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Kristen P. Mark & Laura M. Vowels

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# Sexual consent and sexual agency of women in healthy relationships following a history of sexual trauma

# Kristen P. Mark D<sup>a</sup> and Laura M. Vowels D<sup>b</sup>

<sup>a</sup>Department of Kinesiology & Health Promotion, University of Kentucky, Lexington, KY, USA; <sup>b</sup>Department of Psychology, University of Southampton, Southampton, UK

#### ABSTRACT

Sexual consent is a crucial component of any healthy sexual relationship. Women who have experienced sexual trauma are uniquely positioned to provide insight into sexual consent given that they have lived through sexual violence in the form of non-consensual sex and can reflect upon the importance of consent. Forty-one women completed an in-depth semi-structured phone interview and their responses were analyzed using reflexive thematic analysis. The analytic process resulted in the identification of nine themes in total; three related to consent in their current relationship and six related to the communication of needs and wants. Participants were divided between consent within their relationship as 1) explicit; 2) non-explicit; and 3) evolving. In their experience of feeling empowered to voice their needs and wants, participants indicated this to be 1) evolving; 2) requiring vulnerability and safety; 3) a nonnegotiable requirement; 4) inherently interpersonal; 5) something that takes work: and 6) involves echoes of shame and trauma. These results highlight the complicated nature of negotiating consent and finding sexual agency. They also provide unique insight into consent and agency in a sample of women who have experienced sexual violence and have shown resilience in their pursuit of a healthy relationship post-sexual trauma.

**ARTICLE HISTORY** 

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There has been a notable shift in the importance society has placed on sexual consent and the notoriety it has received in recent years – in part due to campaigns such as #MeToo or #TimesUp and an increased number of women feeling empowered to voice their experiences. This has highlighted the significance of studying sexual consent to better understand what sexual consent means and how it should be expressed in and out of relationships. Sexual consent is a crucial component of healthy relationships and sexual encounters (Carmody, 2003). Definitions of sexual consent vary (Jozkowski, Peterson et al., 2014) and there is often ambiguity in what constitutes consent, but it is generally defined as 'one's voluntary, sober, and conscious willingness to engage in a particular sexual behaviour with a particular person within a particular context' (Willis & Jozkowski, 2019, p. 1723). The majority of existing sexual consent research has focused specifically on college students due to the large number of sexual assaults that occur on college campuses (Muehlenhard et al., 2016; Willis, Blunt-Vinti et al., 2019). Although the experience of college students' consent is crucial to understanding consent during a formative sexual time, it does not provide a comprehensive understanding of sexual consent beyond those years. In the present study, we addressed the question of what healthy sexual consent communication looks like in a community sample of women ranging in

CONTACT Kristen P. Mark kisten.mark@uky.edu Department of Kinesiology & Health Promotion, University of Kentucky, Lexington, KY 40506, USA

age who have a history of sexual trauma but are now in a healthy consensual sexual relationship. These women are uniquely positioned to provide insights into sexual consent given that they have lived through the result of nonconsensual sex and can reflect upon what makes consent particularly important to them in their relationships post-sexual trauma.

Communicating sexual consent is crucial for a healthy sexual relationship, and the effects of nonconsensual sex can be far-reaching. Estimates of the frequency of sexual assault varies somewhat but overall somewhere between one in three to one in five women have experienced sexual assault (Katz et al., 2019; Novack, 2017; Smith et al., 2018). Many survivors of sexual assault experience symptoms of trauma as a result (Frazier et al., 2009; Paquette et al., 2019; Tansill et al., 2012). The sexual trauma symptoms, in turn, are associated with negative outcomes such as poorer mental health (Christopher & Kisler, 2012; Frazier et al., 2009; Jordan et al., 2010; Mengo & Black, 2016), lower academic performance (Paolucci et al., 2001), unhealthy sexual behaviour (Paolucci et al., 2001), marital difficulties (Godbout et al., 2009), and issues with parenthood (Zvara et al., 2015). Some research has examined the effect sexual trauma may have on romantic relationships post-trauma. For example, O'Callaghan et al. (2019) found that sexual experiences change after sexual assault and potentially impact future relationships. In the current study, we also addressed how the women in our sample have managed the consequences of their experiences and moved towards being able to express their consent, needs, and desires in their current relationships.

There are various ways to communicate sexual consent. Many state legislations in the US now require affirmative consent, which means providing a conscious and voluntary agreement to engage in sexual activity and explicitly states that lack of protest, resistance, or silence does not mean a person is consenting to sexual activity (e.g. California State Legistlature, 2014). Affirmative consent goes one step further from 'no means no' to 'yes means yes;' for consent to be affirmative, one must provide a clear 'yes' rather than rely on an absence of a 'no' (Novack, 2017). Best practice requires both parties to communicate their consent to sexual activity (Beres, 2007; Muehlenhard et al., 2016), which can be communicated verbally or nonverbally, explicitly or implicitly (Willis & Jozkowski, 2019). While affirmative consent requires individuals to express consent verbally, research has shown that people are more likely to use non-verbal cues to express their consent (Beres, 2010, 2014; Beres et al., 2004; Hickman & Muehlenhard, 1999; Jozkowski, Peterson et al., 2014; Jozkowski, Sanders et al., 2014).

