LGBT youthline

patchworking care

A Resource for 2SLGBTQIA+ Youth Survivors of Sexual Harm

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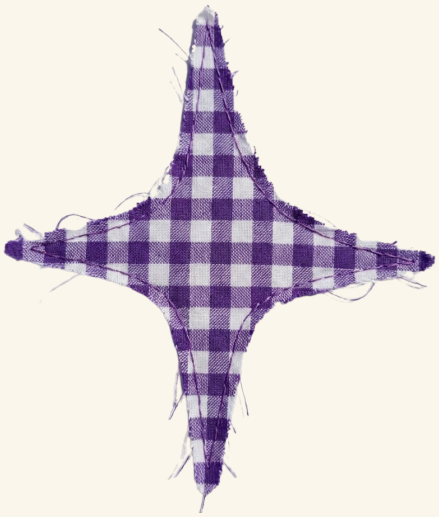
Resource Overview:

This resource is for 2SLGTBQIA+ youth who have experienced sexual harm and are trying to take care of themselves. Maybe what happened was confusing or you're not sure how you feel about it. Maybe it happened weeks, months, or even years ago. Maybe you tried to get help but had to deal with a long waitlist, an expensive service, or people who didn't really get it.

When we say, ***"sexual harm"***, we mean any situation where someone crossed your boundaries or ignored your safety in a sexual way. Sexual harm is a broad term on purpose. You don't need to have the "right" label for what happened. If something felt off, confusing, or left you feeling uncomfortable or hurt, that matters. Even if you're still wondering "does this count?", this resource is for you.

"Patchworking care" means small and free things that help you get through the day. That might be self-validations, coping strategies, or peer support. Think of it as creating your own quilt of resources and support options so you can wrap yourself up in care.

There are two sections to this resource:

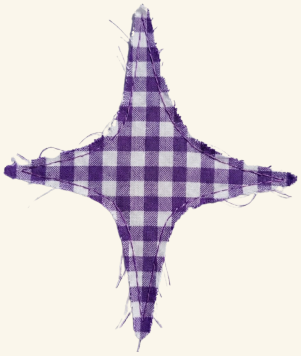


PART 1: Things to Remember

Focuses on the thoughts and feelings that you may have after experiencing sexual harm.

PART 2: Things to Try

Shares information and practical tips for coping.



This resource is not comprehensive. It's a mash-up of information based on the experiences of the author, a 2SLGBTQIA+ youth who has volunteered and worked in gender-based violence and sexual health spaces for 5+ years. They drew from peer support and psychoeducational tools for supporting survivors in non-counselling contexts and tried to focus on topics that other similar resources don't cover. **Treat this as a buffet - take from it what serves you, leave what doesn't.**

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Part 1: Things to Remember

Victim-Blaming Myths:

Seriously, it wasn't your fault.

A lot of common beliefs about sexual harm are rooted in victim-blaming. They show up as ideas about what you 'should have done' or 'how you should have reacted'. These messages shift the blame away from the person who caused harm and onto the person who was hurt. Over time, that can mess with how you understand your own experience and make it harder to trust yourself or ask for support.

Here are some common victim-blaming myths you might recognize:

Myth:

"It happened because I wanted to have sex."

Affirmation:

"I get to choose what sex I do or don't want to have. Just because I want sex doesn't mean I should expect sexual harm as a natural consequence."

Wanting or initiating sex does not mean that you agreed to everything that happened after. It's possible for your desire to change during sex or for something to happen that you didn't want. You have the right to be in control of what happens to your body and to stop or change your mind even after things have started.

Myth:

"I should have been able to stop it."

Affirmation:

"All survival is resistance. I was put in a situation where I had to do whatever I could protect myself and I'm still here."

Not saying "no" does not mean you said "yes". People don't always scream or push away when sexual harm is happening. Many people go into automatic survival instincts like **fight** (trying to resist), **flight** (trying to get away), **freeze** (feeling stuck or unable to move/speak) or **fawn** (appeasing or going along with things). These are all normal ways your brain and body respond to danger and are not a sign of strength or weakness; they are a sign of survival. Your body chose what it could to try to keep you safer in an unsafe moment.

Myth:

"2SLGBTQIA+ people can't /don't experience sexual harm."

Affirmation:

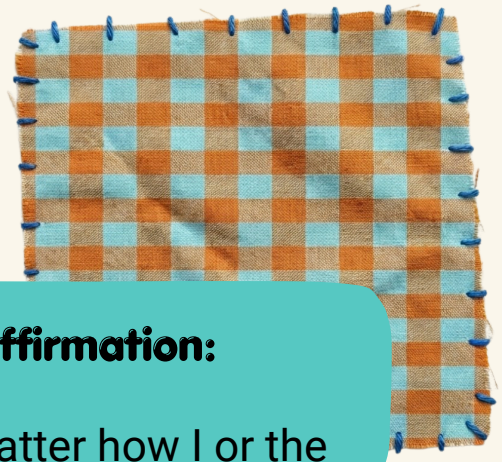
"I deserve to have my experiences and needs taken seriously."

