"It's a fine line": An autoethnographic exploration of alcohol-involved sexual assault

by

Laura Marlene Morrison

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Author's declaration

I hereby declare that I am the sole author of this thesis. This is a true copy of the thesis, including any required final revisions, as accepted by my examiners.

I understand that my thesis may be made electronically available to the public.

Abstract

When I was an undergraduate student at the University of Waterloo, I was sexually assaulted at a party. My experience was dismissed and discredited by friends, peers, and the police. I spent the remainder of my undergraduate career wrestling with the aftermath: coming to terms with what had happened to me, navigating psychological distress, and attempting to rebuild my life and my identity. As a graduate student at the University of Waterloo, I have dedicated my time to understanding violence against women as a social phenomenon. With the foundation of knowledge I have built, I return now to my own experience to unpack, explain, and analyze what happened to me, why it happened, and what knowledge I can draw from it. By situating myself as both the participant and the researcher, I aim to invite readers into a dynamic storytelling experience that inspires both thought and action.

Over the past few years, sexual violence has become a more common topic of conversation in public arenas. Largely as a result of the #MeToo movement, awareness of the pervasive and damaging nature of sexual violence is perhaps at an all-time high. However, as is seen the continued high rates of assault and harassment perpetration, we still have a long way to go. Insightful conversations around sexual violence and assault remain necessary and valuable to all of society, but especially to women and non-binary folks who suffer victimization most often.

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I would like to thank my family for their constant support and dedication to seeing me become the person I want to be. My parents, Kim and Peter, and my sisters, Kelly and Heather, have loved me and supported me through it all. To my fiancée Zach, you are kind of the partner every person deserves.

To Chanel Miller, whose public reclaiming of her own life has forever changed the way the world turns.

This thesis is dedicated to survivors everywhere. I cannot believe the strength I have had to muster to confront what has been done to me. Even after all this time and all this research, I am still baffled by the way that I – and so many others - have been treated, not only by perpetrators, but by the justice system, friends, family, strangers, educators and policy makers. This is not just a master's thesis, this is a re-claiming of my own existence; a public declaration that what happened to me was wrong, and that it deserves your attention.

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Kesha, "Praying" Music Video, 2017

Chapter One: Introduction

Everything goes black.

I hear muffled sounds. It's still black. I feel pressure on my body. I feel pressure in my vagina. I am aware that my pants aren't around my waist, they're down past my knees. My eyes open and I see the wall of a room to my right. I'm on my back. I'm confused. The realization of what's happening hits me like a wrecking ball. Someone is having sex with me. I lay still, afraid. I feel his penis inside me. I feel the weight of his body on top of me. I don't look at his face until he gets off. It all happens so quickly.

Sexual assault, a term used to describe any unwanted sexual contact (Cowley, 2014; Senn et al., 2014), is a critical social issue (Armstrong, Hamilton & Sweeney, 2006; Krebs, Lindquist, Warner, Fisher & Martin, 2009; McCauley, Calhoun & Gidycz, 2010; Lorenz & Ullman, 2016; Maurer, 2016). In a representative sample of female students at Canadian universities, more than one in four reported being sexually assaulted (Senn et al., 2014). Indeed, the majority of first-year female students had been sexually assaulted by a man, and one-third had experienced rape (penetrative assault) or attempted rape (Senn et al, 2014). Relatedly, alcohol is a factor in more than 50% of all sexual assaults and is most commonly linked to sexual assaults on university and college campuses (Armstrong, Hamilton, & Sweeney, 2006; Krebs, Lindquist, Warner, Fisher, & Martin, 2009; McCauley, Calhoun, & Gidycz, 2010; Senn et al., 2014) or among college aged women (Lorenz & Ullman, 2016; Relyea & Ullman, 2015). The pervasiveness of sexual assault is exceptionally problematic given the harmful physical and mental health consequences that result, which include physical injuries as well as depression, suicide ideation, posttraumatic stress disorder (PTSD), unwanted pregnancies, and sexually transmitted infections (Lorenz & Ullman, 2016; Relyea & Ullman, 2015; Senn et al., 2014).

At the core of sexual assault is the issue of consent. Under the Canadian Criminal Code, consent is defined as the voluntary agreement to engage in a sexual activity (Department of Justice, 2015). To have consent, participants must be capable of consenting (having full mental capacity, being conscious, not incapacitated in any way), and cannot be induced by abusing a position of trust, power, or authority (Department of Justice, 2015). Additionally, consent can be legally retracted at any point in time to disengage in the activity (Department of Justice, 2015). Given the clear definition, it would follow that there would exist a common understanding of consent, responsibility, and wrongdoing. However, as will be discussed within this thesis, this is not the case in both social attitudes and the implementation of the justice system.

A critical barrier to understanding and properly responding to instances of sexual assault are the social attitudes and values that dismiss reports and disclosures (Lorenz & Ullman, 2016; Maurer, 2016). In particular, alcohol-involved assault remains vastly overlooked, discredited, and mishandled (Lorenz & Ullman, 2016; Mauer, 2016). In fact, victims in alcohol-related assaults are more likely to be blamed for their victimization and courts are more likely to look upon defendants favourably (Lorenz & Ullman, 2016; Mauer, 2016; Relyea & Ullman, 2015). Indeed, alcohol use by a perpetrator significantly decreases their perceived responsibility as they are seen as not in complete control of their actions (Lorenz & Ullman, 2016; Maurer, 2016). In contrast, alcohol use by a claimant is viewed as a demonstration of an individual's sexual intention and a representation of consent, therefore increasing responsibility for the assault (Lorenz & Ullman, 2016; Maurer, 2016; Relyea & Ullman, 2015). Moreover, less than 20% of outside observers labelled alcohol-involved assaults as rape (Maurer, 2016). As a result, as few as 3% of victims self-label sexual assault as rape, and 80% blame themselves for the assault (Maurer, 2016). These negative social reactions and related self-blame are associated with poor post-assault recovery, increased alcohol problems, higher rates of depression and PTSD, maladaptive coping, and revictimization (Relyea & Ullman, 2015).

Gender roles and expectations play a significant role in influencing the behaviour and interactions, particularly in reference to sexual assault (Cowley, 2014; Lorenz & Ullman, 2016; Maurer, 2016). These roles, prevalent over centuries of history around the globe, prescribe men are dominant and strong, whereas women are weak, subordinate, and dependant (Cowley, 2014; Lorenz & Ullman, 2016). Men are praised for their physical strength and athleticism, as well as their ability to mask all emotions except anger (Cowley, 2014; Lorenz & Ullman, 2016). In contrast, women are praised for being meek and mild, nurturing, and delicate in form as well as disposition (Cowley, 2014; Lorenz & Ullman, 2016). The reproductions and reinforcements of these ideals normalize sexual assault by positioning men over women (Cowley, 2014; Lorenz & Ullman, 2016). Research indicates that more than 95% of adult sexual assault victims are women, while assailants of both male and female victims are usually men (Zawacki, Abbey, Buck, McAuslan, & Clinton-Sherrod, 2003). There is a consistent empirical association between adherence to traditional gender roles and sexual assault perpetration (Cowley, 2014).

Expectations of sexual conduct draw heavily upon social gender roles (Cowley, 2014; Maurer, 2016). Men are the main actors, while women are sexual gatekeepers who are expected to resist sexual advances (Cowley, 2014; Lorenz & Ullman, 2016). Victim blaming beliefs, often referred to as "rape myths", stem from these socialized gender expectations (Lorenz & Ullman, 2015; Maurer, 2016). Some of these include the idea that the victim actually wanted it or enjoyed it, that women are responsible by dressing in a certain manner or acting promiscuously, or that women lie and exaggerate victimization to protect themselves (Cowley, 2014; Lorenz & Ullman, 2016; Maurer, 2016). These "rape myths" serve to justify aggressive male behaviour and normalize the sexual victimization of women (Cowley, 2014; Lorenz & Ullman, 2016). The legal system is often guilty of reinforcing "rape myths"; even in court cases where the victim was inebriated to the point of unconsciousness, attorneys still argue that the victim's use of alcohol mitigated the perpetrators responsibility (Maurer, 2016). The prevalence of these beliefs

contributes to very low rates of formal reporting; less than 3% of university women who are assaulted in situations involving drugs or alcohol report it to the police (Maurer, 2016).

Post-assault, regardless of receiving positive or negative social reactions, victims experience ongoing shame, guilt, and crippling mistrust (Buss, Majury, Moore, Rigakos & Singh, 2016; Lorenz & Ullman, 2016). Additionally, victims experience varying degrees of posttraumatic stress disorder (PTSD), which are most often accompanied by depression, anxiety, and substance abuse (Buss, Majury, Moore, Rigakos & Singh, 2016; Lorenz & Ullman, 2016; Messman-Moore, Ward, Zerubavel, Chandley & Barton, 2015; Nickerson et al., 2013; Relyea & Ullman, 2015; Senn et al., 2014). This comorbidity poses increased barriers to treatment and recovery, as it becomes increasingly difficult to know which issue to address first (Nickerson et al., 2013). Substance abuse as a coping strategy also serves as a predictor for revictimization, which substantially limits recovery and overall adjustment (Lorenz & Ullman, 2016; Messman-Moore, Ward, Zerubavel, Chandley & Barton, 2015). These health factors often result in problems with schoolwork and subsequent withdrawal from education, as well as issues in both pre-existing and future relationships (Buss, Majury, Moore, Rigakos & Singh, 2016; Lorenz & Ullman, 2016; Senn et al., 2014). Moreover, sexual assault has shown to be a strong predictor of feelings of hopelessness and suicide attempts (Buss, Majury, Moore, Rigakos & Singh, 2016; Chang et al., 2015; Lorenz & Ullman, 2016).

Due to its hugely detrimental impact, sexual assault has been studied for decades (Brownmiller, 1975; Roiphe, 1994; Haaken, 2017; Krebs, Lindquist, Warner, Fisher & Martin, 2009). Traditional ways of knowing and generating knowledge have dictated a primarily post-positivistic approach to this research, mostly through questionnaire based methods (Senn et al., 2014; Engstrom, 2012). Although this research is certainly meaningful and necessary, it is not the only way to conceptualize and construct truth and knowledge. Additionally, these methods have historically ignored the complexity of women's experiences, placing them outside the scope of 'legitimate' inquiry (Hesse-Biber, 2007; Haaken, 2017).

In the second year of my undergraduate degree, I was a victim of alcohol-involved sexual assault in the form of a completed rape. I refer to myself throughout this thesis as a victim. Both "victim" and "survivor" are terms used to describe an individual who has experienced sexual assault (Thompson, 2000). I have chosen to write about myself as a victim because I feel like it most accurately describes the way in which I feel about being assaulted – harmed, injured, wounded, and damaged by actions that were not my own. Feminism, as a political movement, a theoretical framework, and a lens in which I see the world, has guided every aspect of the preparation of this proposal. Situating lived experiences at the core of inquiry is a distinctly feminist practice, used to "narrate and legitimize" otherwise overlooked narratives (Sinclair, 2019, p.146). The presentation and analysis of lived experiences provides a subjective and deeply emotional understanding of alcohol-involved sexual assault as a social and cultural phenomenon, allowing for the reader to step into the research process and interact with the content (Bochner & Ellis, 2016). The autoethnographic methodology centers on the storytelling of a lived experience in a uniquely personal way, as the researcher also serves as the participant. Given the complex, dynamic nature of sexual assault perpetration, victimization, disclosure, adjustment, and recovery, I believe that autoethnographic research can not only appropriately complement existing literature, but will provide a deeper, more personal understanding of the data.

The purpose of this autoethnography is to analyze my own experience of being a victim of alcohol-involved sexual assault, unpacking the cultural components of that experience to gain a better understanding. The aim is to generate a different way of knowing, one that focuses on my lived experience, to advance understanding and appreciation for the complexity and seriousness of alcohol-involved sexual assault, especially on Canadian university campuses. This holds deep significance for social justice, particularly for woman identified university students, as well as their family and support systems. Every time I do a presentation that includes my story of victimization, whether it be among students, academic professionals, or members of the wider community, someone approaches me after

to disclose to me their experience and either thank me for my work or ask for my help. This continually highlights for me the social justice implications of not only conducting research on sexual assault, but on doing so in such a personal way. The breaking down of social, emotional, and cultural barriers that accompanies vulnerable storytelling is a force I cannot take credit for, but one I can certainly utilize for this thesis and beyond. Additionally, the sharing and analyzing my own story serves as an act of personal resistance; I am deconstructing the crime committed against me and the social values that support that crime. This act personal resistance is inextricably linked to feminist outcomes, particularly personal empowerment and social change (Shaw, 2001). I was told explicitly by friends and family, and implicitly by law enforcement and popular media, that my story was shameful and had no place in public discourse. In choosing to write a thesis on it, and therefore speaking both uncomfortable and unwelcome truths, I am engaging in distinctly feminist act of resistance and self-determination (Shaw, 2001). Although one evocative story may be a drop in the ocean, acts of personal resistance, when taken up by the collective, can become a hurricane. Most notably, the "me too" movement, created in 2006 by Tarana Burke, has swept across the globe and impacted public discourse and policy regarding sexual harassment and assault (About – Me Too Movement, n.d.). Therefore, my thesis serves as both a personal act of resistance as I assert ownership of my story, and as part of a collective act grounded in the feminist outcome of social and political change (Shaw, 2001). Through academic research, I strive to use this thesis to express that what happened to me – and so many others – matters.