The sexual precedent theory posits that sexual consent becomes expected once partners engage in consensual sex (Livingston et al., 2004; Shotland & Goodstein, 1992; Willis & Jozkowski, 2019). In fact, many studies have found that a history of sexual relationship is associated with the assumption that a partner is interested and consents to future sexual activity (Beres, 2010, 2014; Humphreys & Brousseau, 2010; Humphreys & Herold, 2007; Muehlenhard et al., 2016), and partners are more likely to assume consent and less likely to explicitly ask for consent as the number of sexual events increases (Livingston et al., 2004; Shotland & Goodstein, 1992; Willis & Jozkowski, 2019). However, nonconsensual sex can also occur in relationships (e.g. marital rape, forced marriages, coercive relationships) highlighting the importance of consent in romantic relationships and not only in casual encounters.

Furthermore, researchers have suggested that consent can be viewed as a discrete event that occurs in the beginning of sexual activity or even in the beginning of a relationship or as a continuous, ongoing negotiation at each stage of the sexual activity (Beres, 2010, 2014; Muehlenhard et al., 2016). Because of the existence of nonconsensual sex in relationships as well as in casual encounters (Willis & Jozkowski, 2019), ongoing sexual consent and open communication around sexual consent and needs is important at every stage of a relationship, but the way in which these are communicated may change over the course of the relationship. For example, some couples may have a conversation about their preferences, needs, and boundaries in the beginning of their relationship and adjust as and when needed, whereas other couples may prefer to negotiate each sexual encounter separately. Additionally, Burkett and Hamilton (2012) argued that many standard models of sexual consent fail to address women's experiences of implicit pressure during sexual

encounters that can disrupt their ability to negotiate consent. Feeling truly sexually empowered can enable women to shed the implicit pressure and to express sexual consent as well as their wants and needs in sexual relationships. The role of sexual agency, where one not only consents to sexual behaviour but feels empowered to ask for their sexual needs to be met (Burkett & Hamilton, 2012; Curtin et al., 2011), may be particularly salient in the context of relationships post-sexual trauma.

Women who have experienced sexual trauma are uniquely positioned to have a clearer understanding of consent and, importantly, the impact of the absence of consent. Previous research has addressed what sexual consent looks like in relationships (e.g. Muehlenhard et al., 2016; O'Callaghan et al., 2019; Willis & Jozkowski, 2019) but we are aware of no studies to date that have addressed how women with a history of sexual trauma navigate sexual consent, safety, and agency in their subsequent healthy relationships. In the current study, we aimed to understand the extent to which women who have previously experienced sexual trauma but are now in a healthy relationship understand and navigate consent and feel empowered to voice their needs and wants in their relationship.

# Method

# Participants

In this study, we recruited 41 women to participate in a semi-structured phone interview that lasted an average of 42 minutes (range of 28 to 78 minutes). Data were collected during late 2018 into early 2019, and we stopped recruitment once data saturation was reached. Participants were recruited primarily through online advertisements placed on Twitter and Facebook relying on social network snowball sampling, with some advertisements posted in cafes and around a mid-sized university campus in a medium sized city in the United States. The majority of participants resided in the United States (n = 35; 85.4%), with a minority residing in Canada (n = 3; 7.4%), Australia (n = 1; 2.4%), England (n = 1, 2.4%), and New Zealand (n = 1, 2.4%). Participants were eligible to participate in the study if they identified as a woman, were over the age of 18, had a history of sexual trauma, and were currently in what they considered a healthy sexual relationship. Both history of sexual trauma and healthy sexual relationship were self-defined by participants. In the recruitment process, we screened for sexual violence in their current relationship by asking participants if the sexual trauma they experienced happened within their current relationship and if they have ever felt unsafe in their current relationship. None of the participants indicated sexual violence in their current relationship.

Participant ages ranged from 18 to 55, with an average age of 28.9 (SD = 7.58). The majority of the sample identified as heterosexual (n = 27; 65.8%), with a minority of participants identifying as bisexual (n = 5, 12.2%), lesbian (n = 1; 2.4%), pansexual (n = 2; 4.9%), queer (n = 4; 9.8%), and questioning (n = 2; 4.9%). All but two of the participants were in a relationship with a man at the time of data collection (one participant was in a relationship with another woman and the other was in a relationship with a non-binary partner), and the average relationship length was 50.78 months (4.23 years) with a range from 3 months to 29 years. A minority of our participants (n = 3, 7.3%) indicated that they were in a polyamorous relationship. Only one participant was an undergraduate college student at the time of data collection; two were graduate students and the rest were non-students. Most of the participants were self-described as White (n = 33, 80.5%), though 8 (19.5%) self-identified as a racial or ethnic minority (self-described as one of the following: AfroLatina, Asian, Black, Filipino, Jewish, Hispanic). Most of the participants experienced sexual trauma after the age of 12 (71%), with 25% having experienced sexual trauma before the age of 12 and 4% who reported sexual trauma having happened both before and after the age of 12.

