# Disabled Young People Talk: Sex and Consent

**Acknowledgement of Country**

This work was created on the lands of the Wurundjeri Woiwurrung people. We affirm that their sovereignty was never ceded and recognise that effects of colonisation are ongoing. We express our commitment to working alongside First Nations people for truth, treaty, and reconciliation.

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# Affirmative Consent and Models of Consent

**Consent and the law**
In Victoria consent is legally defined as a “free and voluntary agreement”. In July 2023, the Victorian government made some changes to the laws about consent by amending the Crimes Act (1958). Affirmative consent is now part of the legal understanding of consent.

So, what is affirmative consent?

Simply put, *everyone* involved in a sexual act is responsible for checking that anyone else involved is consenting. None of us can *assume* that the other person is consenting, whether it’s the first time or the 100th. It’s never okay to say “well they didn’t say no, so I thought it was fine.”

Consent is not the absence of a no, it’s the presence of a yes.

Checking in might look like asking

* “Is this okay?”
* “Can I touch you?”
* “Do you want to keep going?”

It also means stopping if someone says ”no”, “maybe”, doesn’t answer, or sounds unsure or uncomfortable.

Anyone can change their mind and withdraw consent at any time.

**What else do the new laws say?**

The law recognises some situations where someone can’t give consent. That includes

* In the face of force, harm or fear of force or harm of any type
* Pretending to use a condom and secretly removing it, or damaging it so it doesn’t provide protection, without the other person’s consent (also called ‘stealthing’).
* If they’re unconscious
* If they’re drunk or affected by drugs
* Coercion or intimidation- pressuring or threatening someone is not consent
* An abuse of power, like a teacher with a student, a boss with an employee, or a doctor with a patient. Someone might feel like it’s not safe if they say no. If someone can’t say no, that’s not consensual.
* Misleading someone about whether they’re getting paid for sex if that’s what everyone agreed to also violates their consent

That’s the law. There are also other ways we might think about consent in our lives. Here are some common ways of talking about consent.

**Enthusiastic consent**
You might hear people talk about enthusiastic consent. It's about looking for that active presence of a yes, but as the name suggests it's more than that- it’s also about looking for *enthusiasm*, that passionate or eager interest and desire.

When we talk about enthusiastic consent you might hear people say “if it’s not a *hell yes!!* Then it’s a no.”

Enthusiastic consent centres and celebrates desire without shame. It gives people the message, “Your feelings matter. If you don’t really, really want this, that is fine, and you don’t have to”. That’s a really important and reassuring message, especially in a culture that can pressure and guilt people into feeling obligated to say yes.

Enthusiastic consent has its limits too. Enthusiasm isn’t the only emotional state someone can have when they’re consenting.

* Someone trying something out for the first time might be more nervous or cautious than excited.
* Sex workers can consent to sex with a client, and aren’t obligated to feel enthusiastic about their jobs, just like someone working at a supermarket doesn’t have to feel enthusiastic about scanning your groceries. It’s a job.
* Not everyone experiences attraction. Some ace or asexual people don’t want to have sex at all and that’s fine, but for those that do, they might want to hook up as a way to connect with their partner, even if they aren’t experiencing that sexual desire themselves.
* People trying to get pregnant might have sex at certain times, whether they’re feeling enthusiastic at the moment or not, if it helps their chances of conceiving.

A focus on just one emotion - enthusiasm- can erase a lot of other experiences.

Enthusiastic consent can be a really useful and important framework for many people, and if you only want to have sex when you’re feeling enthusiastic about it, that’s great! It’s just not quite a framework we can use as a universal standard.

**5 core concepts of consent**

Another way to describe consent is the idea of the 5 core concepts of consent. These say that consent has to be
 1. Free and voluntary

2. Specific and informed

3. Affirmative and communicated

4. Ongoing and mutual

5. Reflects capacity

These core concepts acknowledge the importance of being informed and knowing what we’re consenting to. Consent is an ongoing conversation

* In saying free and voluntary, it reflects the reality that a coerced yes is not consent.
* Specific and informed emphasises that consenting to one specific act at a specific time means just that- consenting to that act, in that moment. Someone could be up for making out but not for taking their clothes off, or say yes to one kind of toy but not another.
* Reflects capacity is meant to address things like being drunk or asleep, which are situations where someone can’t consent.
On the other hand, capacity is a concept that’s often weaponised against Disabled people. We are capable of consent, and deserve the same sexual and reproductive rights as anyone else. When people assume we can’t understand what’s happening or can’t know what we want just because we’re Disabled, they deny our rights and autonomy.