Chapter Two: Literature Review

In this section, I review several bodies of literature from various perspectives including interpersonal violence and gender studies to complement contributions, as well as illuminate gaps, from recreation and leisure studies. I begin by reviewing research pertaining to sexual assault and the particular risk for woman identified university students, exploring the consistent connection between alcohol consumption and victimization. Next, I examine the leisure literature that discusses "undesirable" pursuits, such as binge drinking and university party culture, and the darker side of leisure in society. Finally, I highlight research insights on the roles of masculinity in sexual assault perpetration, with particular focus on the connections between masculinity and violence as well as masculinity and alcohol abuse. The review of this literature highlights three main research gaps the proposed study addresses.

> *When I shut the door behind me, I break out in hysterical crying. I burst through the door of the adjacent room and see my girlfriend still on the bed where I last remember her being. I scream "SOMEONE ASSAULTED ME", and she responds with a blank stare. She's either too confused or too drunk to process the information. Perhaps both. I leave the room, catapulting myself up the stairs to the main floor.*

A Note on Language

Sexual victimization is an emotionally charged, highly traumatic area of discussion. Language is important when building a framework in order to understand such a delicate issue (Hockett & Saucier, 2015). As mentioned in the introduction, both the terms "victim" and "survivor" are often used to describe someone who has experienced sexual assault (Thompson, 2000; Hockett & Saucier, 2015). Research shows that the term "victim" is often associated with perceptions of weakness,

powerlessness, vulnerability, and the ongoing effects of rape, whereas the term "survivor" is more closely associated with perceptions of strength, recovery, and the experience of having moved on from the rape (Thompson, 2000; Barry, 1979; Best, 1997; Figley, 1985; Hockett & Saucier; Holstein & Miller, 1990; Parker & Mahlstedt, 2010). When talking about myself, I use both of these terms to convey different things. I see myself as a victim when it comes to being the target of a violent crime. I did not have a hand in determining what happened to me. I had no power. I was victimized. I see my survivor status as something that has come with time. Each time I faced cruel situations associated with my assault, and overcame them, I became more of a survivor. Each time I made it through a PTSD episode, passed a class at school, disclosed to someone new, and took up advocacy projects, I was building on my survivor identity. In short, victimization is what my rapist did to me, and survivorship is what I have done for myself. I think it is of high importance to use language that the individual directly impacted by the assault is most comfortable with. This thesis focuses heavily on what my rapist did to me and the aftermath, and therefore I will be using the terms "victim" and "victimization" throughout.

2.1 Sexual Assault

Sexual assault covers non-consensual experiences ranging from unwanted contact to completed rape (Blayney & Read, 2018; Long & Butler, 2018). The World Health Organization defines sexual violence as any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic, or otherwise directed, against a person's sexuality using coercion, by any person regardless of their relationship to the victim, in any setting, including but not limited to home and work (World Health Organization, 2017). Thus, the term "sexual violence" serves as an umbrella term for any and all aggressive behaviour, both verbal and physical, whereas "sexual assault" refers more specifically to the physical manifestations of this violence. In this study, I will focus on sexual assault.

An emerging and important area of research on sexual assault has focused on the neurobiology of trauma – our brains respond, react, and are changed by traumatic experiences (Haskell & Randall, 2019; Herman, 1992). When our brains sense life-threatening events, the defence mechanisms in our central nervous system are activated, and other core processes (memory, speech, logic, reason, problem solving, etc.) go temporarily offline (Haskell & Randall, 2019). This provides explanation for why a traumatic event is usually remembered in bits and pieces, as opposed to a clear, linear narrative (Haskell & Randall, 2019; Herman, 1992). Victims of sexual assault often cannot remember or explain their behaviour during or immediately after their assault, which can be misconstrued as being unreliable or dishonest (Haskell & Randall, 2019). In actuality, they have suffered a temporary, but dramatic, loss of cognitive functioning (Haskell & Randall, 2019). A traumatic episode not only interrupts brain functioning in that moment; there are long-lasting effects on cognitive functioning moving forward (Herman, 1992).

Post-assault, victims often experience high levels of distress and significant barriers to adjustment and recovery (Lorenz & Ullman, 2016; Ben-Ezra et al., 2010; Chang et al., 2015). Sexual assault impacts core cognitive processes, nervous system functioning, and the way that threats are henceforth perceived (Ben-Ezra et al., 2010; Haskell & Randall, 2019; Herman, 1992). According to emotional processing theory, an overgeneralization of the traumatic experience to other life situations generates critical negative schemas involving incompetence and danger (Ben-Ezra et al., 2010). These schemas in turn lead to non-adaptive coping behaviours and increased distress (Ben-Ezra et al., 2010). New schemas lead to an exaggerated risk assessment, interpersonal mistrust, and paranoid behaviours (Ben-Ezra et al., 2010). Shattered beliefs in a just world and better future may contribute to the common characteristic of depression present in trauma victims (Chang et al., 2015; Ben-Ezra et al., 2010). Trauma not only obscures worldviews, but also leads to drastic intrinsic and extrinsic behavioural and motivational changes (Ben-Ezra et al, 2010; Chang et al., 2015).

PTSD is the most well-documented mental health consequence of exposure to sexual assault victimization, but often presents with comorbid conditions such as depression, anxiety, and substance abuse (Chang et al., 2015; Lorenz & Ullman, 2016; Nickerson et al., 2013). Victims of sexual assault who develop PTSD without comorbidity are the minority (Nickerson et al., 2013). Victims with more than one mental health condition have been shown to have more functional impairments and disability following the assault compared to those without additional diagnoses (Nickerson et al., 2013). This comorbidity poses considerable challenges, such as judging which type of psychological symptoms should be targeted first (Nickerson et al., 2013). Findings to date have been mixed regarding the relationship between PTSD and other psychological symptoms across time, which make recovery and adjustment unpredictable to navigate (Nickerson et al., 2013).

2.1.2 Feminist Research on Sexual Assault

As a result of the hugely detrimental effects of sexual assault, particularly among women, there exists a long history of feminist inquiry (Haaken, 2017). In the 1970's, the prototypical rapist had long been associated in the popular imagination with the dark terrors of the city, and folk tales of rape often operated as a cautionary tale against female ventures across social boundaries (Brownmiller, 1975). However, the contemporary feminist movement challenges these assumptions and started to provide a new framework for understanding sexual violence (Brownmiller, 1975; Buchwald, Fletcher, & Roth, 1993; Donat & D'Emilio, 1992; Matthews, 1994). Brownmiller's landmark book, "Against Our Will: Men, Women and Rape" (1975), suggested that the belief that females were safe within social boundaries was a myth, which was fortified by findings that pointed to women being often harmed or killed in their own homes rather than on the street (Browne, 1986; Schecter, 1982). Decades of feminist research helped shift the ideological ground from stranger rape to date rape, martial rape, and other violations in the context of intimate relationships (Bourque, 1989; Plummer, 1995; Haaken, 2017). However, this

movement largely ignored the racial component of sexual violence (Haaken, 2017). In the early 1990s, Kimberle Crenshaw (1991) took issue with the neglect of racialized women's experiences of sexual violence in feminist and anti-racist discourses. She emphasized, through her model of intersectionality, that various forms of structural inequality worked together to create a dynamic interplay that impacted violence and oppression (Crenshaw, 1991; Haaken, 2017). Through this, Crenshaw highlighted and validated the experiences of black women, whose stories had been often overlooked (Haaken, 2017).

Decades after the feminist anti-rape movement of the 1970's, feminist writer Katie Roiphe (1994) published a book titled "The Morning After", in which she argued that the movement had become obsessed with sexual victimization. The book claimed that young feminists were inadvertently reinforcing the patriarchal protections that second wave-feminists fought to overturn (Roiphe, 1994; Haaken, 2017). She drew a picture of pitched anxiety and collective hysteria, a heightened sense of perceived dangers and female vulnerability (Haaken, 2017). Critics and activists have suggested that women (including Roiphe) have suffered more of a collective denial rather than hysteria when it comes to the reality of sexual assault (Haaken, 2017). Research solidifies this point, consistently displaying the startling reality of the dangers of sexual victimization (Chasteen, 2001; Brooks 1997; Buchwald et al. 1993; Daly & Chasteen 1997; Donat & D'Emilio 1992; Estrich 1987; Kelly 1988; Kilpatrick, Resick, & Veronen 1981; Koss 1993; Lloyd & Emery 2000; Matthews 1994; Scheppele & Bart 1983; Schwendinger & Schwendinger 1983; Scully 1990; Searles & Berger, 1995).

Since the emergence of the anti-rape movement in the 1970's, a particular focus of research has been alcohol-involved sexual assault (Ullman, 2003; Testa & Livingston, 2009; Lorenz & Ullman, 2016). This research has been undertaken by many disciplines: criminology, psychology, sociology, health, and gender studies (Lorenz & Ullman, 2016). Literature investigates the prevalence of alcohol-related sexual assault (Abbey, 2002; Messman-Moore, Coates, Gaffey, & Johnson, 2008; Kilpatrick et al., 2007; Ullman & Brecklin, 2000), the link between alcohol and sexual assault (Abbey, 2002; Mohler-Kuo et al., 2004;

Testa, VanZile-Tamsen, & Livingston, 2004), the roles of situational and behavioural risk factors

(Mustaine & Tewksbury, 2002; Testa & Livingston, 2009; Norris, 2008; Testa et al., 2003; Mohler-Kuo et

al., 2004), and disclosure and social reactions (Ullman & Najdowski, 2010; Ullman & Filipas, 2001;

Littleton et al., 2009; Ullman et al., 2008) – all of which will be discussed as I move forward.

2.1.3 Female University Students at Risk

For many woman identified individuals, the highest period of risk for sexual assault (ages 18-24)

coincides with their time as a university student (Rennison, 1999; Sinozich & Langton, 2014). The

frequency of sexual assaults among woman identified college or university students is much higher than

women identified individuals in general; around 47% of all women identified individuals report forced or

coerced sexual experiences in their lifetime (Jozkowski & Sanders, 2012), whereas over 70% of woman

identified postsecondary students report victimization since the age of 16 (Turchik & Hassija, 2014).

Findings from a Canadian General Social Survey reported that woman identified students have a high

risk of victimization; 41% of all sexual assaults reported were from university students, and 90% of those

victimized were women (Conroy & Cotter, 2017). However, it is possible that age, more than student

status, is the primary risk factor (Conroy & Cotter, 2017). It could be that young women in general are

disproportionately more at risk and many simply happen to be university and college students at that

time in their lives. In any case, the troublingly high rates of campus sexual assault and the victimization

of woman identified university students remain a pressing social issue.

The problematic reality of campus sexual assault being recorded in research dates back to

Kirkpatrick and Kanin's 1957 study, but it was not until the results of Koss, Gidycz, and Wisniewski's

(1987) study were published that this phenomenon garnered public attention. As a result, an

international conversation has emerged around the prevalence of sexual assault on college and

university campuses. Multiple comprehensive research studies from around the world have shown that

somewhere between 20-25% of all female university students experience sexual assault during their

time at school (Fisher, Cullen, & Turner, 2000; Humphrey & White, 2000; Krebs, Lindquist, Warner,

Fisher & Martin, 2009; McCauley, 2015; Mouilso, Fischer & Calhoun, 2012; Senn et al., 2014). Numerous

studies have found that one of the periods of greatest vulnerability for sexual victimization occurred in

the first year of post-secondary education (Classen, Palesh, & Aggarwal, 2005; Fisher, Cullen, & Turner,

2000; Humphrey & White, 2000). The increased risk for this population may be due to limited

experience with social interactions, dating, and alcohol consumption (Carmody, Ekhomu, & Payne, 2009;

Koss, Gidycz, & Wisniewski, 1987). Additionally, woman identified students may be at increased risk as a

result of their proximity to rape-supportive male peer groups such as fraternities and university sports

teams (Franklin, Bouffard, & Pratt, 2012; Schwartz & DeKeseredy, 1997). Pro-abuse peer support is

strongly associated with both fraternity membership and sexual assault (DesKeseredy & Schwartz,

2013). As Gwartney-Gibbs and Stockard (1989) stated almost 20 years ago: "[s]exual aggression and

victimization may be a part of peer group culture. That is, the friendship networks from which

individuals draw their… partners may allow, or even encourage, male sexual aggression and female

victimization in different degrees" (p.185). As further support for this idea, the vast majority of

perpetrators are not strangers to the people they assault (DeKeseredy, Hall-Sanchez, & Nolan, 2017).

Rather they are male acquaintances, classmates, friends, hook up partners, boyfriends, or former

boyfriends (Krebs, Linquist, Warner, Fisher & Martin, 2007; McOrmond-Plummer, Easteal, & Levy-Peck,

2014; Rennison & Addington, 2014).

To further illuminate the severity of this problem, studies have pointed to a consistent positive

correlation between sexual assault and suicidal risk in student populations (Chang et al., 2015). College

students who had previously experienced unwanted sexual experiences had significantly increased risk

for suicide ideation (Chang et al., 2015). Individuals who had a history of sexual assault were more likely

to report higher lifetime rates of suicide attempts (Chang et al., 2015). Experience of sexual assault in

students was a unique predictor of greater hopelessness and suicide probability (Chang et al., 2015).