# Measures

The current paper was part of a larger study aimed at understanding how prior sexual trauma experience informs navigating communication, consent, sexual pleasure, and other aspects of romantic relationships in women. The current paper aimed to understand sexual consent and sexual agency in the context of women who had experienced sexual trauma and were in healthy sexual relationships at the time of the study through the iterative analysis of answers to the following questions: 'What does sexual consent look like in your current relationship?' and 'Do you feel safe voicing your sexual wants and needs?'

# Procedure

When participants were exposed to the advertisement for the study, they were instructed to email the first author to schedule an interview where they were screened for eligibility. If the participant met eligibility criteria, they were informed the interview would be recorded for later verbatim transcription with any identifying information masked; they then provided verbal informed consent. All interviews were conducted by the first author over the phone regardless of geographical location to provide methodological consistency. Participants were free to skip any question that made them uncomfortable or that they did not feel prepared to answer. At the end of the interview, participants were provided with a 20 USD online gift card as a token of appreciation for their participation and were provided the opportunity to access resources in case the interview brought up any feelings for them that needed to be further processed. All interviews were audio recorded and transcribed verbatim. Any identifying information from participants were removed from the transcripts, and names were replaced with pseudonyms. All protocol were approved by the first author's institutional research ethics board.

# Analytical approach

In this study, we followed reflexive thematic analysis taking an inductive approach based on Clarke and Braun (2013) to reflect the explicit content of the data provided by the women. Both authors familiarised themselves with the data before creating a series of codes that were identified from the interviews to provide insight to the research questions of interest. These codes were then classified into themes and an iterative process was followed between both coders in generating, reviewing, defining, and naming themes from the codes generated by the data. Any disagreements regarding the classification of codes were discussed until 100% agreement could be reached. Although the transcripts were taken and analysed as a whole, the classification of codes into themes was conducted separately for our two research questions. The analytic process resulted in the identification of three themes on the function of sexual consent in their current relationship and six themes on the evolution of the sexual agency to communicate needs and wants. We also had an auditor familiar with the study and thematic analytic technique but not familiar with this particular research question read through the results and assess any inconsistencies with the themes or thematic representative quotes. We used '[...]' signals to remove unnecessary detail or provide needed additional information in the guoted data provided. All identifying information was masked in the guotes provided to support the themes. Additionally, spelling, grammatical, and typographical errors were all corrected to aid readability in the quoted data.

# Results

The analytic process resulted in the identification of nine themes in total: three related to sexual consent in their current relationship and six related to sexual agency and the communication of needs and wants. Participants were divided between consent within their relationship as (1) explicit,

(2) non-explicit, and (3) evolving. In their experience of feeling empowered to voice their needs and wants, participants indicated this to be (1) evolving, (2) requiring vulnerability and safety, (3) a non-negotiable requirement, (4) inherently interpersonal, (5) something that takes work, and (6) involving echoes of shame and trauma.

# Sexual consent in healthy relationships post-trauma

# As explicit

Participants indicated that consent was explicit in their relationships; some found it to be enthusiastic, where consent communicated pleasure or consent was seen as sexy. This pleasure and the importance of verbal communication as it contributes to pleasure is stated by Lucy, a 25-year-old participant, who said 'I have had relationships before where, and I really loved it when they asked like every time [...] that's really hot.' Or as expressed by Heather, a 42-year-old participant:

Yeah, there's a whole lot of verbal communication. Even after us being together for eight years. We're fucking a lot. Even if we've done an act a hundred times, so moving in slowly, and how do you feel about that? And how's the position? And I mean, it's not always that much talk, but it's still pretty regular. That's what makes it feel so good; it makes it pleasurable. And I feel like that is because of past trauma. [...] So yeah, the verbal communication is big.

Others experienced consent in their relationships as verbally explicit, but expressed this as a form of respect that is necessary and not explicitly tied to pleasure. Or they discussed sexual consent as ongoing in their relationship. For example, Jess, a 26-year-old participant, stated:

[Consent] definitely, definitely has a different definition than it used to have. It is explicit. One thing that makes me have a great deal of, not just love, but yeah, just respect, simply, is before I even told him about my sexual trauma, he was always big on consent. I don't know if it was because of dealing with someone prior that had sexual trauma, but things like he absolutely, if I've had too much to drink he will not, no matter how long we've been together, have sex with me. I know a lot of couples, or at least on the movies, they just start to kiss and then clothes come off, and then they have this romantic experience. But we have never had intercourse without one person saying, 'Are you okay with this? Do you want to have sex?' That was something prior to him ever learning about my trauma. Yeah, so that's been really big to me with consent.

Another example of this was provided by 37-year-old Kate: 'Yeah, it's very verbal. It's very careful as well. I talk out whatever is going on and depending on how I'm feeling, either we'll continue or we'll stop for the night and watch a movie or something or just be together.'

Explicit consent was also articulated by 22-year-old Cait, 'We straight up ask each other, because that's a huge thing for me and for him. Yeah, we ask. We say, "Is this okay?"