Any definition of consent that addresses capacity without engaging with disability is going to fall short for some of us.

**RACK (Risk Aware Consensual Kink)**
Risk aware consensual kink, or RACK for short, is a term that emerged from kink communities to talk about an approach to sex and consent.

On its own, RACK doesn’t give a definition of consent- the consensual in Risk Aware Consensual Kink could be affirmative consent, or any other standard, and in a legal context that standard will be informed by the laws of the state and country you’re in.

But RACK does suggest an approach to *risk*.

RACK says that no sex is completely 100% safe- whether it’s kink or vanilla, your first time or your 100th, whether you’re trying something new or are settled into a routine, there’s always *some* kind of risk, and that’s okay if you’re okay with it.

* If you’re having penis in vagina sex, there can be a risk of pregnancy
* If you’re trying out impact play, there can be a risk of injury
* The risk might be emotional. Or maybe you’re just risking a disappointing evening, or being tired and oversleeping the next day if you’re staying up late.

RACK suggests that we can’t eliminate all risk from sex, any more than we can eliminate all risk from other activities. By acknowledging that and being aware of the risks, we can think about how to minimise them like

* use condoms or IUDs
* have someone knowledgeable teach us about new toys
* have honest conversations about our wants and hesitations with our partners

and we can each decide what is worth trying for us. As long as everything is consensual and we’re actively checking in with our partners, it’s up to us what we want to do.

The legal definition of consent sets a baseline, it’s the minimum we have to do. Beyond that, how we think about consent, how we make decisions for ourselves, and how we support each other are all evolving.

# Self-advocacy in healthcare settings

By Aoife Ryall, they/them

Self-advocacy in healthcare can be difficult. It can sometimes feel unwinnable, trying to navigate your way past all the preconceptions of the people you are seeking help from. It can be scary, and exhausting. It’s also something we have to do if we want to get the treatment that we deserve. It can be especially important when it comes to accessing sexual health care, because too many people assume that Disabled people don’t have sex and don’t need to understand this part of how our bodies work (which is obviously wrong!)

I am not a very outdoorsy person, but I think it can be useful to think about accessing healthcare like going on a hiking trip. Nothing will guarantee a good trip, but you can make sure that you’re well-packed and prepared, and that can do a lot to help things go smoothly.

**Things you can do to prepare to advocate for yourself when accessing healthcare**

Plan for the appointment
What do you want to get out of this appointment?

* If you have a long list, what are the most important/urgent things, and what isn’t as important?
* Is there anything you need to have actioned today (like prescriptions, referrals, etc.)?
* Can you think of any potential barriers that you might need to address in the appointment?

Do your research
If, for example, you are trying to access hormonal contraception, it will be helpful to go into the appointment with an idea of what different options are available to you. This is useful for several reasons. It can save some time – some doctors will want you to look into this yourself before they prescribe you something anyway. It can also help you ask more informed questions about your doctor’s recommendations, and help you notice if your doctor is not keeping up to date with new information and options. If your doctor tells you something incorrect, and you’ve looked into it yourself, you’ll be able to push back, or change providers.

Practice standing up for yourself
Standing up for yourself can be scary, particularly in a healthcare context. It is really useful to practise what you might say if things don’t go the way that you want them to. I think about the things that I am afraid of happening – for example, for me that’s usually my doctor saying no to my request, or my doctor saying something uncomfortable about disabled people or queer people. Then, I think about what I would be comfortable saying in response. That might be something like, ‘can I ask why you don’t think that’s a good option?’

 A lot of healthcare centres have a way to submit feedback and complaints, often anonymously, and that can often feel easier for some of the more outright inappropriate things that practitioners can say to us during appointments.