Negative health outcomes increase in probability and intensity for victims of alcohol-involved assaults

(Lorenz & Ullman, 2016).

2.1.4 Alcohol-Involved Assault

Alcohol use by victims, perpetrators, or both, is present in half of all sexual assaults (Abbey,

2002; Messman-Moore, Coates, Gaffey, & Johnson, 2008). Most often, woman identified students are

taken advantage of after becoming intoxicated voluntarily (Killpatrick et al. 2007). Alcohol use increases

vulnerability for several reasons, including physiological effects of intoxication as well as the prevalence

of potential perpetrators present in alcohol-involved situations (Lorenz & Ullman, 2016). In part, alcohol

presents risk because of its disruptive impact on cognitive processes such as perception, reaction time,

and decision-making (Lorenz & Ullman, 2016; Monks, Tomako, Palacios, & Thompson, 2010).

Although women who drink at a party or bar may have increased risk of victimization, Lorenz

and Ullman (2016) note that "drinking heavily alone at home may pose no increased risk for assault"

(p3). Therefore, the risk of victimization has more to do with social settings than with the consumption

of alcohol (Lorenz & Ullman, 2016). Research has demonstrated that assaults often occur after

consuming alcohol at parties or in bars where women identified individuals may be more likely to

encounter possible offenders (Lorenz & Ullman, 2016; Mohler-Kuo et al., 2004; Norris, 2008; Testa et al.,

2003). Indeed, even among women identified individuals who are not students and are not in a

university setting, most sexual assaults occur as a direct result of a man taking advantage of, or

facilitating, a woman's incapacitation (Testa et al., 2003). Additionally, Martino, Collins, and Ellickson

(2004) discovered that among non-student populations, marijuana use increased risk for sexual

victimization more than alcohol use. Thus, it is not simply alcohol that raises a woman identified

student's risk, but the environment and factors associated with the environment that increase

probability of assault (Lorenz & Ullman, 2016). For instance, members of sororities have increased risk of victimization compared to non-sorority members (Mohler-Kuo et al., 2004). In particular, sorority members who attend parties where fraternity members are present have a rate of sexual assault four times that of other woman identified students (Chevalier Minow, & Einolf, 2009). In this way, it is proximity to fraternity members that increases the risk of assault among sorority members rather than alcohol consumption.

Higher numbers of sexual partners increase the probability of experiencing an alcohol-involved sexual assault among female students, simply because of encountering more potential assailants (Franklin, 2010, 2011; Lorenz & Ullman, 2016). Although alcohol consumption and sexual assault often co-occur, alcohol is not the main contributor to sexual assault (Abbey et al., 2001; Abbey, 2002; Engstrom, 2012). Research does not support the premise that alcohol consumption has a causal relationship with sexual assault (Engstrom, 2012). However, alcohol consistently appears in instances of sexual assault of women both in and out of university settings (Lorenz & Ullman, 2016).

The convergence of circumstances (social setting and alcohol consumption) places certain people at elevated risk for assault (Mustaine & Tewksbury, 2002). Within these risky settings, hook ups occur among college students that often begin with some degree of consensual agreement, but may result in unwanted activity (Flack et al., 2007). In these settings, the reasons most commonly mentioned for the unwanted experience is that judgment was impaired by alcohol (Flack et al., 2007) and because heavy drinking often takes place in social settings where there are lots of people (Testa & Livingston, 2009). Settings that include alcohol consumption and hooking up place women identified people in situations where they may not perceive known persons as a threat, resulting in increased risk for assault (Lorenz & Ullman, 2016).

The contribution of alcohol in sexual offences is somewhat confused by societal views on the role alcohol plays in sexual situations (Gunby, Carline, Bellis & Beynon, 2012). Western society is permeated with positive images linking alcohol and sex, while research demonstrates that alcohol is often used, especially by young people, to facilitate sexual encounters and produce sexual effects (Gunby, Carline, Bellis & Beynon, 2012). As sex crimes often occur following social interactions involving alcohol consumption, it is realistic to surmise the non-consensual sex occurs, in certain cases, when consensual sex is also a potential outcome (Gunby, Carline, Bellis & Beynon, 2012). Consequently, a person's interpretation of the sexual activity may influence the potential for assaultive behaviour (Gunby, Carline, Bellis & Beynon, 2012). Indeed, to mitigate possible rejection, the cues men and women use to signify attraction are typically ambiguous (Gunby, Carline, Bellis & Beynon, 2012). This can easily lead to misinterpretation, which is likely to be exacerbated when alcohol disrupts cognitive processes, making it more difficult to evaluate complex stimuli and situations (Gunby, Carline, Bellis & Beynon, 2012). Additionally, men are less likely to believe that being drunk affects one's capacity to consent to sex (Gunby, Carline, Bellis & Beynon, 2012).

> *Everything is a blur. I can't tell how much time has passed. The next thing I know, my boyfriend is coming towards me. Someone called him. I reach for him and cry into his shirt, finally feeling a sense of relief. As he turns to address his roommate, I see the perpetrator across the room. I look up at my boyfriend and point to the man.*

> *"That's him".*

> *His roommate turns and looks, then looks back at us.*

> *"Couldn't have been him. I know him, he's a good guy."*

A common belief is that pre-assault drinking makes women accountable for their assault due to perceptions of promiscuity, while also dismissing the conduct of the assailant (Grubb & Turner, 2012). It has been suggested that women whose behaviour violates traditional gender norms such as using drugs or alcohol, hitchhiking, engaging in casual sex, and walking alone at night are often considered to be partially responsible for their own victimization (Tasca et al., 2013). These beliefs demonize victims of alcohol-involved assault and often lead victims to not realize that their experience was indeed rape even if they had been drinking (Lorenz & Ullman, 2016). Even police officers and the judicial system suggest that alcohol and/or drug use mitigates the perpetrator's responsibility for the incident (Tasca et al., 2013; Venema, 2016). As a matter of fact, an Ontario judge reinstated intoxication as a legal defense for accused persons in sexual assault cases just a few months ago (Fine, 2018).

As a result of these attitudes, victims of alcohol-involved sexual assault are more likely to feel that their experience does not meet the criteria for "true" rape (Bondurant, 2001; Littleton & Axsom, 2003). Research findings show more negative reactions for victims who had been drinking, as well as the negatively effect these responses have on recovery (Lorenz & Ullman, 2016). Victims who receive negative social reactions are likely to experience poor recovery if they do not have suitable social support (Lorenz & Ullman, 2016). The negative responses women receive after a disclosure are linked to poorer psychological and physical health outcomes (Ullman & Filipas, 2001; Ullman & Najdowski 2010). Negative social reactions are related to increased PTSD symptoms, self-blame and avoidance coping (Ullman et al., 2008). In one study, negative feedback specific to the victim's drinking were related with more characterological self-blame (Relyea & Ullman, 2015). Self-blame may also be influenced by the victim's own beliefs of stereotypes about intoxicated women being held accountable for their assault and, as a result, the negative societal stigma of drinking and rape weigh on the victim's ascription of the assault (Lorenz & Ullman, 2016). Harmful social responses motivated by stereotypes may also support self-blame in victims (Lorenz & Ullman, 2016).

In this way, negative reactions lead women to feel responsible not only for their behaviour, but also for their character following an alcohol-involved assault (Lorenz & Ullman, 2016). The reactions victims receive vary based on pre-assault alcohol use and then in turn influence the post-assault coping tactics victims engage in (Ullman & Filipas, 2001). Taken together, research shows that "experiencing an alcohol-involved assault poses obstacles to recovery distinctive from assaults where alcohol was not involved" (Lorenz & Ullman, 2016, p.9). Indeed, victims drinking at the time of assault appear to have more negative responses (Relyea & Ullman, 2015), experience more self-blame (Littleton et al., 2009; Ullman & Najdowski, 2010), use increased drinking to manage post-assault suffering (McCauley et al., 2009; Relyea & Ullman, 2015; Testa et al., 2003; Ullman et al., 2006), and have increased risk for successive alcohol abuse problems (Bedard-Gilligan et al., 2011; McCauley et al., 2009; Littleton et al., 2009b; Relyea & Ullman, 2015; Testa et al., 2003; Ullman et al., 2006).

Numerous studies have documented that heavy alcohol use or alcohol-related problems not only predict risk for alcohol-involved sexual assault, but also increase following the assault, which has indicated a cyclical pattern (Bedard-Gilligan et al., 2011; McCauley et al., 2009; Messman-Moore, Ward, Zerubavel, Chandley & Barton, 2015; Relyea & Ullman, 2015; Testa et al., 2003; Ullman et al., 2006). This is consistent with a self-medication or coping model, which would predict an increased tendency for women to use alcohol to cope with the negative effects of sexual abuse (Messman-Moore, Ward, Zerubavel, Chandley & Barton, 2015). One study suggests that sexual coercion among college students is correlated with higher levels of drinking to cope (Messman-Moore, Ward, Zerubavel, Chandley & Barton, 2015). Other studies focusing on coping and alcohol use suggest young women report using alcohol to improve their mood or cope with problems (Messman-Moore, Ward, Zerubavel, Chandley & Barton, 2015). Data suggests that women use alcohol to cope with psychological distress related to sexual assault (Messman-Moore, Ward, Zerubavel, Chandley & Barton, 2015).

2.2 Leisure

It is commonly thought that sexual assault occurs by strangers in stereotypically "dangerous" settings (alleys, forests, deserted streets late at night, etc.). However, this is often rarely the case. Most sexual assaults are committed by family members, intimate partners, friends, or acquaintances in familiar or comfortable leisure settings (homes, dorms, bars, etc.). As a result, there exist important intersections between leisure studies and sexual assault.

> *I excuse myself from the table. To get to the washroom I walk down a set of stairs and then down a long hallway. As I make my way down the hall, the events of the night before start playing in my mind for the first time. Images become clearer. Memories start to be pieced together. My nausea intensifies, and my vision gets blurry. The hall is spinning. Details of each moment hit me like punches in my stomach, over and over. I can remember. I don't want to. I want it to stop. But, it can't. I realize that it wasn't a bad dream. It wasn't a drunken misunderstanding. It actually happened. I struggle to reach the washroom. When I get myself through the door, I double over, shaking. This is real, I think to myself. This is real. This is real. I was raped.*

2.2.2 Leisure as a Component of Daily Life

Leisure is a complex and compelling phenomenon, which contributes to the fact that a standard definition of leisure remains elusive (Iso-Ahola, 1999; Maloney, 2011). Leisure activity and participation is defined by its characteristics of intrinsic motivation, self-determination, and a sense of perceived freedom (Iso-Ahola & Chun, 1996). As a result, leisure is perhaps best described as a subjective experience (Lobo, 1999; Maloney, 2011; Passmore, 2003; Primeau, 1996). To simply state that a certain activity may be classified as leisure activity is nearly impossible since different individuals can label the same activity as leisure or work (Maloney, 2011). Even within-individuals, an activity may be classified as

leisure at one point in time, but may not be considered leisure at a later time (Maloney, 2011). Despite

these subjective descriptions, leisure is generally thought of as time free from obligations, or the pursuit

of recreational activities like reading or exercising (Brightbill, 1960; Kelly, 1982; Csiksentmihalyi & Judith,

1989; Yarnal, Qian, Hustad & Sims, 2013). Most importantly, leisure is commonly held to be a context

with relative freedom of choice and some level of enjoyment or intrinsic reward (Iso-Ahola, 1980;

Csiksentmihalyi & Judith, 1989; Yarnal, Qian, Hustad & Sims, 2013).

The study of leisure has traditionally focused on the benefits of leisure participation (Shinew &

Parry, 2005). Literature often reflects on the countless benefits that individuals receive from their

activity participation (Shinew & Parry, 2005). However, Rojek (1989) recognized the negative side of

leisure and the costs associated with such participation when he stated, "an obvious and indisputable

fact about leisure in modern society is that many of the most popular activities are illegal" (p.82). This

seems to be the case when one considers some of the more popular leisure pursuits among college

students: drinking and drug use (Shinew & Parry, 2005).

2.2.3 Alcohol Consumption as Leisure

As a result of the lack of recent data on Canadian university students' time use, I have utilized

data from American research as well. Research demonstrates that American college students have

considerable amounts of leisure time – and average of 42 hours a week – almost twice the average 24

hours a week devoted to attending and studying for class (American Time Use Study, 2010). How do

they spend it? Some engage in leisure activities that boost mood, increase coping skills, reduce stress,

encourage physical activity, promote academic and community engagement (Yarnal, Qian, Hustad &

Sims, 2013). Others choose free time activities that can lead to physical inactivity, social isolation, stress,

academic and community disengagement, and illicit substance abuse (Payne, Ainsworth & Godbey,

2010; Yarnal, Qian, Hustad & Sims, 2013). One persistent negative use of free time is excessive alcohol

consumption, described as "the single greatest public health hazard to American college and university campuses" (Misch, 2010; Yarnal, Qian, Hustad & Sims, 2013).