Sexual consent as ongoing and as something that some women had to educate their partners on was stated by Emily, a 26-year-old participant:

Everybody that I date has given me the feedback that I'm very good about consent. It is always voiced every step along the way. It is asked about. If it's not, then I leave. So, consent is a really active ongoing process that takes practice. I have definitely made my girlfriend role play with me just because neither of us as women are good at asking for what we want or moving things along. So, sometimes you've just got to sit down and get used to the way that words feel in your mouth and role play a little bit. I guess there's like sexual role playing or whatever, but not like, just like we are going to practice having this conversation right now. Like you're getting a class on consent whether you like it or not. Complete with handouts. I'm not fucking around.

Explicit consent was also something that participants expressed being educated on by partners, as expressed by Katarina, a participant in a polyamorous relationship, age 22:

And then in the other relationship that I'm in, the triad, that was a little bit different. So, the negotiation that they preferred around consenting to things was more of everything is on the table except for what you put off the table, which was different for me and I wasn't sure if I liked that idea. But we literally took out a big, long list, like a packet of various activities and I went through it and filled it out extensively and put little notes next to things. Yeah, like color coded what I was super into and color coded what I really didn't want or was like on the fence about. So when I go up and visit them, I literally bring the packet. And stuff has changed in the last few months, so I went through it and I filled it out again. So I bring my packet and it has everything in there and if there's

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something specific we're going to do that maybe I haven't done before, we'll have a conversation about it beforehand. It's like so obnoxious and extensive but it's useful.

#### Or in the example of 24-year-old Corrine:

He had said, you know, 'I don't want to have sex with you unless you can look me in the eye and tell me that you genuinely want to have sex with me. And want you to just actively say it and not be weird about it.' Like, 'I want you to be as open and comfortable with the idea to the point where you can look at me and say it yourself.' Which was something that I had never heard before in my life. And I really thought that that was pretty incredible, actually.

Sometimes the women expressed that they relied on their partners to get explicit consent, like in the case of 30-year-old participant Beth, who said 'I think he's much more comfortable with going like, "Hey, do you want to have sex tonight? I'm going to go take a shower and then we can get into bed." He's a lot freer to ask it explicitly and to not pursue anything if it's not asked explicitly.'

Lessons about how explicit consent can be communicated without someone taking it personally was also common in the interviews. This is highlighted nicely by 28-year-old participant Mel:

Yeah, so we talked about explicit consent and he was just like, 'You know, if at any point you're ever uncomfortable, just tell me.' I feel in past relationships when I would be feeling really awful or not in the mood to be sexual, if I told them no, they would internalize that and blame themselves or blame me. And now I feel like if you want to go for it, you want to initiate sex or something, go for it. And if I'm reciprocating those things, then I'm all for it, and if not, I'll tell you and I'll stop you and just be like, 'I love you and I think you're super attractive and I want to have sex with you but right now I'm just not in the mood.' And think that that works really well with us especially.

#### As non-explicit

Consent as non-explicit was expressed by the women in this study exclusively in the context of a longterm relationship, with explicit consent becoming unnecessary over time. There were not any women in the sample who expressed non-explicit consent as nonconsensual in any way. In fact, overwhelmingly, the women indicated non-explicit consent was very clear in their relationships, such as with 26-year-old Cindy: '[showing consent] is more behavioural really, like, reciprocating. He's kissing me, I'll kiss him back, and I feel like that's consent enough for us at this point, or we know that this is okay, that this behaviour is okay.' Body language was reported as being used as a clear indicator of consent, such as with 27-year-old Mia, 'we understand body language and how things are going' or with 42year-old Clare, 'I mean, it depends, you know? Sometimes it's raised eyebrows, raised eyebrows. Okay – that's consent.' Allie, a 22-year-old participant, stated 'But for us, we know each other's body language well enough that we don't necessarily have to verbalise it.' And from 22-year-old Katarina: 'I still trust him to read my body language. Like if I'm being grumpy, I trust him to not do the thing [sex].' The mutual agreement between partners was also clearly articulated by 24-year-old Amy, who stated:

I don't think that we've ever had to say, or ask for consent really. I think that we have just like a mutual agreement of consent whenever we start to feel sexual, or we go into the bedroom and start to have foreplay. We don't ever actually say, 'Do you want to have sex?' Or anything. We kind of just as we're kissing and everything, it kind of just happens.

The reliance on non-verbal cues can also amount to a scaffolding of a variety of signs, as expressed here by 27-year-old Kristy:

So there's a lot of overlapping actions, and I think more recently it has developed into verbal cues or physical shifts in body position or body language, that kind of thing that we have agreed as this means that I want to continue, or this means that I want to stop. I think that really central to that is eye contact and just checking in with each other.

# As evolving

For some participants, consent is constantly evolving in their relationship and can be complicated, especially as it relates to their prior experiences of sexual trauma. For example, as Stef, a 26-year-old participant stated:

He waits for a direct yes. I think it's good because he respects the fact that I have consent issues, but it sucks sometimes, because I guess it kills the mood kind of. Because then I think like, 'Well, if I wouldn't have told him [about prior sexual trauma] then he wouldn't ask me, but then I want him to ask me, but I don't because it reminds me of why he has to ask me in the first place.