People sometimes assume that queer relationships are 'more evolved,' but **the isolation and precarity some queer and trans people experience often increases vulnerability to sexual harm and limits access to support** (like when someone is kicked out and has to rely on a partner).

There's a belief that sexual harm has to look a very specific way to 'count', centering cisgender, heterosexual relationships. In reality, sexual harm can include any use of power or control to ignore or violate someone's boundaries or sense of safety.

Myth:

"No one is going to believe that this person hurt me or that I got hurt"



Affirmation:

"No matter how I or the other person are seen, my experience of sexual harm is real."

You might feel like you don't 'fit the mold' of who society sees as at risk of sexual harm. There's a common belief that the person who harms is always bigger, stronger, or more masculine, and that the person who is hurt is smaller, weaker, or more feminine.

The person who harmed you might also be well-liked in your community or hold a position of power or status. In smaller or tight-knit queer and trans communities, this can make it feel harder to speak up. You might be scared that you won't be believed or that sharing could affect your relationships or sense of belonging. It can even make you question your own experience. But **sexual harm isn't limited to one kind of person or dynamic. Anyone can cause harm, regardless of how they are perceived or how they behave in other contexts.**

Defining Consent:

You get to decide what feels consensual to you.

Consent can seem so simple: someone says yes or no. But in real life, it often feels less clear. The way we understand consent doesn't come from just one place. We learn about sex and relationships from school, media, and the people around us. These mixed messages can feel confusing. Some teach us to go along with things we don't necessarily want or make it harder to notice our own limits. It's normal if consent doesn't always feel clear in the moment. It can take time to figure out how you felt and what you wanted.

Our understanding of what "counts" as sexual harm is often based on the law, but laws are imperfect and outdated. On top of this, those who enforce the law typically only take up cases where sexual harm involves weapons or physical injury, which is uncommon. This makes it seem like sexual harm must look a certain way to be legit, which is untrue and discourages survivors from reporting or seeking support. **Laws alone can't determine what "counts" as sexual harm.**

Instead of asking "was that consensual?", it might be more important to ask: "did that feel consensual?" If something felt off and you are questioning the experience, that questioning itself matters. Regardless of the law, you can still feel violated, betrayed, uncomfortable, unsettled, etc.

You may be familiar with the consent model *FRIES*, developed by Planned Parenthood. **Going through FRIES can help make sense of sexual experiences that didn't feel consensual.**

FRIES Consent Model:

Adding an extra "S" to for "Sober Enough": A lot of sexual harm happens when people are not fully sober. If someone isn't alert, aware, and able to communicate, consent isn't possible. If someone is drunk or high, the other 5 FRIES criteria have to be STRONG (e.g., even more check-ins) in order to ensure everyone is safe, comfortable, and consenting.

Freely Given

No abuse of power, pressure, or coercion at play - basically, you felt like you could say no without consequences.

Reversible

Anyone can change their mind, anytime - even if you've done it before or if in the middle of something.

Informed

Everyone understands and knows what's going on.

Enthusiastic

Doing things because you want to, out of desire and pleasure. Enthusiasm and desire don't have to mean that you were super over the top excited. Desire can look different for different people (for example, someone who is ace-spec or on medication that changes libido might still want to have physical intimacy for closeness).

Specific

Saying "yes" to one thing does not automatically mean yes to something else.

Accountability & Closure:

It's hard when people we love hurt us.

Most often, sexual harm is done by someone we know. It can be even more confusing when the person who hurt you is someone you know, like, or love. **You are not alone if you feel angry, betrayed, or scared of them, and still care or worry about them at the same time.**

It feels shitty to think of someone you care about as capable of harm, which makes it harder to acknowledge that the harm happened. You might often see words like ***"abuser"*** or ***"perpetrator"*** used to describe the person who caused harm. Some people find those words helpful. Others don't. For some, those labels can make things feel too fixed, like harm is just "who someone is" instead of a learned behaviour they chose to do and could take responsibility for.

People often think ***"justice"*** is the same as punishment, but it can also mean feeling safe, being believed, or finding some kind of closure. **There isn't one right path. You get to decide what matters most to you. Some people find it helpful to focus on things like:**

Truth-telling: being able to name what happened and have it taken seriously; letting go of blame that isn't yours and understanding the root causes of harm

Safety planning: figuring out what makes you feel more emotionally and physically safe moving forward

Accountability: other people understanding the impacts of what happened, their capacity to do harm, and making changes to reduce and prevent further harm

What if they deny what happened or don't take accountability?