During my time as an undergraduate student, almost all out-of-class activities revolved around alcohol consumption of some sort. Even school-sanctioned socials were often held at the campus bar. Orientation Week, Homecoming, and St. Patrick's Day were often characterized by all-day house parties. These gatherings often result in dangerous activity and police involvement; Waterloo Regional Police laid 514 charges at the Ezra Ave. St. Patrick's Day party last year (Monteiro & Weidner, 2019). Heavy drinking is often a key ingredient in any social or celebratory event, such as school sporting events (Neal & Fromme, 2007), birthdays (Rutledge et al., 2008), and student leisure travel (Bellis et al., 2004; Rogstad 2004), such as reading week/spring break vacations. However, heavy episodic alcohol consumption is associated with negative outcomes, including memory blackouts, risky sexual activity, interpersonal distress, academic difficulties, and short and long-term health concerns (Jackson, Sher, & Park, 2005; Schulenberg & Maggs, 2002; Yarnal, Qian, Hustad & Sims, 2013). It is important to stress that alcohol use and abuse, including heavy episodic consumption, occurs mainly during college students' leisure time (Yarnal, Qian, Hustad & Sims, 2013). Despite the popularity of drinking and drug use, very little is written in the leisure studies literature about college students' involvement in these leisure time activities (Shinew & Parry, 2005). However, recent literature from disciplines such as sociology, gender studies, public health, and studies in interpersonal violence have highlighted the predominance of substance use among young adult populations (Boyle & Walker, 2016; Lorenz & Ullman, 2016; Yarnal, Qian, Hustad & Sims, 2013; Seabrook, Ward, & Giaccardi, 2016).

Alcohol has become an important commodity within the contemporary leisure culture (Fry, 2011; Gouding et al., 2008). Drunkenness and the process of getting drunk is not only an accepted aspect of youth leisure culture, but has gained a level of unprecedented cultural importance acting as a powerful device in the articulation of social relationships, aspirations, and values (Fry, 2011; Maloney,

2011). For many, a drunken state of being is deliberately sought in the aim to experience the intensity,

joy, and euphoria of intoxication; where experiential pleasure is central to the pursuit of an altered state

of consciousness (Fry, 2011; Maloney, 2011). The fact that alcohol and the excessive levels of

consumption play an integral component in young adults' pursuit of pleasure and excitement raises an

important issue regarding the interrelationship between alcohol consumption, pleasure, and harm to

self and others (Fry, 2011). This leisure pursuit becomes an exceptionally complex arena given the added

negotiations of the social power and gender.

2.2.4 Gender and Leisure

Barriers to women's access to leisure opportunities formed a significant focus of early feminist

inquiry within leisure studies (Brooks, 2008; Deem, 1986; Green et al., 1987; Wimbush & Talbot, 1988).

It can be argued that women face intensified constraints to leisure participation when that leisure takes

place in traditionally masculine domains, such as bars and clubs (Brooks, 2008). Drinking in public has

long been identified as a masculine leisure pursuit, and there is a conventional cultural belief that

occupying drinking establishments is unfeminine (Brooks, 2008; Cavan, 1966). As a result, women who

step out of appropriate femininity are frequently demonized for their behaviour and often denied the

kind of protection provided by the legal system to "innocent" or "decent" women (Brooks, 2008;

Radford, 1987, p.43). These social norms serve as a way of maintaining patriarchal social control over

women (Deem, 1986; Green et al., 1990; Wesley & Gaarder, 2004), but also provide opportunities for

leisure to be a means by which women resist cultural discourses and conventional feminine identities

(Brooks, 2008; Green & Singleton, 2006).

The idea of leisure acting as a form of resistance implies that leisure activities are linked to

power dynamics in society, and that leisure can therefore be a political practice (Shaw, 2001). As a

result, leisure is not simply an area of life where participants experience freedom, individual choice, and

satisfaction; it is much more dynamic and nuanced than that (Shaw, 2001). Resistance can be associated

with the idea of participating in leisure pursuits that do not conform to traditional gender roles (Shaw 1999; Shaw, 2001). Implicit in this idea of resistance is the belief that individual women can move beyond prescribed, oppressive notions of femininity and embrace their own definitions of femininity (Brooks, 2008). This is taken up in the idea of agency, or personal power (Shaw, 2001; Scranton, 1994; Green, 1998). Indeed, agency is necessary in order for resistance, empowerment, and opportunities for change to be possible (Shaw, 2001; Scranton, 1994; Green, 1998). While personal choice and agency are necessary for resistance, it is not solely an individual act; there is also a collective nature. Individual acts of resistance can produce important, meaningful outcomes within their sphere of influence (Shaw, 2001). Collective actions can create new discourses and question dominant ideologies (Shaw, 2001). These individual and collective components are often closely interwoven; one individual act can inspire another, which inspires another, and possibly leads to new discourses and understandings (Shaw, 2001).

The degree to which this resistance has occurred, or, more notably, been accepted by society, remains unclear. Although social acceptance of women consuming alcohol has increased (Day et al., 2004), participation in this leisure pursuit is still subject to barriers: primarily perceptions of women's reputations who drink in public spaces, and the safety of women who drink in public spaces (Abbey et al., 2001; Brooks, 2004; Schwartz & DeKeseredy, 1997). As a result, young women feel that they should remain hypervigilant when occupying these leisure spaces, which limits their ability to use the leisure space for their own enjoyment and relaxation (Gardner, 1990; Snow et al., 1991; Seabrook & Green, 2004; Wesley & Gaarder, 2004). Women note employing a variety of safety strategies while in bars and clubs, including: "watching drinks, only drinking out of bottles, covering tops of bottles, taking drinks to the toilet, not dressing provocatively, going out in a group, staying with friends at all times… pretending to be engaged to be married, seeking protection from male friends, leaving bars and clubs to escape unwanted male attention, humouring men, wearing shoes that you can run in, pretending to spill drinks

bought for you, and not accepting drinks from unknown men" (Brooks, 2008, p.343). In this regard, women experience constant leisure barriers as they carefully negotiate risk.

2.2.4 University Parties

Gendered social behaviours characterized by male dominance and female passivity are present in many leisure pursuits, including the university party setting (Armstrong, Hamilton, & Sweeney, 2006). This is seen in popular university party themes where female students play subordinate positions to their male peers such as: "Pimps and Hos", "CEO and Secretary Ho", and "School Teacher/Sexy Student" (Armstrong, Hamilton, & Sweeney, 2006, p.489). These spaces are often linked to men deriving social status from securing sex, and women deriving social status from getting the attention of men (Armstrong, Hamilton & Sweeney, 2006; Boyle & Walker, 2016). Meeting sexual partners and engaging in sexual activity at parties is integral to how many students construct this leisure space (Armstrong, Hamilton & Sweeney, 2006; Boyle & Walker, 2016). Male and female gendered social agendas are both harmonious and opposed to each other: men give attention to women making their way to obtaining sex, and women are unlikely to become interested in sex without getting attention first. However, the playing field is not equal, as men (and therefore, their sexual agenda) often hold both the physical (where the party is being hosted) and social (what is happening at the party) control of the environment (Armstrong, Hamilton & Sweeney, 2006; Boyle & Walker, 2016).

Although rape myths inform us that women occupying party spaces (i.e. bars, clubs, house parties, etc.) are implying some degree of consent simply by occupying those spaces, that is categorically untrue (Grubb & Turner, 2012). Yes, some woman-identified students do use these spaces to meet potential partners and engage in sexual activity. Participating in casual sex, especially for university ag-ed women, has become increasingly common (Rhodes, 2012). Many scholars have presented this sexual shift as negative: they argue there are overwhelming "costs" to women who engage in hook-up culture

(Rhodes, 2012). They assert that it is in women's nature to be choosier with sexual partners, and that

engaging in casual sex fundamentally contradicts what women need in order to be fulfilled (Townsend,

1995). While men do not experience negative emotional or social outcomes from participating in casual

sex, women are reported to experience more depression and guilt (Rhodes, 2012). However, the work of

other researchers has pointed to the possibility that poorer outcomes may be more strongly associated

with the stigma and social repercussions women face than with the sexual activity itself (Conley, Ziegler,

& Moors, 2013). The most recent research has shown that reaching orgasm mediates the relationship

between gender and positive feelings about casual sex (Piemonte, Conley, & Guaskova, 2019). Given all

these factors, more investigation should be done regarding the relationship between women and casual

sex. What we do know is that woman identified university students are engaging in leisure spaces where

casual sex is normalized.

As mentioned earlier, woman identified victims who forgo traditional norms of femininity and

engage in activities like drinking and casual sex are more likely to be blamed for their assault (Grubb &

Turner, 2012). Despite what some may believe about the "unnatural" behaviour of women engaging in

casual sex, it is a personal choice that has no logical bearing on the validity of a sexual assault claim.

Sexual assaults that happens in these environments are just as serious, damaging, and criminal as any

other instance of assault (Lorenz & Ullman, 2016). A woman identified student many enjoy occupying

party leisure spaces and engaging in casual sexual activity with multiple partners – it does not mean that

she consents to sexual activity with *anyone* for *any activity*, or at *any time*.

Although the bulk of leisure literature discusses the beneficial aspects of participation, non-

beneficial leisure that borders on the edge of social acceptability is equally as prevalent (Rojek, 1999).

This leisure has been described as "marginal", "deviant", or "off-colour" (Kelly & Freysinger, 2000; Rojek,

1999). This side of leisure is categorized by activities that participants enjoy, but are harmful to society

(Russell, 2002). It is interesting that binge drinking, certainly considered to be an activity harmful to both

participants and society, is also one of the most popular leisure activities pursued by university students (Armstrong, Hamilton & Sweeney, 2006; Boyle & Walker, 2016; Johnston, O'Malley, & Bachman, 1996; Shalala, 1995). Indeed, many students' leisure repertoires consist almost entirely of alcohol-related activities (Armstrong, Hamilton & Sweeney, 2006). Therefore, it should come as no surprise when other deviant behaviours coincide with university students intoxicated leisure time (Boyle & Walker, 2016).

Sexual assault in these party environments emerge from fun situations that shift into coercive situations, either innocuously or dramatically (Armstrong, Hamilton, & Sweeney, 2006; Krebs et al., 2009). To understand this shift requires knowledge of the gendered routines and expectations that enable men to utilize coercive sexual strategies with little, if any, repercussion (Armstrong, Hamilton, & Sweeney, 2006; Boyle & Walker, 2016; Lindo, Siminski & Swensen, 2018). Women are expected to wear revealing outfits, while men are not (Armstrong, Hamilton, & Sweeney, 2006). Partiers of all genders are expected to throw themselves into the event, drink, display an upbeat mood, and like and trust other party-goers (Armstrong, Hamilton, & Sweeney, 2006; Boyle & Walker, 2016; Ronen, 2010). As guests, women generally surrender control of territory, transportation, and alcohol (Armstrong, Hamilton, & Sweeney, 2006). In addition, women are expected to be appreciative for male hospitality and habitually "nice" in ways that men are not (Armstrong, Hamilton, & Sweeney, 2006). However, the dilemma for women is that adhering to the gendered role of partier makes them vulnerable to sexual assault (Armstrong, Hamilton, & Sweeney, 2006; Boyle & Walker, 2016; Crawford, Wright, & Birchmeier, 2008).

Many male students attend parties looking for casual sex (Armstrong, Hamilton, & Sweeney, 2006; Crawford, Wright, & Birchmeier, 2008). As one male undergraduate reported, "girls are continually fed drinks of alcohol…I've seen an old roomie block doors when girls want to leave…I've driven women home who can't remember much of an evening yet sex did occur. Rarely if ever has a night of drinking for my roommate ended without sex"(Armstrong, Hamilton, & Sweeney, 2006, p.491). Another male student said, "guys are willing to do damn near anything to get a piece of ass" (Armstrong,

Hamilton, & Sweeney, 2006, p.491). These statements are describing sexual assault. It is a type of

alcohol-involved assault is done without the use of weapons, but instead carried out through coercion,

manipulation, and organizational arrangements that provide male students with social control

(Armstrong, Hamilton, & Sweeney, 2006; Boyle & Walker, 2016; Crawford, Wright, & Birchmeier, 2008).

2.3 Men and Masculinity

Beginning in childhood, boys and men receive different messages than girls and women about

how, when, and which emotions to regulate. Gender shapes cultural messages about appropriate

displays of emotion for men versus women (Root & Denham, 2010). Parents and caregivers utilize

different emotional socialization strategies contingent on their children's gender (Cassano & Zenman,

2010; Cassano, Zenman, & Sanders, 2014). For example, evidence suggests that mothers directly

emphasize sadness and fear in conversations with their daughters, but not their sons (Fivush, Brotman,

Buckner, & Goodman, 2000), suggesting that boys may have fewer opportunities than girls to practice

expressing these emotions (Berke, Reidy, & Zeichner, 2018). Moreover, parents attend to girls'

expression of sadness and anxiety more than to those of boys' and attend to boys' expression of anger

more than to those of girls' (Chaplin, Cole, & Zahn-Waxler, 2005).

As children mature, peers become increasingly important agents of gender differentiated

emotional socialization (Rose & Rudolph, 2006). Because gender segregation among children is

pervasive (Martin et al., 2013), same-gender peers have the opportunity to exert a strong influence over

the emotion socialization of their friends, classmates, teammates, etc. (Berke, Reidy, & Zeichner, 2018).