The evolution of consent in relationships was also regularly expressed as an ongoing discussion of boundaries. This is articulated by 25-year-old Alicia, who stated:

I've never felt that I couldn't, that we couldn't discuss it, about different sexual activities. And we definitely have conversations about our own boundaries for different activities and what we're comfortable with and not. And those are verbal conversations we'll have outside of a sexual context so I think that's part of it. So my partner knows my boundaries and I'm aware of their boundaries for future interactions but I would say consent at the time, it's not that perfect image of 'you consent to xyz' but I feel positive that I can provide my consent and it is ongoing and checked in.

Discussing consent to specific sexual behaviours was also clearly articulated by 24-year-old Callie:

We've walked through some scenarios that we're okay with and not okay with. I've explicitly told him even though he's never requested this of me, I just explicitly let him know I'm never going to want to do anal. This is never going to be something I'm ever going to want. I've also told him conditions in which I'm okay with him trying to engage with me while I'm asleep, essentially telling him that I'm okay with a lot of stuff as long as he just doesn't try [penis in vagina]. So, we have talked about things in which we are okay with and not okay with. Yeah, often times that's before anyone even makes a request for it to happen.

A minority of the women expressed how it was sometimes difficult to develop a clear pattern of consent and this evolution of consent is still something that can be hard to navigate. Take Patti, an 18-year-old participant, who said:

18-year-old participant, who said: There have been times at the beginning [of our relationship] where I haven't said no, but I will just lay there. Instead of speaking up, it makes me so uncomfortable to speak up that I would rather just be quiet and let it finish instead of speaking up or saying anything ... things are better now, but it can be hard.

Or from 42-year-old Heather: 'Early on in our relationship maybe there was actually less talking, and I was holding it in trying to act like I was fine, but I wasn't. And at some point, whether his therapy or my therapy recognised that's not helping us to progress.'

#### Empowerment to voice sexual needs and wants

# As evolving

There was also an evolution to the ability to voice needs and wants in the women in this sample. As 25-year-old Lucy expressed: 'I think really for me, getting [comfortable voicing needs and wants] was about making enough mistakes to realise that I needed to be up front with how I felt about things, and not let myself get walked on. That's definitely something that I'm still growing with.' Or as 28-year-old Mel indicated:

A long time ago I wouldn't. I felt like I disliked myself so much that the bad things that were happening to me or the awful things in my relationships that were happening to me is what I deserved, and that that's how it was and that's how it was going to be, and I just had to accept that. I think through therapy I've learned that I am important too and my needs are important, and if those needs aren't being met, I can say that to my partner and they can choose to either try to meet those needs or tell me that that's out of the question and move on.

The evolution of empowerment to voice needs and wants was also expressed by some as having to evolve from non-sexual to sexual contexts, as demonstrated by this quote from 34-year-old Kate:

So, I have always generally felt safe voicing general needs and wants. 'I want this for dinner, or it's your turn to do the laundry.' But, in terms of sexual or intimate needs, I had always theoretically felt comfortable, like in theory. I would, be comfortable voicing my needs, but I was a little bit more willing to be like 'oh if that's not what you want, then that's okay.' And it took able time to be able to say 'well, I'm glad that's what you want and I'm happy to acquiesce, but this is what I want too.' And be able to voice those needs.

Our data showed that it was empowering for women when they did see the evolution of voicing their needs and wants come to fruition, as expressed here by 33-year-old Angela:

I would say for many years of my life as being a sexually active woman, I probably did not ask for what I wanted, or maybe didn't even know what I wanted or what to ask for, and maybe on some level didn't think that my needs were even that important, and I think that honestly, experiencing true loving relationships are what I have considered to be true loving relationships, have I guess empowered me more to ask for what I want and made me feel safe like I could do that and I was worth doing that, and that kind of thing. I think that I have just as a person, grown to know myself and my own needs more, and have gotten more comfortable voicing those to other people and knowing when to take care of myself, honestly. I feel like I'm more in tune with that now, more aligned with my own needs and wants, and when you're more aware of those, you're more capable of voicing that or setting boundaries or that kind of stuff.

# As requiring vulnerability and safety

In addition to the ability to voice needs and wants being an evolving process, many women talked about the importance of safety to be able to be vulnerable with someone. This experience was articulated by 26-year-old Mandy:

In this relationship [I can voice my needs and wants]. I haven't always, but I also think maybe in the past I haven't always felt safe. I guess it was about not wanting to be vulnerable or open up to those people because I didn't care about them or feel safe [...] I am willing to be vulnerable in this relationship.

#### Similarly, 25-year-old Holly said:

Yeah, I think feeling safe voicing needs and wants is totally critical and I think that's something that I didn't necessarily have in previous relationships and not being able to voice things. I really respect the insecurity of the person that I'm with, so if I'm saying something is not working for me, I'm not making a judgment. I'm not saying you're terrible in bed. You know, but some people will take it that way. I think it just goes back to maybe that we are in this relationship where I showed all my cards right away and so, from the very beginning I've been able to say, you know, like yes [I can voice my needs and wants].