It can feel really hard to move forward, especially if the person who hurt you won't acknowledge what they did. But **accountability doesn't have to come directly from them**.

Forcing accountability from someone who isn't owning up to the harm they did and taking steps to change can put you at risk of further harm.

In these cases, **others can step in to support you and take your experience seriously**. For example, if a classmate harmed you, school staff might help by offering academic accommodations, making sure you don't have to deal with the person who harmed you, and sharing updates on what steps are being taken to address the situation

Emotional Responses & Dissociation:

There is no right or wrong way to feel!

Regardless of how or when the harm happened, it doesn't dictate what response you are allowed to have. Maybe you don't feel 'that bad.' Maybe your feelings are loud or overwhelming. Initially, you might feel shock, confusion, anxiety, anger, fear, numbness, self-blame or self-doubt. These may also show up physically (e.g., racing heartbeat when anxious).

In the days, weeks, months after, you might have:

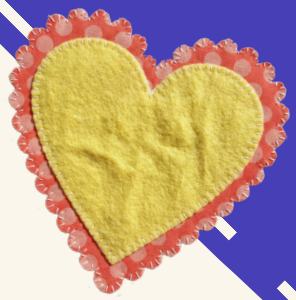
- **A narrower window of tolerance** - easier to be hyperaroused (feels like panic, overwhelm) or hypoaroused (feels like numbness, being checked out)
- **Hypervigilance** - feeling jumpy or on edge
- **Lower self-esteem** - feelings of shame, humiliation, powerlessness
- **Negative body image** - feelings of shame, ugliness, embarrassment with your body
- **Increased isolation/withdrawal**; difficulty being social
- **Grief or feelings of loss**
- **Flashbacks, intense memories, panic attacks**
- **Nightmares** or other sleep disturbances
- **Difficulty concentrating** at school or work
- **PTSD and other mental health or physical conditions being triggered or worsened**; new or increased anxiety, stress, depression, suicidal ideation

If you notice changes in how your mind or body feels on your own or around others, those are signs that you have been impacted and something needs tending to.

Often, we experience the physical sensations of overwhelm without knowing the underlying cause, so it can help to understand when these sensations may be related to sexual harm and to patchwork care accordingly.

One impact that survivors commonly feel but is a bit misunderstood is ***dissociation***. If you're not sure how you feel or you feel numb or checked out, you might be dissociating.

Dissociation can feel like zoning out, feeling frozen, being non-verbal, or just a sense of not being fully in your body. Whatever it looks or feels like, dissociation disconnects you from your brain and body when feeling discomfort or pain. It is a super normal response to trauma.



If you dissociate during sexual harm, your brain has saved this as a good response - so when you feel overwhelmed, it will go back to this response that kept you safe.

Part 2: Things to Try

Triggers:

I'm safe now, so why do I feel bad?

Your emotional response to things might come in waves. **Triggers set off a brain or body memory and transport you back to the sexual harm or the feelings you had during or after.** They can come seemingly out of nowhere, regardless of how "okay" or "healed" you feel. People often imagine being triggered as something really obvious like having a panic attack or visibly intense reaction. But it can also be more like shutting down.

Triggers don't always show up right away, and they can change over time. It can help to notice patterns to understand what you might be reacting to. Whenever you feel able to, it can help to write down what tends to bring about the negative feelings or experiences more intensely.

It might help to ask yourself:

- What situations, sensations, or settings make me more likely to feel triggered?
- Are there patterns I notice before feeling activated or checked out?
- What do I need to come back to my body, brain, and the present?

Even if you're safe now, it can take time for your nervous system to know that. Using tools to stay present or ground yourself when you're feeling overwhelmed, panicky, numb, etc. is part of reminding your brain and body that you are safe and will be okay.

Coping:

How do I feel okay?

Everything you do to get through is a survival strategy – using them isn't a sign of weakness. Strategies come with their own risks and benefits. For instance, using substances or self-harm can be soothing but also pose a risk to other parts of your well-being. It's good to know what your current strategies are and see if you want to change or add to them. We are not trying to get rid of strategies - it's always a swap.

Creating this **personal toolbox** is a work in progress, especially because what works one day might not work the next. The goal isn't to feel perfect. It's to have a few things that help bring you back and feel a bit in control.

It can take some trial and error to figure out what feels good for your specific goals - whether that's to decrease sensations in your body like a rapid heartbeat, feel less in your head, or feel less numb.