Evidence suggests that male peers play a prominent role in punishing one another's unacceptable

emotional displays, particularly in adolescence (Oransky & Marecek, 2009; Pascoe, 2007; Reigeluth &

Addis, 2016). For example, adolescence boys' frequently report that displays of hurt, worry, or care for

others are met with derision (Oransky & Marecek, 2009), which may take the form of insults or

aggression (Reigeluth & Addis, 2016). Boys may learn from their male peers that it is important to restrict emotional expression to meet social expectations about what it means to be a man and to avoid negative social consequences (Berke, Reidy, & Zeichner, 2018). Evidence suggests that spending time with same-gender peers is associated with displays of anger in boys (Lindsey, 2016), suggesting that peer socialization of emotion among boys may encourage the inhibition of emotional expression, which they exception of anger (Berke, Reidy, & Zeichner, 2018). This unrealistic, idealized version of masculinity for boys is presented as the only way to be an appropriate man, obscuring all other possibilities (Schippers, 2007; Tolman, 2006; Rubin, 1984). If boys and men cannot perform these standards of masculinity appropriately, they will very often experience gender role conflict (Amato, 2012).

Gender role conflict (sometimes called gender role stress) is a psychological state in which socialized gender expectations result in negative consequences on an individual (Amato, 2012; Capraro. 2000). This conflict occurs when rigid, restrictive gender roles result in personal restriction, devaluation, or violation of others or self (Amato 2012; Capraro, 2000; Uy, Massoth, & Gottdiener, 2014). Masculine gender role conflict comes from the inability to perform dominant expectations of masculinity, otherwise termed hegemonic masculinity, sufficiently (Amato, 2012; Capraro, 2000; Connell, 1987, 1995). The word hegemonic defines the dominant and ruling ideology (Connell, 1987, 1995). The overarching fear driving this conflict in men is that their other male peers will discover that they are "less" of a man (Capraro, 2000; Dunlap & Johnson, 2013). Hegemonic masculinity is a strict and highly confining framework for men to operate in (Amato, 2012; Capraro, 2000; Dunlap & Johnson, 2013). Key characteristics of hegemonic masculinity include being heterosexual, tall, muscular, and having an athletic physique coupled with economic prosperity, mental resilience, and sexual prowess (Capraro, 2000; Connell 1987, 1995). The performance of masculinity and subsequent stress of not being "manly" enough are grounded in feelings of inadequacy and inferiority (Capraro, 2000; Dunlap & Johnson, 2013).

The stigma associated with not being manly enough is to be avoided at all costs (Capraro, 2000; Dunlap & Johnson, 2013). The greatest consequence of this kind of conflict is a restriction of the human potential of an individual (Amato, 2012). Normative socialization stifles the potential of boys and young men as it shapes them to value violence, interpersonal rigidity, sexism, and homophobia (Amato, 2012; Capraro, 2000). According to gender role conflict, this can ultimately leave boys and men unhappy with themselves (Amato, 2012).

An essential platform hegemonic masculinity socialization of boys and men is through leisure (MacDonald, 2014). It is the case that many popular activities for boys are linked to competition, aggression, and physical dominance (Harway & Steel, 2015). For example, in Canada, hockey culture, generally, has been characterized by athlete hazing, violence, and substance abuse (MacDonald, 2014). Literature has consistently shown that Canadian ice hockey promotes masculine character traits to the extent that they become problematic (Robidoux, 2001, 2002; Adams, 2006, 2011; Allain, 2008, 2010, 2012; Gee, 2009; Atkinson, 2010). Because of its deeply engrained importance in Canadian culture, hockey is often a primary site for the socialization of young males (MacDonald, 2014). This same phenomenon is found in many popular male dominated leisure arenas, such as football culture in the United States (Jeanes & Magee, 2011). Research has investigated how elite sport settings, as well as sport-based physical education programs, support and privilege expressions of hegemonic masculinity (Bramham, 2003; Connell, 2008; Davison, 2000; Gard & Meyenn, 2000; Hickey, 2008; Larsson, Fagrell, & Redelius, 2009; Millington, Vertinsky, Boyle, & Wilson, 2008; Parker, 1996; Pringle, 2008). Sport environments actively affirm characteristics such as strength, speed, power, muscularity, acceptance of injury risk, warrior mentalities, and lack of empathy for other participants (Bramham, 2003; Davison, 2000; Gard & Meyenn, 2000; Hickey, 2008; Parker, 1996; Pringle, 2008). The acceptance, normalization, and praise of these characteristics of hegemonic masculinity in sport and physical activity bolsters their intensity not only in sport settings, but in many areas of men's social and relational lives. In fact, the

promotion of dominance, power, and control as central to masculinity is consistently seen in books, magazines, music, music videos, movies, magazines, and video games (Katz & Jhally, 1999; Kivel & Johnson, 2009).

2.3.2 Problematic Manifestations of Masculinity: Alcohol

One of the common ways in which hegemonic masculinity manifests itself in male peer culture is through the consumption of alcohol. As a group, men drink far more than women. In fact, men almost double women in consumption, frequency, dependence, and addiction. This pattern is seen regardless of age, ethnicity, religion, education, income, martial status (Capraro, 2000; Uy, Massoth, & Gottdiener, 2014; Lemle & Mishkind, 1989). Alcohol abuse and dependence is a distinctly male dominated, male centered issue (Capraro, 2000). Traditionally male dominated social groups showcase alcohol consumption as being a core component of the group's identity (Uy, Massoth, & Gottdiener, 2014). With more women in university and in the workforce, people have questioned whether gender roles are shifting in this regard (Capraro, 2000). This speculation, however, has been rejected by recent research (Capraro, 2000). Masculinity, both in the past and today, is equated with drinking excessively (Capraro, 2000; Engstrom, 2012).

There is no other time a man drinks more than when he is in the presence of other men (Capraro, 2000). When men gather together they are more likely to drink excessively, engage in risk-taking activities, and outwardly display traits of physical aggressive, tough, dominant, and dismissive of other, more "feminine forms" of masculinity (Capraro, 2000; Engstrom, 2012; Uy, Massoth, & Gottdiener, 2014). Even if men reject ideals of hegemonic masculinity in theory, and do not display them in their daily lives, they may surface when they are around other men (Amato, 2012; Capraro, 2000). Men evaluate each other's masculinity in these settings and are concerned with being evaluated as "manly" by their peers (Amato, 2012; Capraro, 2000). The concern of how peers perceive each other is a

driving force in why men, especially young men, drink so much (Capraro, 2000; Peralta, Tuttle, & Steele, 2010).

Heavy and problematic drinking appear as a manifestation of hegemonic masculinity (Capraro, 2000). Excessive drinking does not cause misconduct, but it does serve as a tool to excuse and normalize it (Engstrom, 2012). Drinking of any kind, heavy or moderate, enables perpetrators to reproduce and normalize problematic activities associated with hegemonic masculinity while placing blame on alcohol (Engstrom, 2012). Individuals who drink heavily are more likely to endorse gender role stereotypes and adhere to traditional masculinity ideologies (Engstrom, 2012). Research has indicated that problematic alcohol use is predictive of sexually aggressive behaviour toward women as well as rape myth acceptance (Locke & Mahalik, 2005). Daily alcohol consumption, as well as alcohol consumption in sexual situations, is related to the number of sexual assaults college men report that they commit (Zawacki et al., 2003). Indeed, daily alcohol consumption, not only alcohol consumption during interactions with women, was positively related to frequency of misperceiving women's sexual interest, which in turn forecasted the frequency of perpetration (Zawacki et al., 2003).

2.3.3 Problematic Manifestations of Masculinity: Sexual Assault

Sexual assault perpetration remains a distinctly male domain (Parkhill, Abbey, & Jacques-Tiura, 2009; Zawacki, Abbey, Buck, McAuslan, & Clinton-Sherrod, 2003). Traditionally male domains such as the military and law enforcement, which value masculine traits including dominance, physical strength and authority, are hotspots for increased sexual assault perpetration (Harway & Steel, 2015). Similarly, male athletes have a disproportionate number of reported aggressive sexual incidences (Harway & Steel, 2015). Although Canadian data has not been made available, we can see that American athletes account for approximately only 3% of students on college campuses, yet they are responsible for 19% of all reported sexual assaults (Harway & Steel, 2015). Other all-male organizations also tend to endorse

violence against women. For example, fraternity membership is consistently associated with more accepting attitudes toward sexual violence (Seabrook, Ward, & Giaccardi, 2016). Male socialization within these subcultures, including peers, role models, and media portrayal, reinforces traditional masculinity by endorsing displays of increased aggression, strength, dominance, and sexual conquests (Bleecker & Murnen 2005; Boeringer 1999; Harway & Steel, 2015; Kalof & Cargill 1991; McCray 2015; Sawyer, Thompson, & Chicorelli 2002).

As previously discussed, "manhood" is a status that men achieve through displays of masculinity (Seabrook, Ward, & Giaccardi, 2016). Along with emotional regulation and heavy drinking, sexual activity is a defining performance of hegemonic masculinity, and therefore it is a common way that men achieve "manhood" (Seabrook, Ward, & Giaccardi, 2016). Men who have multiple sexual partners are praised, whereas men who fail to obtain sexual partners are often ostracized and the robustness of their masculinity is questioned (Seabrook, Ward, & Giaccardi, 2016). This need to acquire sexual prowess, and therefore display "manliness", is so intense that it has fostered a radical community of men, "incels" (involuntary celibates), that state their celibacy results from women's shallowness (Ohlheiser, 2018). This blame and subsequent hatred of women has resulted in many violent attacks, including the deadly van attack in Toronto in April 2018 (Ohlheiser, 2018). Obviously, there is a significant amount of pressure on men to have sex with women to prove that they are "real men" (Seabrook, Ward, & Giaccardi, 2016). Such displays of masculinity are done primarily to impress other men, as "manhood" is a status that can only be bestowed upon you by male peers (Seabrook, Ward, & Giaccardi, 2016). Therefore, membership in the all-male or traditionally male groups discussed above may create extra pressure on men to uphold their masculinity (Seabrook, Ward, & Giaccardi, 2016). Researchers hypothesize that men in these groups are more likely to perpetrate sexual aggressive behaviours to assert and maintain their status as men (Harway & Steele, 2015; Seabrook, Ward, & Giaccardi, 2016).

Alcohol's connection with male aggression is well established (Lemle & Mishkind, 1989). There is a strong correlation between drinking excessively and male violence (Parkhill, Abbey, & Jacques-Tiura, 2009; Peralta, Tuttle, & Steele, 2010; Lemle & Mishkind, 1989; Tuliao & McChargue, 2014). Over half of violent male criminals are abusers of alcohol (Parkhill, Abbey, & Jacques-Tiura, 2009; Lemle & Mishkind, 1989). In a study investigating intimate partner violence, individuals who reported alcohol problems are more likely to be physically abusive towards their wives (Peralta, Tuttle, & Steele, 2010). Indeed, approximately 50% of all sexual assault perpetrators consume alcohol prior to or during the assault (Parkhill, Abbey, & Jacques-Tiura, 2009). In general, intoxicated men are more aggressive than sober men, particularly when they feel provoked (Parkhill, Abbey, & Jacques-Tiura, 2009). This provocation can come from feeling wronged by a woman who stopped their sexual advances after consensually engaging in some form of other sexual activity (Parkhill, Abbey, & Jacques-Tiura, 2009). These men often have more completed rapes, as victims are more likely to stop resisting to minimize physical injuries (Parkhill, Abbey, & Jacques-Tiura, 2009).

Problematic drinking is strongly associated with occurrences of sexual aggression (Parkhill, Abbey, & Jacques-Tiura, 2009; Tuliao & McChargue, 2014). Probability of perpetrating sexual assault also is related to alcohol outcome expectancies, or what people believe will happen when they drink (Tuliao & McChargue, 2014). If men believe that alcohol would make them feel more sexually attractive, be better lovers, and enjoy sex more, they are more likely to engage in sexually coercive behaviours (Tuliao & McChargue, 2014). This contributes to the conclusion that alcohol primes sexually motivated intentions and increases the likelihood of risky sexual behaviour, particularly sexual aggression (Tuliao & McChargue, 2014). Some data suggests that sexually related alcohol outcome expectancies may partially explain why men with problematic drinking behaviour are more likely to commit sexually aggressive acts (Tuliao & McChargue, 2014). Sexually aggressive behaviour may be explained by alcohol outcome expectancies related to sexual activity in addition to other factors such as hostile attitudes towards

women, sexual dominance, and peer approval of forced sex (Tuliao & McChargue, 2014). Men who engage in problematic drinking and conform to the traditional masculine norm of being dominant and having power over women also tend to endorse rape myth stereotypes and engage in sexual aggression (Orchowski, Berkowitz, Boggis & Oesterle, 2016). Through this autoethnography, I hope to explore and expand upon masculinity not only as it is relevant to perpetration, but also to male-female friendships and possibilities for important allyship.

"We weren't there. We don't know what happened. We didn't see it." My friends sit on their couch looking at me with dead expressions. I yell and scream and cry and hang onto the door frame for support, begging them to believe me. They don't. They just sit and stare at me.