The ability to trust a partner in order to open up was also really important for 24-year-old Sarah, who said:

You know if we were going to really kind of commit to this, then we were probably going to be in it for the long run, and I think that kind of provided the space to feel safe in voicing my needs and wants and giving me kind of the autonomy. Because I felt like I had a true partner now, not just a boyfriend and not just kind of someone who's there sometimes. I felt like I had a true partner, which gave me the safety to voice my needs and wants. This is the longest relationship I've been in to date, so I think that helps with becoming more and more comfortable with each other, especially since he's the first that I was able to talk to about my trauma. So things like that have contributed to me feeling safe and open and this is probably the most open relationship I've been in and I'm really grateful for that.

# As a non-negotiable requirement

Given the history of sexual trauma in the sample of women, the ability to voice wants and needs was a non-negotiable requirement for many of the women. This sentiment is summed up nicely by 24-year-old Callie, who said:

I realize that if I don't express [needs and wants] I'm going to get used in a way that is traumatizing. And if I express them quietly I may or may not have those wishes respected, but if I express them loudly and with clear intent in my voice there can be no argument – this is not up for debate.

Participants also made this requirement clear to their partners early on in the relationship, articulated here by 27-year-old Mia:

...It was back when I started to take the power back, of my own body and my own life. I can't recall exactly what it was that made me feel like I wanted to take the power back of my own life and my body. [...] When I decided to take that power back in my life, I decided that I would communicate everything that I wanted. The importance of

making sure that I was happy and I felt good in relationships. Nobody's a mind reader, so it was about explaining this is what I would like. I do that from the outset now. It is a requirement.

Placing the importance on voicing needs and wants as non-negotiable was something learned over time, as expressed by 25-year-old Holly, who said:

When I was in high school and even starting in middle school, I did not have any boundaries. I just said yes to anything if someone showed any remote interest in me, I did whatever they asked. [...] My needs were not considered and definitely not voiced. That isn't acceptable now.

#### As inherently interpersonal

The women in this study also discussed how gaining the empowerment to voice their needs and wants relied on support from others, specifically through partners and friends. For example, 21-yearold Hannah reported struggling with expressing her needs and wants to her partner, so she relies on a go-to friend for support:

There's always that anxiety that comes with [expressing needs and wants to him] and I think that's just almost inherent now. It's not going to go away that easily, no matter how much I trust him. There's always that nervousness that comes up at first. I do have a friend that I talk to beforehand to help get that nervousness out almost start the talk in advance with her so that I can then talk with him later.

For 33-year-old Angela, partners were crucial to helping her get to a point of feeling safe voicing needs and wants: 'I think that honestly, experiencing true loving relationships have empowered me to ask for what I want and made me feel safe.' This was also the case for 37-year-old Ariel, because she didn't feel like others in her life had allowed for the space to really express needs and wants before her current partner:

In my current relationship, he is my best friend and I never felt like I had a best friend or somebody that I could really count on prior to him in my life, including my parents. Like I always felt like everybody protected [my younger sister] because she wasn't as strong as me and I also never had any friends that were like there for me 100% and he is. That, having him and having that support, let me feel good and free to express my needs and wants.

#### As something that takes work

Many women talked about how it took a lot of work to get to a place of being able to openly express needs and wants to a partner. This work took a variety of forms, including writing, reading, therapy, and practice. For example, Lucy, a 25-year-old participant noted that writing was really helpful for her to practice:

I did a lot of writing and just spelling out what I felt over and over again, and kind of made it a practice. Now that is really where I trust myself the most at this point. That's where it becomes empowering. You feel empowered to [express needs and wants], and in doing so, you feel more empowered every time.

Many of the participants have been to therapy to work through their experience of sexual trauma, and in working toward feeling safe to voice needs and wants, 28-year-old Mel said:

I think through therapy I've learned that I am important too and my needs are important, and if those needs aren't being met, I can say that to my partner and they can choose to either try to meet those needs or tell me that that's out of the question and move on.

Katarina, a 22-year-old participant, stated:

So in other relationships I haven't felt unsafe voicing [needs], but I haven't been as quick to voice them. And in my current relationships, I've worked a lot more personally at using my words and bringing those things up when they're relatively fresh as opposed to waiting and waiting and waiting to bring them up.

For some participants, the work they did to get through the experience of sexual trauma was helpful for voicing needs and wants. This is articulated here by 26-year-old Cindy:

So it took kind of a long time to work through some of that [sexual trauma], and I think I still am. But I think working through that has helped me figure out ways to kind of say what I need and what is too far for me. So trying to help me draw lines so that I don't end up in that situation anymore, I think was kind of a big thing.

# As involving echoes of shame and trauma

Sometimes, participants indicated great difficulty in asking for consent and voicing needs or wants to a partner due to the extent to which it reminded them of their sexual trauma or brought about feelings of shame within them. For example, when discussing comfort with expressing needs and wants to her partner, 25-year-old Jos said:

I mean, it's kind of like an across-the-board no. Yeah. I think it's deep-seeded [shame]. I don't feel like my voice is important. I don't feel like my needs matter. I don't feel like ... I feel a lot of times, if something that I'm hoping for just comes to me, then that's what I deserve, and if it doesn't, then kind of like tough shit. You know what I mean?