Bring a support person – and discuss beforehand what you want them to do in the appointment

It can be really useful to have someone else in the room during the appointment. It can be helpful to you – it’s someone else to pay attention, to stand up for you, to be there to see the interaction between the healthcare provider and you.

Choose this person carefully – ideally, they’re someone you feel comfortable talking to about your health and healthcare (and someone who you also feel comfortable talking to about your sexual health, if they might be supporting you to access sexual and reproductive healthcare), who is comfortable standing up to authority figures, and does not have trouble respecting your autonomy in these areas.

Your support person will be more useful if they are across what you want and what you’ve researched, and if you’ve had a conversation about what role you want them to play in the appointment. Do you want them to just be there with you and take notes? Do you want them to advocate for you throughout the appointment? Do you want it to be a mix – for them to step forward when you’re struggling?

Some doctors might ask why someone else is speaking for you, or want to speak to you alone to check that you aren’t being pressured into letting someone else into your medical appointment. It can help to think about what you want to say in that situation beforehand. Are you okay with the support person stepping out for a few minutes? Do you want to tell the doctor at the start that this person is here to support you, or let them know who’ll be speaking and why?

Some helpful scripts could be

* “They’re here as my advocate. They know about why I’m here and they can explain things for me”
* “They can step out for a few minutes, but I need them back in the room before we start talking about my medical issues again”
* “I’m here to support my friend, and only they can ask me to leave”

Take notes during the appointment
Notes are useful! I always regret relying on memory, rather than taking notes.

I try to keep track of the information I communicate, what the healthcare practitioner says in response, anything they say they will action, and anything I need to do myself.

Remember to trust yourself and your self-knowledge
You know yourself and your body better than anyone else. Trust yourself and your experience.

# Access Devices for Disabled People

By Dante Casanova

This is a list of tips and tricks on products (and how to find them) that make sex more accessible.

**Solo play**
You might not have a partner, or you might need some alone time. Either way you deserve pleasure that is safe and accessible.

Toys that are designed for disabled people are few and far between, but thankfully very easy to find. If you know what you’re looking for you can search for that directly. If you aren’t sure exactly what you need you can start with broad search terms like “disabled sex toys” and “accessible vibrators” and see what’s available.

You can narrow it down by thinking about what the barrier is or what you wish was different, even if you aren’t sure exactly how to solve it. Type in some key words like “disability”, “sex toy”, “hands free” and there’s a good chance someone will have some ideas! There are toys suitable for people who need something hands free, instructions or buttons with braille, varying strengths of vibration, or different methods of charging.

One consideration when it comes to vibrators is wired vs wireless. On one hand wireless are slightly more easy to manoeuvre and you can use them in more places, especially when it comes to travel.

On the other hand, if you're like me and find it difficult to enjoy myself if you have a time limit, the wired vibrator allows me peace of mind and lets me focus on myself. There's no need to remember to charge it, which is a lifesaver for my adhd, and the only limitation is that you need to have access to a powerpoint to use it.

**Partnered play**

Toys for partnered play can be found using the same terms mentioned in the first section, just with the addition of key phrases like “partner” or “couple”.

I want to quickly mention app controlled vibrators and devices. While a great idea these aren't powerful and in many people’s experiences are very underwhelming. If you need a lot of stimulation I wouldn't recommend something that relies on a wifi connection. If you're happy with gentler sensation these might be a good idea, but for those of us who need a strong vibe, this wouldn't be my recommendation.

Harnesses to hold strap-on style toys can be tricky to get into, and the company SpareParts, which makes gender affirming products, has a harness that is very accessible

**Accessories**

The humble foam wedge. Particularly for people who struggle with torso control or with hyper mobility, this is a fantastic tool to place under the hips or lower back. You can find these almost anywhere that sells physio and rehab products. You can also just try cushions and pillows, you might find that they work for your needs just as well without needing to try an extra product. Feel free to experiment (safely, according to your needs and abilities) and see what works for you.

Then there are specially designed chairs and stools that are made from soft, washable material and sturdy frames that are adaptable and made to support you and your partner to try different positions and discover new ones that work best for you both. They usually come in sets of a chair and then extensions and accessories such as positioning straps and cushions.