I walk out of their house, step onto their driveway, and collapse onto the pavement in complete emotional agony. The weight of the moment suffocates me. Friendship and camaraderie is replaced with painful, devastating indifference. I can't get up. I feel like my whole life has been snuffed out.

Considering this data, the link between alcohol consumption and sexual assault cannot be overlooked. However, it must not be misinterpreted. In most research, drinking excessively is projected as the cause for misconduct (Engstrom, 2012). However, research has failed to demonstrate a causal link between alcohol use and increased violence (Engstrom, 2012; Peralta, Tuttle, & Steele, 2010). Alcohol consumption is an identifiable variable that is easy to place blame upon, but Engstrom (2012) argues that it is masking a much deeper, more complex social problem.

2.4 Gaps

Despite a breadth of literature, misunderstandings and uninformed perceptions still permeate dominant discourse. As Bochner and Ellis (2016) state, social science research is not read and

appreciated on masse. Billig (2013) posits that social science literature is often characterized by writing that is difficult to understand, cloaked in academic jargon makes it inaccessible to the public. Billig (2013) compares this practice to a form of bullying, which alienates readers who are not academics.

In contrast to traditional social science methodologies, autoethnography focuses on connection with readers and is primarily concerned with the way readers relate to the research (Bochner & Ellis, 2016). However, autoethnography is a very small subset of qualitative inquiry and has very rarely been used to explore adult sexual assault. It is clear that sexual assault is a complex issue, and so it follows that complex, varied methodological approaches should be employed to advance both the knowledge of it, and the application of that knowledge. Social justice-oriented research directed at a wide variety of readers is needed to bring the data to life.

2.5 Methodological Gap

As a young woman who had encountered many misguided attitudes surrounding alcohol-involved sexual assault, I assumed there was very little, if any research on the subject. Upon examining the available literature, I was shocked to find the exact opposite. Literature consistently states that alcohol-involved sexual assault is a significant problem (Abbey, Zawacki, Buck, Clinton, & McAuslan, 2004; Littleton & Breitkopf, 2006; Orchowski & Gidycz, 2012; Orchowski, Untied, & Gidycz, 2013), especially among university populations (Gross, Winslett, Roberts, & Gohm, 2006; Jordan, Combs, Smith, 2014; Krebs, Lindquist, Warner, Fischer, & Martin, 2007; Lawyer, Resnick, Bakanic, Burkett & Kilpatrick, 2010), and that victims face several critical challenges with adjustment and recovery (Littleton, Axsom, Radecki, Breitkopf, & Berenson, 2006; Ullman & Najdowski, 2010; Ullman et al., 2008; Ullman & Filipas, 2001; Grubb & Turner, 2012; Relyea & Ullman, 2015; Macy, Nurius, & Norris, 2006; Fossos, Kaysen, Neighbors, Lindgren, & Hove, 2011; Zinzow et al., 2010). I deduced that the misguided

attitudes of society where therefore not due to a lack of research available, but instead the accessibility of that research.

I believe an autoethnographic methodology provide a compelling and accessible bridge to understanding the existing research. The purpose of this autoethnography is to analyze my own experience of being a victim of alcohol-involved sexual assault, unpacking the cultural components of that experience to gain a better understanding. The aim is to generate a different way of knowing, one that focuses on my lived experience, to advance understanding and appreciation for the complexity and seriousness of alcohol-involved sexual assault, especially in Canadian university communities. This holds deep significance for social justice, particularly for woman identified university students, as well as their family and support systems. The breaking down of social, emotional, and cultural barriers that accompanies vulnerable storytelling is a force I utilize for this thesis. Additionally, the sharing and analyzing my own story serves as an act of personal resistance; I am deconstructing the crime committed against me and the social values that support that crime. This act personal resistance is inextricably linked to feminist outcomes, particularly personal empowerment and social change (Shaw, 2001). I was told, both explicitly and implicitly, that my story was shameful and had no place in public discourse. In choosing to write a thesis on it, and therefore speaking both uncomfortable and unwelcome truths, I am engaging in distinctly feminist act of resistance, rooted in the concept of self-determination (Shaw, 2001). Although one evocative story may be a drop in the ocean, acts of personal resistance, when taken up by the collective, can become a hurricane. Most notably, the "Me Too" movement, created in 2006 by Tarana Burke, has swept across the globe and impacted public discourse and policy regarding sexual harassment and assault (About – Me Too Movement, n.d.). Therefore, my thesis serves as both a personal act of resistance as I assert ownership of my story, and as part of a collective act grounded in the feminist outcome of social and political change (Shaw, 2001). Through

academic research, I strive to use this thesis to express that what happened to me – and so many others

– matters.

2.6 Research Questions

Three main questions guide the proposed research:

1. What was my experience of being a victim of alcohol-involved sexual assault as a female undergraduate student?

2. What impacts did I experience as a victim of alcohol-involved sexual assault, particularly as I

attempted to navigate and complete my university degree?

3. What insight does the analysis of my experiences offer with regard to cultural discourse around

sexual assault, university student life, and alcohol consumption as a leisure activity?

Chapter Three: Theoretical Orientation and Methodology

3.1 Theoretical Framework: Feminism

…writing autobiographically (i)s a feminist-sociological practice.

(Laurel Richardson, 1997)

Feminism is an embodied practice, not just an intellectual one.

(Sinclair, 2019, p.145)

I was born in 1994, right in the middle of what Nancy Whittier (1995) calls the "political

generation", or what is understood by many as "third-wave feminism". As a result of that particular

socio-cultural and political climate - coupled with my privilege as a white, middle-class, cisgender,

heterosexual woman - I have always taken my equal rights as a given. Like many others in my

generation, I have grown up with a general awareness of workplace equity, fair treatment, LGBTQ2+

issues, and intersections of race, class, and gender (Kisner, 2004). I was steeped in the fundamental

belief that I was worthy and valuable human being and have certain unalienable rights as a result. I have

always had a sense of entitlement about my equal rights, which is why it came as such a shock to me

that they could be so easily trampled, and that no one seemed to care. The outrage that followed my

disillusionment is what has guided this research. My understanding of myself as a worthy and valuable

human being deserving of certain rights is the foundation on which I stand while I shout, "Hey! Look at

me! I deserve your attention! My rights are important! I'll keep shouting until you pay attention!".

As I shout from the rooftops through this research, feminism provides a critical theoretical

framework that works to guide and inform (Hesse-Biber, 2012). To me, this means that my research has

a necessary connection to social change and social justice; it is action-oriented (hooks, 1994). My

research works not only to inform readers of my lived experience, but to provide calls to action, or a

"commitment to transformative politics and practice" (hooks, 1994, p.71), through the analysis and discussion that it creates. Additionally, I take up the feminist aim of placing myself critically within my greater social context; mainly, I am a white, cisgender, middle-class, heterosexual female. My experience will therefore come from this perspective and will be reflective of my positioning within society. I recognize that I am the expert of my story, but that my lived experience carries my privilege with it.

A feminist theoretical framework will guide and inform this study. Feminism and feminist theory are diverse in their understandings and approaches to issues and research (Haaken, 2017; Mustaine, & Tewksbury, 2002). Generally speaking, feminism is a social movement that identifies the patriarchy – the current social system in which males hold primary power and dominate the roles of political leadership, moral authority, economic influence and social privilege – as oppressive, and seeks to deconstruct this system to have a more equitable society (Haaken, 2017; Mustaine, & Tewksbury, 2002). Patriarchy is generally described as the "social and cultural rules that privilege men over women" (Henderson et al., 1996, p. 8). The underpinning of patriarchy exists through men's control over women through excluding access to economic resources and by restricting women's sexuality (Hartmann, 2010). Since men are privileged within patriarchy, there is a vested interest in maintaining the status quo.

My own understanding of feminism is centered around equality and empowerment for all genders to lead self-directed lives, free of restrictive social constructs. Henderson et al. (1996) define feminism as "the philosophical and theoretical frameworks that embody aspects of equity, empowerment, and social change for women and men" (p. 13). Theory and application are inextricably linked in feminism. Bunch (1985) contends that feminism is perhaps the most important social force to address world problems. With this in mind, the particular aims of feminist inquiry include correcting inequalities that marginalize women and recognizing the central themes of gender roles and biological

sex (Culp, 1998). These aims are addressed through applying a critical focus on women in society and culture (Freysinger, Shaw, Henderson & Bialeschki, 2013).

There are many feminist theories (i.e. liberal, radical, Marxist) that present responses to the marginalization of women. For the purpose of this study, I will utilize an overarching feminist theory. Feminist theory underlines the importance of understanding of gender and gender relations when analyzing the social world (Coakley & Donnelly, 2009), and argues that social experience is highly gendered (Synder, 1995). It recognizes that there are social and cultural dimensions that shape women's lives and their own beliefs regarding what it means to be a woman (Jackson & Jones, 1998). Feminist theory seeks to not only illuminate the experiences of women, but to unpack the meanings associated with those experiences (Lugones & Spellman, 2000).

To understand individual experiences, we must first examine the broader cultural context in which those experiences occur (Henderson, Shaw, Freysinger & Bialeschki, 2013). Placing women's storytelling at the centre of research highlights issues of power, which align with feminist theory (Hesse-Biber, 2007). Individual experiences are subjective and challenge the positivistic assumptions of objectivity and the existence of a single universal truth. By engaging in this research, we recognize that there are multiple ways of knowing. Within this storytelling, emotion is an appreciated and crucial component of the research process (Jaggar, 1997).

Feminist research is closely related to emancipation and a resistance of dominant social structures and ideologies. With this in mind, the research I am proposing is particularly radical, as the very idea being vocal and unashamed of my experience as a victim of assault is in direct opposition to social norms. I do not choose to stand apart from the research in any way, as it is my own trauma that informs my inquiry. As Denzin (2003) notes, taking an autoethnographic stance is "striping away the veneer of self-protection that comes with professional title and position… to make [one] self

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accountable and vulnerable to the public" (p.137). Evetts (2012) and Lather (1991) posit that this places

me both within and against the institution of academia. Ellis (1997, 2000) also addresses this nuanced

position of holding multiple roles in the research process through higher reflexivity and social

responsibility. This concept of the purpose of research as a tool for social responsibility and the

deconstruction of power hierarchies is inextricably linked to my understanding of feminism.

3.3 Autoethnography

Autoethnography is a qualitative approach that acknowledges and accommodates subjectivity,

emotionality, and the researcher's influence on research, rather than the assumption that research must

be conducted from a neutral, impersonal and objective stance (Faust, 2017). The author of an

autoethnographic text writes in first person, centering themselves as the object of research (Ellis, 2004).

The narrative focuses on a single case extended over time, often unveiling hidden details of the authors

personal life and emphasizing emotional experience (Ellis, 2004). Autoethnography reinforces the role of

storytelling and personal narratives in the social sciences, by linking the researcher's personal

experience to the wider cultural, political and social meanings and understandings.

As a feminist researcher, I recognize each individual as the experts of their own experiences

(DeVault & Gross, 2012) and the importance of building knowledge through storytelling. As such, my

study takes up the feminist aim of placing a critical focus on myself, a woman identified individual, in

society and culture by articulating my own experience of alcohol-involved sexual assault in university.

Traditional ways of knowing and building bodies of knowledge have historically ignored the perspectives

of women, placing women's experiences outside the scope of 'legitimate' inquiry (Hesse-Biber, 2007). In

opposition to that, feminist research's epistemological and methodological focus seeks to "recognize the

importance of women's lived experiences with the goal of unearthing subjugated knowledge" (Hesse-

Biber, 2007, p. 3). In my own study, this framework is applied through an autoethnographic exploration,

which will then be critically contextualized within broader society. This approach of moving from the personal (or individual level) to the political (or societal level) is significant for feminist research as it deeply values individual women's experiences and seeks to transform gender inequality at all levels.

A feminist framework lends itself to the use of autoethnography. It is a qualitative methodology that "refers to a particular form of writing that seeks to unify ethnographic (looking outward at a world beyond one's own) and autobiographical (gazing inward for a story of one's self) intentions" (Schwandt, 2007, p.16). The writing of one's story places the self within social and cultural contexts (Holt, 2003), while producing and advancing knowledge and sociological understandings of the world (Ellis, 2004; Wall, 2008). The personal nature of this methodology positions the author as both the researcher and the participant (Merton, 1998).

Emotions are the heart of authethnographies (Reed-Danahay, 1997). Careful consideration and attention to feelings and thoughts during the studied phenomenon is important for creating a captivating narrative that illustrates the personal and emotional experiences of the researcher (Anderson, 2006). Readers enter into the story as co-participants through meaning and emotion, allowing them to think critically about the story (Ellis, 1999; Richardson, 1994; Spry, 2001). The goal of autoethnography is not only to portray one's experience, but to critically analyze and extract meaning from it (Jones, 2010; Ellis & Bochner, 2006).

Autoethnography was the best choice for my study as it accessed data to address all my research questions in a way that enables readers to see how I made my deductions and have insight into what my experience was like. As a result of this, readers are able to relate themselves to the story, and therefore the research, in a more concrete way (Bochner & Ellis, 2016). Personal narratives provide rich data in the form of thick description (Geertz, 1973). The form is so rhetorically compelling that readers gain access not only to the facts and structure of the story, but also to the very human, emotional

dimension of the experience. As Bochner and Ellis (2016) so eloquently say, autoethnography "touches people where they live" (p.55). It provides more insight and understanding about what victims go through. As a researcher, I want my readers to feel something and be compelled to take action in activism and advocacy. Autoethnography presents a unique avenue for research, as every "narrative of suffering refuses to be an end in itself; it anticipates and seeks something beyond suffering" (Bochner & Ellis, 2016, p.70). Given my topic and purpose, this method is most appropriate.