Or 29-year-old Margo said 'Yeah, [voicing my needs and wants] is a struggle for me and I think that that's definitely related to the sexual trauma, that it's harder for me than I think on average.' And 22-year-old Cait highlighted the role of shame in saying, 'I do [express my needs and wants], but I think also something holds me back from saying everything. It is more of just my own personal ... I guess I sometimes feel shame.'

Some women, like 33-year-old Jane, reported being confident to voice their needs and wants most of the time, but once in a while they see the deeply engrained misogynistic views sneak in: '[I express my needs and wants] almost always, yes. Oh, hang on. I think, I don't know if that's internalised misogyny or whatever. I still hang on to a few, I don't know, maybe 5% or 10% of the time, ideas like "if I say this he won't like me" bullshit, but almost always.' Heather, a 42-year-old participant, talked about how working through the shame is a work in progress:

There's still a level of shame wrapped up in [voicing needs and wants]. But, I'm so very focused on working on that. And I feel that the level of safety and comfort is on my end, at this point it's not because I don't feel safe with my current partner. I mean, he provides such a really awesome space for me [to] work on things. He's so non-judgmental, and you know, willing to receive whatever I want to share.

# Discussion

This paper drew upon the experiences of 41 women who had a history of sexual trauma but had moved beyond their trauma into healthy sexual relationships. The study aimed to understand how these women navigated sexual consent in their relationships and the extent to which they felt empowered to voice their sexual needs and wants with their partner. Through reflexive thematic analysis, we found that sexual consent was explicit for some women, non-explicit for others, and in many cases, evolving. Sexual agency and empowerment to voice needs and wants was also evolving for many of the participants. It was said to require vulnerability and safety, social support through friends or partners, and, for some, it involved echoes of deeply rooted shame and trauma. For some women, the ability to voice needs and wants to a partner had become a non-negotiable requirement for them to be in the relationship, and almost all women indicated it to be something that takes work. The work it takes to feel empowered to voice needs and wants was not only due to their prior experience of sexual trauma, but due to the society within which we live that does not encourage women to voice needs and wants generally, let alone sexually. An overarching finding was that navigating sexual consent and developing agency are complex and do not happen without specific attention to cultivating consent communication, even in the context of healthy long-term relationships.

Consent was explicit for many women in this sample in part due to their experience with sexual trauma. For some, this was something their partners were adamant about. This may be because all

but one woman in the current study had disclosed their history of sexual trauma to their partner; that level of disclosure may not exist for all women who have experienced sexual trauma. For a minority of participants, the act of getting explicit consent from their partner brought up feelings of confusion because it reminded them of the fact that their experience of non-consensual sex was traumatic. Most women indicated they were comfortable refusing sex verbally, though in the course of a longer-term relationship they did not feel this was necessary due to their partner's ability to read their bodily cues. This is in line with prior research that has found a history of a sexual relationship is associated with the (potentially inaccurate) assumption that a partner is interested in and consents to future sexual activity (Beres, 2010, 2014; Humphreys & Brousseau, 2010; Humphreys & Herold, 2007; Muehlenhard et al., 2016) and partners are more likely to assume consent and less likely to explicitly ask for consent as the number of sexual events increases (Livingston et al., 2004; Shotland & Goodstein, 1992; Willis & Jozkowski, 2019). Our findings were also consistent with those of O'Callaghan and colleagues (O'Callaghan et al., 2019) by indicating that when partners act as support providers for sexual trauma, they tend to exercise caution in approaching intimacy.

The negotiation of consent on a behavioural level varied. Some women spoke about negotiating consent in the beginning of the relationship and not needing to as the relationship length increased. Others said they explicitly negotiated sexual consent before each sexual activity, whereas still others reported that they engage in ongoing checking in throughout sexual activity (some verbally but most by picking up on body language and nonverbal cues). Requesting or providing explicit verbal consent was expressed by many of the women to become unnecessary as trust, safety, and comfort in their relationship increased, allowing them to be more open about their sexual needs and wants. This transition is consistent with the women who discussed how their sexual consent practices have evolved over time, which is in line with previous research suggesting that as the relationship length increases, sexual consent becomes more implicit (Livingston et al., 2004; Shotland & Goodstein, 1992; Willis & Jozkowski, 2019).

Time was important for the ability to express sexual agency and communicate consent through feeling safe communicating needs and wants in a relationship. Some women stated that if they did not feel empowered and safe to express their wants and needs, they would be treated in a way that was traumatising, highlighting the need for sexual empowerment to feel able to express sexual consent. Many of the women discussed learning to express their wants and needs in their relationships over time and often stated that their partners have helped them become safer and more comfortable to be able to communicate their feelings openly in their relationship. Many had sought social support but also worked through their issues of safety and being able to express wants and needs through therapy or explicitly practicing using the words necessary to communicate these things that are often difficult to navigate. Most women did indicate that their ability to express their needs and wants had to evolve over time, with some focusing on the role of their prior trauma and others not seeing it as impacting the evolution.