Healing is not about never feeling triggered - it's about learning to get back in your body and brain in ways that feel okay. It takes practice but it is possible. Your nervous system is changeable and consistently reminding yourself that you are and will be okay will help it along.

Create Your Personal Toolbox:

It's okay if you hate certain suggestions or have heard them a million times. Not everyone wants to breathe deeply or do a body scan.

Maybe you don't like strategies that feel more mental (e.g., saying affirmations to yourself), and prefer more sensory ones (e.g., having a go-to fidget toy).

Read through the options on this page, and consider what strategies may go in your personal toolbox:

- **Take a walk outside and be awed by something bigger than you in nature**
- **Watch a live video of jellyfish in the ocean**
- **Spend time with lo-fi beats girl**
- **Call a friend and shift your focus to them**
- **Yell out loud or into a pillow**
- **Make a list of what's in your control**
- **Do something easy or repetitive like knitting, gaming, chores, etc.**
- **Put away your phone (if that's what triggered you) or use your phone to distract yourself**
- **Put on a song that makes you smile or want to dance**
- **Wrap yourself up in a blanket; hold a pillow, stuffie, a pet; go to another space**

Boundaries:

How do I set boundaries?

There's a lot of information out there about boundaries and why you need them to protect yourself from harm, but **it can be hard to figure out your boundaries for the unique scenarios you might find yourself in after experiencing sexual harm**. For instance, you might have to continue to see this person at school, work, in your friend group, or at family gatherings. Or, you may have to deal with people who deny your experience or blame you in the aftermath. What do you do then?

Boundaries sound like:

I'm choosing to...	**I feel I should...**	**I don't feel comfortable doing...**	**I won't be...**

It's helpful to remember that **boundaries are about adjusting your behaviour in response to others**. They're about choosing how to conduct yourself, not about trying to control other people. They're about what you're doing to respect your own needs, not about asking for respect or demanding to have your needs met by others. **Framing boundaries like this can help remind you that you are in control of your care.**

Taking the time to share or practice boundaries with someone usually means that you want some kind of relationship with them - whether that's close, limited, or no-contact. But not everyone handles boundaries well. **Some people get defensive or struggle to hear "no." You don't owe anyone access to you, even if you know them or care about them.**

You can say your boundaries out loud, but you can also show them through what you do and how you act. It doesn't always feel safe or possible to clearly state a boundary. Sometimes people react angrily or ignore our boundaries. This is where your actions can help protect you.

This might look like:

- Keeping your distance or avoiding someone entirely
- Not responding to messages, turning notifications off, or muting someone
- Leaving a place/event if they show up
- Having a plan for what you'll do if they approach you

For example, if you see the person who harmed you at an event, your boundary might be not talking to them, staying near people you trust, or leaving quietly.

You can always change your boundaries depending on how safe, respected, and cared for you feel. It's also okay if setting boundaries changes your relationship with someone. You might wish for how things used to be or wish it didn't have to be this way. Both can be true at once. You can feel a loss and still know you're doing what you need to feel okay. **You're allowed to choose what keeps you safe and grounded in your relationships.**

Feelings About Sex:

Sexual harm can change how you feel about desire, pleasure, and intimacy. For example, numbing out or not feeling things during partnered sex is a form of dissociation. -This is common and does not mean you are weird or broken.

The following activities are meant to help you reconnect with your sense of choice, comfort, and connection in sexual situations. The goal isn't to have all the answers. It's to start noticing what you like, don't like, or feel unsure about.

Feelings about Sex Self - Assessment:

A lot of people have shame, guilt, or embarrassment around sex. That can make it hard to know what you actually feel or want. **You can start by asking yourself:**

- How have my culture, identity, or upbringing shaped how I see sex?
- Do I enjoy physical intimacy or sex? What might make it feel better or safer?
- How comfortable am I sharing my wants and boundaries with sexual partners? What affects that?
- If it's hard to say what I want or don't want, what gets in the way? What makes it feel awkward, scary, or difficult to say?
- What would I like to get better at when it comes to communication (both expressing my needs and listening to those of others)

Healing Touch Exercises:

For survivors, touch can be experienced as a form of control, pain, manipulation, humiliation, or punishment. **If touch feels difficult or scary, you're not alone.** Your body may be trying to protect you.

Getting more comfortable with touch is a process. It's okay if something feels like too much right now. You might try some of these exercises more than once and still feel uncomfortable. You can always pause, stop, or try again later. It's also normal if feelings of guilt come up. You may feel guilty for: saying no, wanting something different, changing your mind, needing to go slowly, or not feeling ready. Guilt doesn't mean you're doing something wrong. Often, it's a sign that you're doing something new.

Be patient with yourself - you get to move at your own pace and your comfort matters.