**Bondage**

For those with fine motor control difficulties, cuffs and other bondage gear is best served with velcro. This isn’t necessarily designed with disability in mind but it has the same effect. You can find these by googling “bondage” “sex” along with “velcro”.

If you’d prefer to opt for bondage tape but don’t want to spend time removing the residue, you can avoid this by searching “residue free bondage tape”. This will be less likely to clog your pores or damage your skin, and also is nowhere near as much of a burden to remove.

**Lingerie**

I'm so used to adaptable and disability focused clothing and underwear being the most drab, hospital aesthetic you can possibly get. Personally this doesn't come across as sexy, and when I want to put in effort for a partner or attend a dressed down event, I know I deserve to feel sexy.

When searching for accessible lingerie online, you'll want to use terms like disability, lingerie, sexy, adaptable. Many brands that centre disability are also size inclusive. Unfortunately there's still not much choice out there as far as style and colour, especially if you can't afford to splash out on a high end brand, but that certainly doesn’t mean you need to be stuck with your everyday underwear for special occasions.



Image: my body is revolutionary in black text with a rainbow border, on top of four bright colourful flowers

I exist in a world that tells me to take up less space, to be quiet, to be grateful for anything because it is better than nothing. In the face of ableism, of transphobia, of racism, of fatphobia, of every reason I have been given to think my body is a burden I say: no. We will make space where we can grow. Watch us soar.

# Navigating Competing Access Needs in a Sexual Context

By Dante Casanova

Most depictions of disabled people in relationships are interabled, meaning a relationship between a Disabled person and a non-disabled person. There's nothing wrong with that, but it means that there's no script to follow for two disabled people who want to be together. The examples of disabled people in relationships with each other are few and far between. And then, when it's a sexual context, disabled people are almost never discussed at all.

So, there's no unpacking of what the challenges might be in a disabled relationship, and how to overcome them. The challenge I’m going to focus on in this piece is competing access needs. This is when one person has an access need that conflicts or clashes with the other person's access need/s. This piece will cover several different areas of access needs. There will be examples and tips on how to problem solve and balance your and your partner’s needs.

First tip: you don’t have to figure this out alone. Talking to friends or other Disabled people can be a good source of support, whether that’s just someone to think out loud with or advice from someone who’s dealt with this before. Medical professionals can also help with personalised advice, for example you might want to ask a physiotherapist for advice on positions or lifting and other strength related aspects of sex.

**Fatigue and exhaustion**
Often, sex drive doesn't match up between all partners, especially when medication is involved.

It's been said before but I'll say it again: I know most people don't find scheduling sexy, but it can be a lifesaver. It gives people time to plan and save spoons. The build in anticipation can be really enjoyable and exciting! Developing a routine can reduce anxiety about initiating, especially if you also organise who will initiate.

**Sensory issues**I’m Deaf, and a few times I haven’t realised how loud my vibrator is, sometimes too loud for the other person. This was solved by trusty noise cancelling headphones. Other sensory needs might involve maintaining hygiene, which is tricky to bring up because it can use a lot of spoons (energy) and falling behind on it carries stigma. Scheduling sex after the regular time you or your partner shower can help. If you have the energy, you could even incorporate some foreplay.

Other sensory needs might include the texture of sheets, type of fabric one of you is wearing, whether you have background music, or what kind of lighting to use. Dim lighting might be a good sensory input for one person (and romantic as a bonus!), but tricky for someone else.

As with most things, communication is key. This can be a simple practical conversation- “hey, I actually find lace really irritating” or “I know you overheat easily. I’ve been getting too cold at your place especially once I take my clothes off. Can we try adjusting the AC before we start next time?”
It can also be a fun moment: setting aside some time to explore your and your partner/s’ desires until you find the overlap.

You don’t need to get it perfect the first time either. It is okay to try a few things over time.

**Something to keep in mind**It can be tempting to fall into a trap of self sacrificing. This can be even more intense when society considers your partner to be “more disabled” than you. You might feel compelled to over exert yourself because they have less capacity in a certain area. This isn’t fair to yourself. You don’t owe it to anyone to push yourself past your limits.

Being assertive and monitoring your own energy and pain levels are both important to making sure you don’t overdo it.

