employer, wages	2 (4)	3 (8)
Part time, single employer, tips	1 (2)	2 (5)
Two employers, wages	1 (2)	2 (5)
Two employers, tips	1 (2)	1 (2)
Unemployed, but want to work	4 (9)	1 (2)
Self employed	0	2 (5)
Homemaker/stay at home	17 (36)	10 (26)
Unable to work	1 (2)	1 (2)
Retired	3 (6)	0 (0)
Homemaker and student	1 (2)	0 (0)
Part time, wages and student	0	2 (5)
Unemployed but want to work and home-maker	0	1 (2)
No response/unclear	5 (11)	3 (8)

\* Not unduplicated – 16 individuals participated in both activities.