You can try these alone or with someone you trust:

- **Create a sensory basket** of items (things that feel funny, make noise, smell in some way, taste good); use your senses to really explore each item
- **Draw on the body** using fingertips - start with palms of the hand or the forearm
- **Do something playful** like a hand-clapping routine
- **Kiss, cuddle, massage, or spend time naked** with clear understanding that it won't lead to sex

If that starts to feel okay, you might get curious about:

- **Where you like or don't like to be touched**
- What kinds of **sensations you enjoy or want to try** (Hot, cold, hard, soft, licks, bites, wet, etc.)
- Your **access needs** (pain, sensitivities, disabilities, etc.)
- **Mapping sensual or pleasure zones** like genitals, lips, nipples, hands, feet, armpits, ears, stomach, butt, back, behind the knees, inner thighs, neck, etc. Indicate where you do and don't like to be touched or stimulated; the pressure you prefer; the sensations you enjoy in those areas; the materials, assistive equipment, toys, or other items you like to use; etc.

A few things that can help:

- **Start small**
- **Breathe**
- **Take breaks** before, during, and after touch exercises
- **Stay present** with your mind and body using your coping tools
- **Notice your senses** (what you see, hear, feel, smell)
- **Find a "safe" spot** - somewhere that feels neutral or comfortable
- If doing this with a partner, **stay connected** (talk, say their name, keep your eyes open if that helps)

Sexual Safety Inventory:

Everyone needs different things to feel safe enough to be physically or sexually intimate. You don't have to figure all of this out at once. Start small. Notice whatever helps you feel more relaxed, more present, or more in control. Your needs are allowed to be specific to you. **Consider the following for taking stock of safety needs:**

Firm boundaries regardless of activity - off limit body parts/language, sexual acts you don't want, etc.

Aftercare - what do you need after physical intimacy or sex

Ways to check-in about stopping or continuing - safe words & signals, phrases, noises, etc.

Safety considerations - location, discretion, safer people in the know, etc.

STBBIs - testing practices, protection methods

Disclosure about sexual history and experience

Pregnancy (planned or not) - protection methods, next steps

Accommodations for allergies, disability & neurodivergence, chronic pain, sexual/genital pain, menstrual cycle, etc.

Gender or sexuality disclosure - e.g., things that help you feel gender-affirmed or avoid dysphoria

Sharing trauma relevant to safety or enjoyment of this experience, including relevant sexual shame/guilt or specific triggers

Partnership Goals:

We all have traits we desire in relationships. It can help to think about what we need in a partner in order to have a comfortable and enjoyable experience.

A good place to start is reflecting on the 5 W's - who, what, when, where and why - which can help you recognize what emotional & physical risks you're willing to take on, what emotional & physical benefits you're looking to gain, and how that can fit into desired traits of a partner.

- **Potential risks** - rejection, shame, regret, confusion, pain, embarrassment, dysphoria, fear, loss, disappointment, boredom, STIs, unwanted pregnancy, trauma triggers

- **Potential benefits** - pleasure, connection, confidence, joy, relief, comfort, relationship, experience, loss, love, affirmation, belonging, wanted pregnancy

With those risks and benefits in mind:

- What are 5 qualities that are important for my partners to embody?

- What expectations do I have of my partners?

- How do I want partners to respond if/when feelings come up for me during or after physically intimate or sexual activities?

- How do I want to feel during/after physically intimate or sexual activities? What do I hope my partners will feel?

How to Say "Yes":

Language is one way we can practice consent. **Come up with phrases that you would feel comfortable using to express "yes" or ask about consent.** Communication like this can feel sweet, romantic, hot, or sexy, but also awkward and hard - it's okay to stumble or feel nervous. **The more you practice, the easier it'll be.**

Move a bit to the left... yes, right there!	Softer...	What will make you feel good?	Wanna try...?
I love it when you...	I'm not into that, but I'd love...	How does that feel?	Show me where you want me to touch you
I want you inside me. Would you like that?	Bite/ kiss/ squeeze/ touch/ grab my...	Do you like me... there?	What will make you moan?
I want to make you cum. Show me how?	Make me wet by...	Harder...	How do you want me to f*** you?

How to Say "No":

Think about telling someone "no" to a boundary you have (e.g., wearing a condom, only doing hand stuff) and answer the questions below:

- How would you want to set this boundary? What message do you want to share that clearly tells them "no"?
- What's making it hard to share this boundary? Are you worried about hurting their feelings, them not liking you as much, the relationship changing, etc.?
- What might they say in response to your boundary? How would you want to respond if they push back against your boundary?