Speak about boundaries beforehand, communicate about your energy levels and make it clear what you can and can't do. On the flip side, be ready and open to understanding what your partner/s is saying, and accept that a boundary from them is not a rejection and it isn’t personal.

The biggest thing to remember is that even when your access needs conflict, it doesn’t need to be What You Want vs. What They Want. If you care about each other, it’s the two (or more) of you against the situation, not you against them. It’s an opportunity for collaboration and care.

# A Personal Reflection on Consent in Different Places

By Dante Casanova

**Consent in different contexts**
Everyone perceives consent differently. People have different levels of knowledge, assumptions, preferences, and needs. None of us can assume that the expectation we have going in will necessarily match everyone else’s. So I’m here to talk about how to navigate consent and help make those less clear cut scenarios more straightforward. I'll discuss examples of different contexts and how to have those tricky conversations.

**Casual hookup/one night stand (never met this person before)**If you've never met someone before you have no previous rapport. That makes casual hookups one of the most difficult contexts to navigate. People are very unpredictable and can have a wide array of opinions - even about how important consent is in the first place. So if you don't know them, how do you approach this?

Starting off with a don't: saying “I’m open to anything” isn’t helpful.

I often approach consent by asking about the other person's sexual likes and dislikes. This is an easy way to introduce the concept but not effective if the other person isn't being transparent.

I’ve been told “I’m open to anything/I'm into everything” so, so many times and it is just not helpful. First of all there's no way it's true. Sexual desires and interests in humans are so vast and niche, you'd have no time in your day if everything was a turn on. Secondly, it doesn’t share anything about your real preferences, so it doesn’t help me understand anything about what you want.

Sometimes people say they're into everything because they want some form of sex no matter what. This is very clearly dishonest, and no one should treat you like that. However, most say it because they’re nervous, afraid of rejection, or just aren’t sure what they like. Being unsure is completely fine, just say that! There will be people happy to help you explore, and who won't judge you for being unsure.

"I’m open to anything" tells me no solid information, and it makes it difficult to set up boundaries. It's the opposite of a boundary. It makes it tricky because it also puts all the work of deciding what "activity" to suggest on the other person.

Another difficulty is that you may come across people who don’t have a deep understanding of consent. I sometimes get bogged down in explaining consent to them and teaching them why they should care. That is not my job, it’s not my responsibility, and it's not noble to waste time and resources on someone who I have no guarantee is going to value that information.

Ok so that’s all the don’ts. What should you do?

First make sure you’re both there for the same thing. Establish that you're both “down to clown” (have sex). This doesn’t have to be in a jilted, formal “Good evening, madam. Are you searching for a sexual encounter this evening?” You can ask this however you like, usually it depends on the specific situation. "So you wanna fool around?" is a perfectly fine way to get the conversation started.

And then you can bring up consent and how you communicate directly. You might say something like

* “Consent is something that’s really important to me. Do you have any communication preferences you’d like me to be aware of so you can let me know if you’d like to take a break?”
* “Hey if I wanna stop I’ll squeeze your shoulder. What about you?”
* “I want to know what you want. If you want to stop, how will you show that?”

This is important for people who are sometimes non-verbal when they’re uncomfortable, but it's also a great way to open the conversation. It also gives a chance to share your own communication needs! I’m Deaf, and I need people to tap my shoulder and make sure I’m looking at their face if they’re speaking, not signing. (I don’t wear my hearing aids during sex. They pick up interesting noises...)

I usually start by sharing this (not about the noises), so it gives the other person an opportunity to see an example of a communication need. This makes it less vulnerable for them to not have to be the first one to ask for a need to be met.

It’s important in a first encounter with someone to make sure you check in regularly. It doesn’t have to be unsexy, it can be as simple as “How does that feel for you?” “Would you like me to change pace?” “What does it feel like when I put my hand here?” It incorporates so easily into dirty talk, it doesn’t need to break you out of the mood and ruin the atmosphere.

**Speak up about your own needs**Assertiveness and communicating what you like is a skill. The one thing I always try to remember, especially as a person with a vulva who experiences pelvic pain, is that another person’s pleasure is never worth my pain. (There is of course an exception if I consented to the pain, for instance in sadomasochism play). An orgasm is a privilege not a right, you are not obliged to push through pain or discomfort. Most people would be horrified to know that you kept silent so they could enjoy themselves. Speaking up when you're in pain also shows the other person that their discomfort is valid as well.