Autoethnography is a unique methodology, as the researcher holds the data within themselves; I am presenting and analyzing my own narrative for this thesis. With the entirety of the research being held within one individual, questions of subjectivity, rigour and trustworthiness must be addressed. The knowledge I'm generating is exceptionally subjective, and it is not pretending to be anything else. The data is my own lived experience, unpacked, compared and contrasted with existing literature. The goal of autoethnography is not to reach some kind of absolute truth, but rather to explore different lived experiences, making space for many different ways of knowing. Trustworthiness in autoethnography is no different from trustworthiness in any other qualitative inquiry – as a researcher and a reader, you have a relative belief that the participants of any given study are giving information worthy of trust (Dauphinee, 2010). Most widely accepted methodologies are equally as suspect as any autoethnography (Dauphinee, 2010). Dauphinee (2010), argues that other methodologies may be more suspect, as "autoethnography does not purport to be more than it is" (p.812). To increase the trustworthiness of my research, the only thing I can do is be as "'visible" as possible – owning my subjectivity and illuminating who I am, where I come from, what I believe, and all of the ways in which those factors influence my work. I am not claiming to give you objective insight into the issue of alcohol-involved sexual assault. I hope my work can help eliminate the belief that one objective truth on this (or any other) subject exists. On the contrary, I hope to help you see that multiple, messy, interconnected but sometimes contradictory truths can all exist simultaneously. My lived experience happens to be one of them.

3.4 Methods

In undertaking autoethnographic research, I was determined to shed light on the intricacies of sexual assault within alcohol-involved university settings. The significance of autoethnography in relation to this project is the reflexivity I have employed. To understand and reflect on the raw experiences of my sexual assault has helped myself, and will possibly help others, make sense of sexual assault as both a personal trauma and a cultural phenomenon.

Autoethnography can be written using various methods. It can consist of linear or non-linear story writing, poems, personal essays, photographic essays, and authorial narrations (Sparkes, 1997; Ellis, 2004). The style of writing chosen by the writer is used to represent fragments of time of her lived experience (Axelson, 2009; Carless, 2012). Autoethnographic text is actively created through many forms of data collection (Ellis, 2014), but its primary method is memory work (Chang, 2008). Memory work is essential because the texts created are inextricably linked to the memories that shape them (Coffey, 1999). Memory is tied to emotion (Duquin, 2000), a central component to autoethnography. The attention given to emotions during memory work allows the writer to attend to and chronicle physiological responses, personal thoughts, and important feelings (Jones, 2010). Attention to emotions during the creative process is also seen in introspection: a conscious awareness of oneself as she is activity thinking about her thoughts and feelings (Ellis, 1991). Emotions can be triggered by artifacts associated with the story: notes, photographs, newspapers, and person memorabilia (Jones, 2010; Ellis, 2004; Holbrook, 2005; Ellis & Bochner, 2000). These artifacts serve as support for memory work and introspection, as well as to provide greater detail and depth to the story (Chang, 2008).

This study used personal journal entries and memory recall to construct a narrative that display my lived experience of alcohol-involved sexual assault. This was accomplished by sharing relevant text and using narrative analysis and reflections about that text to arrive at a way of understanding answers to the research questions. In the process, research about sexual assault, drinking behaviour, and

masculinity was also analyzed and discussed. This autoethnography engages practices from Goodall (2000), and Ellis and Bochner (1996) to address the text.

I began constructing my autoethnography by creating a rough timeline of events spanning from the moment of my assault (April 2014) until approximately the Fall of 2016 (when I began my master's degree). It was important for me to identify a distinct period of time, as I could chronicle my entire life as it relates to my assault. Setting boundaries in my timeline allowed me to more easily conceptualize and explain certain moments in time – remembering how I felt in that certain moment and during that particular experience. Once I had a rough timeline, I began expanding on the details of each experience (the assault itself, disclosing to friends and family, reporting to the police, etc.). This was a slow process. I wrote as often as I feel is necessary, not sticking to any pre-set schedule and taking breaks when needed. The initial writing was unstructured and unedited, and I allowed myself to go back to it several times to fill in all the details. It is important to note that traumatic memory is often episodic and sporadic (Herman, 1992). I embraced the messy nature of traumatic memory, as to provide further insight into my lived experience. Therefore, my autoethnography has a more flexible structure, indicative of a more disruptive memory path.

I took my time filling in and expanding on my chronology. Throughout this process, I employed an introspective lens, paying special attention to images, emotions, and physiological reactions that arose as I relived the experiences, and recorded them. It is important to note that I do not remember everything. There are certain parts of my memory that are simply not there, and this is taken up in the discussion. Traumatic memories that are accessible are sometimes hard to unearth, and I did my best to recall and record what I could. This was painful and detrimental to my mental wellbeing. It aggravated my posttraumatic stress disorder, and I relied heavily on my support systems (friends, family, counsellor, and doctor) to assist me through this process. Despite this, I felt well prepared and willing to do this work. There was a point where I hit a wall with my traumatic memory, and this is where I stopped. I

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could have worked with a hypnotherapist to access that traumatic memory that my brain has blocked. I

did not do this. The things that my nervous system has shielded from me, I did not chase after. When I

reached this wall – where I cannot access any more on my own – I stopped recording.

I categorized the data I collected, providing a flexible structure that facilitated the analysis and

interpretation of the data. I grouped together certain experiences that were similar (I do not expect to

include *every* PTSD episode within my final product) to identify the key themes present. I then used

these key themes and experiences to form a narrative that can be followed and understood by readers.

Finally, I connected these themes to the literature as well as the research questions.

To address trustworthiness in my research, I relied on past journal entries and copies of

communiques (e-mails, text messages, etc.), as well as a copy of my police report, to construct the

narrative and confirm my recollections. It has been challenging to be open and honest about my

experience, but I recognized early in this study that in order for it to be meaningful, I would have to go

down all the rabbit holes. I know that I have ensured trustworthiness in my work because of how much

it hurts; if I had constructed my own "perfect" narrative, I would have changed a lot. My story is not

glamourous, and many people will hear it and think that the assault is all my fault: I was drunk, I was at a

party early in the morning, I didn't fight back, I didn't scream, etc. There is nothing anyone can say to me

that I have not told myself a thousand times. My memories are fallible, as will be explored in the

discussion section, but they are the true memories of a victim of sexual assault. There are whole chunks

missing, there are some memories I only know as physical sensations, and there are some moments that

are undoubtedly clouded by pain and fear. I don't claim to give you an unbiased account of what

happened to me, but I do promise to give you a raw and real account of my personal lived experience.

I hope that my work will fulfill the criterion Mulcahy (2015) presents: that the reader to be

moved to think, feel, change, reflect, or act. To be "moved" is a subjective experience that is hard to

capture or evaluate, and so I will present some secondary criteria as well: passion, social responsibility

(Finley, 2003), reflexivity, impact (Richardson, 2000), and providing motivation for cultural criticism

(Clough, 2000). In fulfilling these requirements, I hope to produce work that can be classified as

"moving". A successful autoethnography for me means that I have provided relevant insight into lived

experiences of alcohol-involved sexual assault in a way that is inextricably linked to social responsibility

and action.

3.5 Ethical Considerations

As an autoethnographer, I have a high level of power in constructing my story (Lovell, 2005).

Therefore, it is important that I am conscious of the representation of the other actors in the story

(Couser, 2004). Any actors must be protected in and during the research process (Creswell, 2009). To

ensure research is conducted in accordance with ethical consideration, I will keep in mind informed

consent, right to privacy, and protection from harm (Fontana & Frey, 2000). Acknowledging that ethical

dilemmas can occur in research is important, especially since my identity is disclosed (Chang, 2008).

Therefore, readers may be able to identify different actors in my story. To address this, I will contact and

consult with the individuals included in the story to ensure they are aware of the research I am

conducting. I will discuss with them their options for confidentiality and work with them to choose what

form of representation they would be most comfortable with.

Chapter Four: Data Representation

The purpose of this autoethnography was to analyze my own experience of being a victim of alcohol-involved sexual assault, unpacking the cultural components of that experience to gain a better understanding. More specifically, it is a study that focused on exploring these three questions:

1. What was my experience of being a victim of alcohol-involved sexual assault as a female undergraduate student?

2. What impacts did I experience as a victim of alcohol-involved sexual assault, particularly as I attempted to navigate and complete my university degree?

3. What insight does the analysis of my experiences offer with regard to cultural discourse around sexual assault, university student life, and alcohol consumption as a leisure activity?

As I conducted my autoethnographic research, a few key themes emerged. The many aspects of trauma (traumatic event themselves, physiological reactions to trauma, and the neurobiology of trauma over the life course) came up continuously. Other predominant themes were the various responses to disclosure and alcohol as it relates to victimization. These main topics, as well as their connection to the university environment, will be explored in this section.

Earlier in this thesis, I provided criteria by which I wished my work to be judged: passion, social responsibility (Finley, 2003), reflexivity, impact (Richardson, 2000), and providing motivation for cultural criticism (Clough, 2000). I deemed my autoethnography would be successful if I could provide relevant insight into lived experiences of alcohol-involved sexual assault in a way that is inextricably linked to social responsibility and action. I believe I have fulfilled these requirements; I have presented and deconstructed my own lived experience in a way that leads to several tangible social justice outcomes.

To experience the data in a more tangible way, I have chosen to present my findings through interactive storytelling. By following the link below, you will be placed at the centre of the narrative and have the ability to make choices on which path to follow as you navigate your way through the data. Please take a moment now to experience the data in this way.

Follow this link to view the data representation: www.itsafineline.ca

The narrative begins the same way for each pathway – going to a party on a Saturday night and being the victim of a sexual assault. Real deviations occur when you make the choice to disclose to family or to friends. Friends give you responses based in disbelief, whereas family responds with more victim-blaming attitudes. Regardless of who you chose to disclose to, the result is the experience of self-blame and posttraumatic stress disorder. In an attempt to move on, you choose between four different activities: going to class, going to the mall, exercising, and going to church.

4.1.1 Going to Class

You are placed in a graduate-level class in which students are tasked with making small research proposals. Victimization is all you are able to think about, and therefore you make your project based on alcohol-involved sexual assault. Your research proposal is displayed on a poster, and you feel very proud of it. Faculty members ask meaningful questions and praise you on your ideas. An academic advisor approaches to read the poster before commenting, "it's such a fine line", with a side smirk on his face. Your stomach drops. You cannot process what you're hearing. A fine line? What is a fine line? This man believes there is a fine line. Where is the fine line? Your heart races and your face burns, but you feel small.

4.1.2 Going to the Mall

You are placed on a city bus on their way home from the mall. You took yourself out for some self-care. You walked around the mall, looking in all your favourite stores. You even got your hair cut at

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a salon – a rare treat. It is now dusk, and you are now making your way home. You send pictures of your

new haircut to your friends and they compliment you. You look out the window and observe yourself in

the reflection – and suddenly your stomach drops. Out of nowhere, you break into a cold sweat. You feel

yourself begin to shake. You feel like you're pinned down. You feel the feeling of someone being inside

you. You feel the bed beneath you. You see his face. Tears stream down your face and you turn away so

no one will see you cry.

4.1.3 Exercising

You start your journey by engaging in a new fitness regime. Exercising feels good and

productive, but you start to notice fatigue setting in earlier and earlier each day. Eventually, you can no

longer stay awake in the afternoon at all. In an attempt to be able to stay awake during the day, you

sleep in longer and forgo the exercise regime altogether. This works, allowing you to carry out your

school day without falling asleep. You become consumed with frustration at your body's inability to

handle multiple activities in a day and you experience a spiral of thoughts regarding your hatred of your

body and your life.

4.1.4 Going to Church

You are placed in your family church during a Christmas concert. The atmosphere is warm and

inviting. The setting is familiar. Christmas is acknowledged as happy and comfortable time for you. Mid-

way through the festivities, a panic attacks begins to occur, seemingly out of nowhere. You feel trapped

in your body as a complete re-experiencing of the assault takes place.