Your boundaries are not up for negotiation or argument. If someone continues to push, question, or argue after you have expressed a boundary, that matters. **Consent needs willingness, not pressure and discomfort.**

Sex is not just about knowing your physical boundaries, but also your emotional ones.

What do you need emotionally to feel safer, grounded, and wanting to be there?

- Maybe you want to feel like you are both having sex for the same reasons - to feel pleasure, to have fun, to try something new
- Maybe you need to have some understanding of their respective relationship goals - feel good together, feel close, escalate or deepen the relationship, etc.
- Maybe you need to mutually share some emotional baggage (trauma, attachment wounds) relevant to fostering a good experience

When to Say "Yes" or "No":

The Mindful Consent model (developed by Grace Newman) is one way to think about whether you feel safe enough to make a decision about consent in a given moment (referred to as the *Consent Zone*).

It asks you to check in with three things:

1. **Your body** *(what sensations are you feeling?)*
2. **Your emotions** *(how do you feel?)*
3. **Your thoughts** *(what's going through your mind?)*

These are shaped by past experiences, social pressure, power dynamics, trauma, and what you've been taught about sex and relationships.

You may be in your *Consent Zone* when all three feel "safe enough". It's not about feeling perfect, but settled enough that you can make a choice. That choice might be yes, no, or "I need to pause". If something feels off, that can be a sign to slow down or stop.

Listening to your body and brain about what you want to do in a given moment and trusting yourself is not necessarily easy for all of us, especially if you experience **incongruence** (e.g., being aroused physically, but not mentally and vice versa) or **hypervigilance** (on edge) in situations that are technically "safe". This is all okay and that's why you account for all 3 aspects to make a consent decision.

Let's try this with an example:

Let's try this with an example. You're getting intimate with someone and they suggest trying something new.

In that moment, you might notice:

Thoughts:

- "I don't know if I'll like that."
- "That sounds kinda hot."
- "That's not for me."
- "They might judge me if I say no."
- "They are weird for wanting this."
- "I need to be careful."

Emotions:

- Excitement
- Nervousness
- Curiosity
- Discomfort

Body:

- Tension
- Butterflies
- Arousal
- Shutting down
- Stomach drop

Your response might change depending on the situation, whether you trust the person, or how well you know them.

The idea is that your ability and desire to consent to things can change from moment to moment. Checking in with your body, emotions, and thoughts could help you decide what feels right for you

Sexual Continuum:

No two people have the same sexual interests. **It can help to know what your own sexual interests are so you communicate them with more confidence.** Think about how comfortable or interested you would be in doing each of these things alone or with a partner. How might it change depending on what kind of relationship you have?

Sample activities: closed-mouth kissing, open-mouthed kissing, kissing on the neck, kissing other parts of the body.

	Giving	Receiving
Activities I Know I Enjoy		
Activities I'm Open to If My Sexual Partner Enjoys		
Activities I Don't Like		
Activities I'd Like to Try		

Reflection Questions:

- **How did you place each activity on your continuum?**
- **What kind of things were you thinking about when making decisions?**
- **Were you surprised by anything when you did this activity?**
- **Were some activities harder than others to place on your continuum? Why?**
- **Did you find yourself attaching different meanings to different kinds of sexual activities? For instance, do you attach different meanings to penetrative sex vs. other sexual activities?**

Fantasy & Kink for Healing:

Fantasies can be a fun and safe way to explore your desires in an environment you have control over. Lots of folks explore what turns them on through porn, but some porn (for example, queer feminist porn) can be better than others at depicting sex and consent in healthy and accurate ways. Other folks prefer reading fanfic, smut, or romantasy, which is another way to learn what you like or don't like, and what you like only in fantasy vs. what you want in reality.

Imagine a sexual or sensual fantasy. Where are you? Who is there? What turns you on? What do you feel in your body? Do you feel pleasure or shame? Presence or detachment?

Draw what comes to mind!

Noticing when you feel present and/or when you check out can be a good way to understand what's going on for you during fantasies or sexual experiences. You might feel more **present** when you're aware of your body, your feelings, and what you want in the moment. You might be **checked out** when you feel distant, disconnected, or on autopilot.

- Feeling present vs. feeling disconnected or not all there
- Being able to shift or change things up vs. Feeling stuck or going through the same pattern
- Noticing your emotions vs. Feeling numb
- Feeling like you're making choices vs. Feeling like things are just happening to you

Kink/BDSM and role play can be great places to creatively explore identity and power in sexual experiences, while still having control. These practices can help survivors more safely feel sensation, navigate power, and rewrite consent scripts.