**Long term relationship (either romantic as well or solely sexual, e.g., friends with benefits)** This is easier than a casual relationship but also not. On one hand you know the person better so you have a better understanding of their communication styles and body language. On the other hand you can fall into a trap of assuming that because you know them well, you don’t need to check in. Check-ins are vital, especially if you're trying something new. This doesn’t have to be verbal, some people just make eye contact and raise their eyebrows questioningly as their way of checking in and the person responds by nodding or shaking their head. Allow for nuance, that’s part of what makes humans so interesting.

It's a good idea to occasionally ask them how they feel about consent in the context of the relationship - what’s working for them during sex and what’s not. Depending on how often you see each other, if you live together, these conversations might happen more or less often. During aftercare is a great time to ask this, when everything is fresh in the memory, but also consider the option of having some time to think first.

**Swingers clubs/SOP (sex on premises)**I want to acknowledge that for many disabled people these spaces are not accessible. Issues like a lack of wheelchair access or no consideration for neurodivergent folk are common. There are some clubs that are focusing on accessibility, but these aren't the norm.

Consent in swingers clubs is usually either taken very seriously or not considered at all. Bad actors do enter these clubs a lot with the intent of having sex no matter what.

It is very acceptable and considered normal to talk about consent in these spaces. If you’re talking with prospective partner/s beforehand, you can ask questions as simple as “How do you "do" consent?” I have found these to be enough to get the conversation going without coming across as awkward.

If you’re already engaged in play and someone comes up to you to ask to join, you can pause to ask if they have communication needs or safewords. When someone joins midway, they usually won’t be intending to do more than what you were already doing.

Either way, know that it is not ok even in a swingers club for someone to just walk up and join without asking. Being in a SOP venue is not consent, you are never expected to take part in any sexual activity.

If you’re in the play area you will be asked to strip down to lingerie or a towel (nudity being fine as well). That is to make sure you and others can't use a phone to film people who didn’t consent.

**BDSM** (Bondage, Dominance, Submission, Sadism, Masochism)
(This is not a guide to or introduction to BDSM. There are many fantastic places to learn or even workshops you can sign up for if you're interested.)

BDSM done well is very clear and deliberate in all communication. It's partially why so many autistic people, like myself, are drawn towards aspects of BDSM. Consent, rules, and boundaries are outlined explicitly, with the intent of maximising pleasure and minimising harm.

Hard limits are clearly established. Nothing occurs without careful discussion and planning beforehand. It cuts out guesswork and incorporates communication methods such as safewords.

Safewords aren't just for sex, they can be used any time. Some people use them as a quick code to let someone else know they've reached some kind of limit or need something. There's an Ice Age movie where the code word for the pregnant mammoth’s water breaking was Peaches. That's an example of a safeword, because when she says Peaches, Manny has to drop everything and support her labour.

This space is one where people are likely to have knowledge of different consent models. They are also more likely to be informed on sexual health than the average person.

When you venture into this space, be mindful there are people who say they’re into BDSM but don't have any knowledge or experience.

This can be dangerous because the activities often have a higher level of risk. People might not understand the level of preparation and connection needed. Don't take people's word for it when they say they're experienced. Start off with making connections in the community if one exists locally or online and learn as much as you can. Attend events, and you can always start off observing without engaging in play. Once you connect with people socially you can get references from trusted community members. This can be done to verify someone who is claiming to be part of the community.

The vital thing to remember from this is that for consent to happen, communication is needed. All kinds of communication are valid, and you don't have to rush. Always take the time to check in, and remember that telling your needs will help others to do the same.

# Consent can look like…

* “Yes”
* “Hell yes!”
* Nodding
* “I want you to…”
* Moving their hands to show them where you want them

Fill in your own! What does it look, sound, or feel like when *you* consent?

* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Not consenting can look like…

* “No”
* “I’m not sure”
* “I don’t like that”
* Pushing someone away
* Freezing up
* Not saying anything

Fill in your own! What does it look, sound, or feel like when *you* want to stop?

* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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