Despite the overwhelming message from these women as one of resilience, some women did indicate echoes of their sexual trauma and resulting shame from that experience. Some fought voices within themselves telling them they did not deserve to get their wants and needs met. They acknowledged this as problematic and as a symptom not only of their history of sexual trauma but also of our society as a whole that does not do a good job of teaching girls and women to voice their needs. This points to a need to continue advocating for comprehensive sexuality education that validates women's sexual experiences as a natural part of human development rather than one that should be ashamed (Schneider & Hirsch, 2018).

Related, women tended to be surprised when their male partner requested explicit consent. Many women talked about how sensitive their male partners were to ensuring they got explicit consent and that it was refreshing for them to have a partner who cared about it that much. It was a demonstration of how much their partner cared for them. A lot of the women's experiences around this provided insight into how poor of a job we are doing in educating people on the importance of consent. Sex education efforts must work on creating programmes that have explicit consent embedded within, where this is not considered an incredible feat, but rather a normal part of a sexual interaction. Further, Willis, Jozkowski et al. (2019) found that sexual consent is not typically included in sexual health education standards and suggested ways in which consent education could be used to appeal to those who are opposed to comprehensive sexuality education. If comprehensive school-based sex education programs are not a possibility (as is the case in many states in the USA), it may be more effective to rebrand sex education or harassment education in order to emphasise the importance of these messages to parents, school administrators, teachers, and policy makers (Willis, Blunt-Vinti et al., 2019).

Our data also pointed to opportunities for monogamous couples to learn from the experiences of polyamorous couples. A minority of our participants indicated that they were in a polyamorous relationship, but in all three of those interviews, the women indicated extensive communication about consent. For example, one participant talked about how they create lists of what behaviours they are willing to engage in, they colour code the list so they know what is a yes, a maybe, or a no. The negotiation happens with any of the maybe behaviours and the negotiation is continual and revisited often. This is consistent with research showing that polyamorous couples tend to have stronger communication skills in general and specific to sex (Conley et al., 2017; Wosick-Correa, 2010).

A strength of this study was the diversity of voices that were heard; this is consistent with the diversity of women impacted by sexual trauma. Specifically, our sample had a large age range of participants; this is especially important given that much of the prior research on negotiating sexual consent has been conducted in undergraduate samples (e.g. Muehlenhard et al., 2016; Willis, Blunt-Vinti et al., 2019). Only three of our participants (7%) were students at the time of participation, and two of those were graduate students. Additionally, although 65% of the sample identified as straight, the 35% of sexual minority women represented identities of bisexual, lesbian, pansexual, gueer, and guestioning. Because all but two of our participants were partnered with men at the time of data collection, most of the data in this study on women's current healthy sexual relationships referenced sexual consent in the context of encounters with men. Therefore, it remains important for future research to acknowledge and examine the potentially different dynamics that exist, especially related to navigating sexual consent, in same-gender/same-sex relationships. We did not require that all participants be cisgender women, but we did require that the participant identify as a woman; this may have excluded non-binary or gendergueer individuals who could have provided unique insight into our research questions of interest. Although we would have liked to include more racial and ethnic diversity, there were seven diverse race/ ethnicities represented in the sample. We encourage future research to continue to be mindful in oversampling sexual or gender minority groups and racial or ethnic minorities, as was done in Beres et al. (2004) and Willis, Blunt-Vinti et al. (2019), to ensure their voices are being represented in the research. This study included women who have been impacted by sexual trauma and is not meant to generalise beyond that group or even within that group, but rather provide insight into the experiences of these 41 participants. Additionally, as a requirement for participation, the women in this study clearly acknowledged their experience of sexual trauma and results may look different in a sample less willing to acknowledge and process their sexual trauma. The results may also look different in a sample of women without a history of sexual trauma, and this is an area ripe for future research. Sexual agency in women in general is not encouraged or taught (Burkett & Hamilton, 2012; Curtin et al., 2011), so these results may be applicable to a wide range of women, but future research is necessary.

In sum, the data presented in this paper highlighted the complex nature of navigating sexual consent, the empowerment that can come from learning to express sexual agency through voicing sexual needs and wants to a partner, and the rich lessons that women who have experienced sexual trauma have learned in their path toward a healthy sexual relationship. Notably, sexual consent evolves over time within individuals and over the context of relationships. Future research should investigate the mechanisms of change that can be used in individual or couple's therapy for women who have a history of experiencing sexual trauma and their future romantic and sexual partners.

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No potential conflict of interest was reported by the authors.

#### Notes on contributors

*Kristen P Mark* is an Associate Professor in health promotion and Director of the Sexual Health Promotion Lab at University of Kentucky. Her research is in the area of sexual health and romantic relationships.

*Laura M Vowels* is a Doctoral Student in psychology at University of Southampton and a couple's therapist in private practice in the UK. Her research is in the area of close relationships and sexual functioning.

# ORCID

Kristen P. Mark ()) http://orcid.org/0000-0002-0524-3357 Laura M. Vowels ()) http://orcid.org/0000-0001-5594-2095

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