Kinksters and BDSMers have consent practices that centre risk-awareness and safety as central to everyone's pleasure - vetting, limits (aka boundaries), negotiation (aka discussing the 5 W's), safe words & signals, aftercare (post-activity check-in and care practices) are all expressions of this. Kink/BDSM's emphasis on safety can help you feel/stay present when you have a hard time doing so and can allow lots of survivors to reclaim joy, sensuality, and choice.

Sexual Desire Accelerators & Breaks:

We all have things that make us feel more or less “in the mood” for intimate or sexual experiences. **The dual control model of sexual desire helps you understand what your “accelerators” and “brakes” are.** Having this information can help you feel more understanding rather than judgmental towards changes or differences in your libido and sense of sexual or sensual desire.

Think about what heats you during intimate moments, i.e. your “accelerators”, and what cools you down, i.e. your “brakes”.

Some accelerators or brakes could include: words of affirmation, sexy talk, meaningful eye contact, school or work stress, conflict, grief, gender euphoria, gender dysphoria, little sleep, well-rested.

This activity can also be done with partners to open up more compassionate conversations about libido differences and give everyone more information about your respective accelerators and brakes. On the following page are some questions that you might ask yourself and/or a partner when engaging in sexual or physically intimate experiences:

Ask yourself, before:

- What sexual activities do I enjoy?
- What kind of touch, pace, and communication styles do I enjoy?
- What are my emotional boundaries?
- How do I communicate consent and check-ins with my sexual partners?
- What are my physical boundaries?

Ask them, before:

- What sexual activities are you into?
- What are your physical boundaries?
- What are your emotional boundaries?
- How do I know if you're into something or not?
- How do you prefer to communicate/ check-in?
- What kind of touch, pace, and communication styles do you enjoy?

Afterwards, for all:

- What did you enjoy most?
- Anything you didn't enjoy? What would you like less of?
- Is there anything new or different you'd like to try?
- Did any feelings come up that you'd like to check in about?

Circles of Support:

I don't want to feel alone in this patchworking process.

At the end of the day, being listened to and believed goes a long way in healing. If you don't feel you have this support right now, there's ways to get creative. The following **Circle of Support** exercise is meant to help you recognize supportive people who can help you in your patchworking process. This is adapted from the Project Peace Workbook by Native Women's Association of Canada.

The goal is to diversify your circle of support to many people for specific roles rather than one person for all roles. It's okay if you can't think of a unique person for each of the categories on the following page - a lot of us have times where we don't have a full circle of support. But this circle can and will change over time. You can be really broad when thinking about a "support person" - they can include pets, a celebrity or influencer you look up to, psychoeducational creators on TikTok or IG, fictional characters or stories that you resonate with, etc. **See other examples here:**

IRL & Online Friends

Teachers

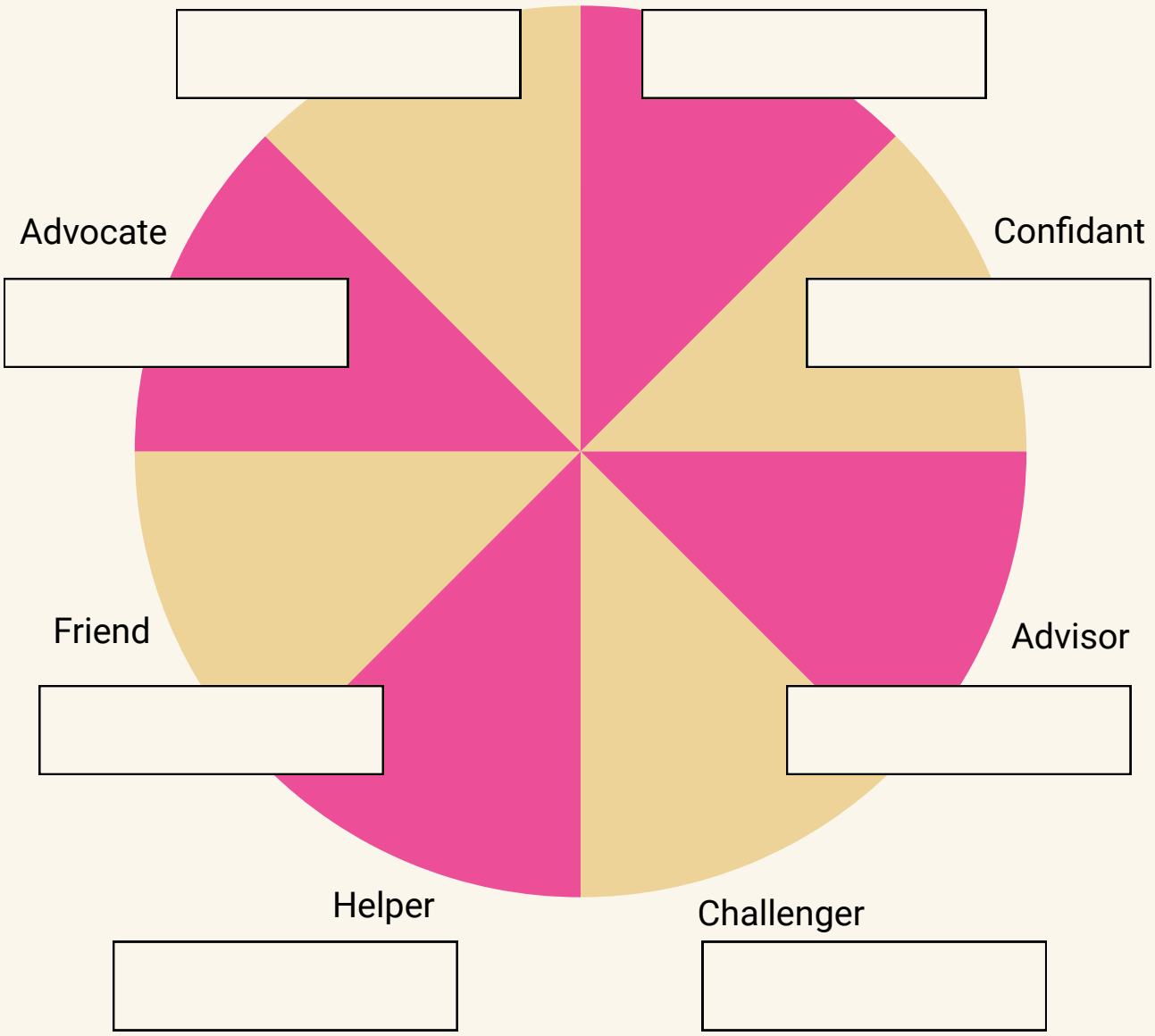
Healthcare Providers

Counselors

Family Members

Co-workers

Building your Circle:



Role Model: *Can give me advice or direction*
Confidant: *Will not judge me when I confide in them*
Advisor: *Will give me their opinion or solution*
Challenger: *Could recommend a new way of looking at things*
Helper: *Can support me in a crisis*
Friend: *Can laugh and be silly with me*
Advocate: *Can connect me with resources or assistances*
Loved One: *Will make me feel loved and valued*

What Next?

Remember, **you are not alone in this process of patchworking care, and we mean that literally**.

If you need a place to talk through your feelings, bounce ideas off of, help you ground, and/or support you to find resources, please reach out to LGBT YouthLine. We are 2SLGBTQIA+ peers here to support you.

Anonymous Peer Support for 2SLGBTQ+ Youth Under 30

Chat

Open 4 - 9:30 PM:

youthline.ca

Email

Responded to within service hours:

askus@youthline.ca

Text

Open 4 - 9:30 PM:

647-694-4275

In closing, here are a few self-advocacy tips that survivors say are really helpful in the process of pathworking your care:

When asking for supports and resources from someone, whether it's a peer or professional, you can **ask them to *"refer responsibly***" - being honest and open about what you *will* get but also, very importantly, what you *won't* get (or even just that they don't know).

You don't have to disclose the details of sexual harm to access most resources – it's up to you to decide what feels good to share and what might be re-traumatizing to share.

Creating a list of key words can help guide how you vet resources and support - e.g., "trans-inclusive" may be more meaningful than "queer-affirming" since the sexual harm supports are often very gendered.

You are deserving of support - it's not a matter of whether someone has it "worse," the supports are for you and you're not taking them away from anyone else; long waitlists or short-staffing are not a "you" problem – they are a problem of the people in power who are not funding supports that are necessary and life-saving.

Sources:

Boundaries are Beautiful

Come As You Are

Creative Interventions Toolkit: A Practical Guide to Stop Interpersonal Violence

Fumbling Towards Repair: A Workbook for Community Accountability Facilitators

Healing Sex: A Mind-Body Approach to Healing Sexual Trauma
Mindful Consent Model

Planned Parenthood FRIES Model

Self-Advocacy Journal: A Resource for Rural Survivors of Sexual Violence by Women's Sexual Assault Centre of Renfrew County
Senn, C.Y. with Crann, S.E. (2026). The Adolescent Enhanced Assess, Acknowledge, Act (A-EAAA) Sexual Assault Resistance Program. Windsor, ON, Canada: University of Windsor.

Sex, Consent & Communication Reflection Activity Collection by Recognize Violence, Change Culture

Stay Solid!: A Radical Handbook for Youth

Support a Circle of Care: Creating a Circle of Care for Caregivers by Native Women's Association of Canada

The Sexual Healing Journey: A Guide for Survivors of Sexual Abuse

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