Eventually, all paths lead to the experiencing of a PTSD episode, characterized by intense fear, a

re-living of the moment of trauma, and an overwhelming feeling of complete helplessness. At the very

end of the narrative, readers end up with three states in which they experience life: day-to-day life is

very hard (PTSD episodes, severe anxiety, an intense feeling of loss and pain), hard (the ever-present

reality that having experienced deep trauma changes you to your very core – that there is nothing you can do to undo what has happened), and less hard (re-learning how to have fun, enjoy life, and build meaningful relationships).
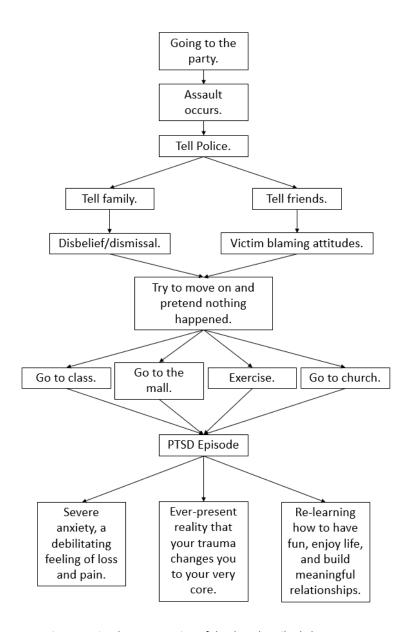

Figure 1. Visual representation of the data described above

Chapter Five: Discussion

5.2 Trauma

A traumatic event is characterized by experiencing something frightening, overwhelming, entailing a sense of loss of control and extreme threat (Haskell & Randall, 2019). Sexual assault is a trauma that has a neurobiological impact; it affects our brains and our nervous systems (Haskell & Randall, 2019). In traumatic situations, the human nervous system has an automatic process that is activated (Haskell & Randall; Herman, 1992). When our senses identify a serious threat, the brain triggers a defence protocol that is subcortical; it is deep in the brain and disconnected from conscious awareness or language (Ledoux & Pine, 2016). This defence system then dominates brain functioning, which leads to a rapid and dramatic loss of other cognitive abilities like reason, logic, problem solving, planning and memory (Arnsten, 2009; Haskell & Randall, 2019; Mobbs et al., 2009). The results of these cognitive disruptions can be confusing for both the victim and those responding to the situation, as most people are not knowledgeable about complex brain and body alterations associated with trauma (Haskell & Randall, 2019). The most significant of these confusing alterations will be discussed moving forward.

5.2.1 Tonic Immobility

A very confusing part of my assault (for both me and others) was my own reaction to the situation. I had previously believed that if I was ever a victim of a violent crime, I would have the immediate reaction of fighting back. However, I did not. I was immobilized and passive. My reaction led both me and others to believe that what happened to me was my fault; I should have been forceful and assertive. Perhaps my lack of response led my attacker to believe that it was ok, and that is why he did it. These were all thoughts that I had conjured up post-assault. However, I now understand that I had no control over my response to the situation and immobility as a response to a traumatic event is exceptionally common (Herman, 1992; Kalaf et al. 2017; Ratner, 1967).

At the moment of trauma, I was rendered helpless. When faced with traumatic stimuli, the nervous system becomes completely overwhelmed (Herman, 1992; Kalaf et al., 2017; Kardiner & Spiegel, 1947). In their classic literature on trauma, Kardiner and Spiegel (1947) state that when a person is overwhelmed by terror and helplessness, "the whole apparatus for concerted, coordinated and purposeful activity is smashed. …The functions of the autonomic nervous system may become dissociated with the rest of the organism" (p.186). When neither resistance nor escape is possible, the human system of self-defence becomes overwhelmed and disorganized, and a victim may enter a state of surrender (Herman, 1992). In this way, I escaped from the situation not by action in the real world, but rather by altering my state of consciousness (Herman, 1992). This has been described as one of "nature's small mercies" (p.43), as it serves as a barrier or protection against unbearable pain (Herman, 1992).

This dissociative detached state of consciousness, called tonic immobility, is an involuntary motor and vocal inhibition reaction, traditionally considered the last ditch of the defence cascade (preceded by freeze, fight, and flight) (Ratner, 1967; Kalaf et al., 2017). It is a state of unresponsiveness and suppressed vocal behaviour characterized by surrender of voluntary action, suspension of initiative and critical judgement, altered sensations, and a distortion of reality, including the sense of time (Hiligard, 1977; Spiegel, 1990; Herman, 1992; Marx et al., 2008). Though underrepresented in literature, tonic immobility is most frequently reported in victims of sexual assault (Burgess & Holmstrom, 1976; Bovin et al., 2008; Fusé et al., 2007; Galliano et al., 1993; Heidt et al., 2005; Humphreys et al., 2010; Bados et al., 2008; Kalaf et al., 2017). Experiences of tonic immobility are associated with higher levels of guilt, shame, and the development of PTSD (Abrams et al., 2009; Bovin et al., 2008; Fusé et al., 2007; Marx et al., 2008; Zoellner, 2008; Kalaf et al., 2017). Although speculations have been made to explanation this correlation, more research needs to be done in order to explore it further (de Kleine, Hagenaars, van Minnen, 2018).

Although I have been hard on myself for many years about my lack of response to being assaulted, I could not have reacted in any other way. It simply was not under my conscious control. Although tonic immobility has been studied since the 1960's (Ratner, 1967) and is most common in victims of sexual assault (Kalaf et al., 2017), it is not mentioned in much of the literature on sexual violence. In fact, I did not come across literature on tonic immobility until near the very end of this study. The understanding of tonic immobility as a response to trauma is incredibly important, as it answers many questions surrounding the behaviour of victims – behaviour that is often heavily questioned and criticized by police (Venema, 2016;2019).

My lived experience certainly supports the literature on tonic immobility. I recall feeling trapped in my body, unable to even make decisions about where to move or how to move. Although I knew that I was being assaulted, I made no attempt to cry for help. I do not recall even telling my assailant to stop. I believe I said nothing at all. This behaviour should not be seen as confusing or make my story less believable. If anything, its consistency with trauma literature should make it more believable.

5.2.2 Memory

I have a fairly clear, straightforward memory of my evening leading up to the assault, and the events that transpired after the assault. However, the memory of the assault itself is very scattered. For years, I attributed this blank space in my memory to the alcohol I had consumed prior to the assault. However, this type of disorganized and fragmented memory is a hallmark of traumatized individuals. Extreme emotional arousal leads to failure of the central nervous system (CNS) to synthesize the sensations related to the trauma into an integrated whole, causing the memory to exist in a fragmented state (van der Kolk, Burbridge, & Suzuki, 1997; Elhers & Clark, 2000; Hayes et al., 2011). Exposure to trauma has been associated with reduced hippocampal volumes, a part of the brain responsible for memory processing (Karl et al., 2006; Smith, 2005; Kitayama et al, 2005; Woon, Sood, & Hedges, 2010). Therefore, trauma produces unusual memory phenomena and it can lead to extremes of retention and

forgetting; terrifying experiences may be indelibly etched into a person's memory or totally resist

integration (van der Kolk, Burbridge, & Suzuki, 1997; Staniloiu & Markowitsch, 2012). In many instances,

traumatized individuals report a combination of both (van der Kolk, Burbridge, & Suzuki, 1997; Staniloiu

& Markowitsch, 2012). I "remember" the trauma in the form of somatosensory flashback experiences;

visual, olfactory, affective, auditory, and kinesthetic imprints (van der Kolk, Burbridge, & Suzuki, 1997;

Hayes et al., 2011). The very nature of traumatic memory is to be dissociated and rarely reproduced as a

personal narrative (van der Kolk, Burbridge, & Suzuki, 1997; Hayes et al., 2011; Staniloiu & Markowitsch,

2012).

In individuals with the most intense trauma exposure, and the most severe PSTD symptoms, the

hippocampus, which creates a cognitive map that allows for the categorization of experience and its

connection with other autobiographical information, has been shown to shrink in size (Bremner et al.,

1995; Stein et al., 1994; Gurvits et al., 1996). During exposure to traumatic scripts, brain scans show

decreased functioning of Broca's area, which would make it difficult for individuals to understand what

was going on (van der Kolk, Burbridge, & Suzuki, 1997). My experience is consistent with this literature,

as I experience intense emotions without being able to label my feelings (van der Kolk, Burbridge, &

Suzuki, 1997; Staniloiu & Markowitsch, 2012). My body may be aroused, and fragments of memories

may be activated, but I am often unable to communicate what I am experiencing (van der Kolk,

Burbridge, & Suzuki, 1997; Herman, 1992). I can feel, see, and hear the sensory elements of the

traumatic experience, but am physiologically prevented from translating it into any type of

understandable narrative (van der Kolk, Burbridge, & Suzuki, 1997; Hayes et al., 2011).

This knowledge is critical to our societal understanding of trauma. People who tell stories in

non-linear ways, exclude details, add details later, and change the chronology of events are seen as less

reliable (Venema, 2019). For many survivors of sexual assault, disclosures are dismissed based on a lack

of believability (Doolittle, 2017). Considering the data, this is outrageous. A disorganized story is indeed

a consistent component of an individual experiencing a traumatic event. This knowledge is necessary

not only for police and other justice professionals, but for society as a whole. Anyone who works people

or contributes to education, journalism, or policy at any level should be equipped to recognize and

appreciate the reality of what trauma looks like in an individual. It is only through a shift in our social

perspectives that we can deliver the justice that survivors of sexual assault, or any trauma, deserve.

Given the prevalence of sexual assaults on university campuses, it is imperative that university

staff be educated on the realities of trauma. As is seen in existing literature as well as this study,

reactions to disclosures are of the utmost importance to the post-assault adjustment and recovery of a

victim. Therefore, every response that a victim receives may have a very significant, irreversible impact

on both short and long-term health outcomes – both positive and negative. In order to ensure that

university staff are positive change-makers in their environments, they must receive trauma training

that addresses what trauma is, what it looks like, how it may impact students, and how to respond to a

disclosure of sexual violence. All staff, not just counsellors and residence advisors, should feel confident

in their ability to respond appropriately to the disclosure of a sexual assault by not only students, but

other staff and faculty as well. Trainings can be operated by organizations and institutions that include

but are not limited to rape crisis centers, advocacy groups, and trauma therapists.

5.2.3 Posttraumatic Stress Disorder

As discussed in the literature review, PTSD is a debilitating psychiatric disorder the develops in

individuals who have been exposed to intense traumas (Francati et al., 2007; Hughes & Shin, 2011; Ford,

2018). I did not experience any recognizable PTSD symptoms until approximately eight months after the

assault. It was at this time that the hallmark characteristics – intrusive memories, flashbacks, and sleep

disturbance – of PTSD (Francati et al., 2007; Hughes & Shin, 2011; McNally et al., 2014; Ford, 2018)

began to occur daily. However, my experience of PTSD came in waves. This was the onset of my PTSD –

at eight months post-assault. It was characterized *only* by intrusive memories, flashbacks, and difficulty

sleeping. By approximately one year post-assault, I started to experience a numbing of emotions and

social dysfunction (Francati et al., 2007; Hughes & Shin, 2011; McNally et al., 2014; Ford, 2018), as well

as extreme fatigue. It was over two years post-assault that I began to develop hypervigilance and

physiological hyperresponsivity (Francati et al., 2007; Hughes & Shin, 2011; McNally et al., 2014; Ford,

2018). All of these symptoms are incredibly common, but each wave came as a surprise to me.

Long after the danger passed, I relived the event as though it were continually reoccurring in the

present (Berntsen & Rubin, 2014; Brewin, 2014; Herman, 1992) – on the bus, in class, with friends, and

in church. The traumatic memory, which became encoded in an abnormal form of memory, broke

spontaneously into consciousness as flashbacks during waking states (Herman, 1992; van der Hart et al.,

2008). These flashbacks were (and are, as I still experience them) characterized by an immediate,

involuntary and inescapable immersion in the memory - and the subsequent state of fear, horror, and

helplessness (Brewin, 2014; Ford, 2018). There exists a disorientation of the self and the current context,

coupled with intense states of arousal (either hyperarousal or complete disengagement) (van der Hart,

van Ochten, van Son, Steele, & Lensvelt-Mulders, 2008). The constant experiencing of this fragmented

reality keeps victims from resuming the normal course of their lives (Herman, 1992). I found myself

caught between the extremes of amnesia or of reliving the trauma, between floods of intense,

overwhelming feeling and states of no feeling at all, between irritable, impulsive action and complete

inhibition of action (Herman, 1992; Ford, 2018; van der Hart et al., 2008). This cycle further exacerbated

my sense of unpredictability and helplessness (van der Kolk, 2000).

Post-assault, I felt that a part of myself had died (Herman, 1992). This feeling of loss and grief

was associated with the shattering of my worldview. In situations of terror, people seek out comfort and

protection and cry for help (Herman, 1992). When this cry is not answered, the sense of basic trust is

shattered (Herman, 1992; Horowitz, 1986; Janoff-Bulman, 1985; Sebold, 1990). I knew immediately

what had happened to me, as I sought out my friends and told them directly that someone had

assaulted me. This was my first cry for help. Initially, my boyfriend's roommates were upset and concerned by this, and displayed the reaction I had expected: outrage. However, upon finding the perpetrator, the outrage was replaced by disbelief, doubt, and complete dismissal of my story.

My cry for help was heard and understood by my boyfriend and some female friends – accepting my story just as it was, offering comfort and care. My other male friends heard the cry for help and did not discredit its validity, but responded with distancing themselves and an displaying an overall indifference. The constable, and in essence, the justice system he represents, also responded with some doubt, and ultimately, indifference. The indifference to my deep pain and suffering was shocking and earth-shattering. Before the assault, I had an underlying belief in a just world and in my innate worth within it. Post-assault, I had lost faith in the goodness of people, the prevalence of justice, and my value as a human being in society. I felt utterly abandoned, utterly alone, cast out of the human and divine systems of care and protection that sustain life. These feelings are extremely typical of those who experience PTSD (Herman, 1992).

After my experience with the police, I proclaimed to my friends that I never wanted to talk about the assault again. I decided that I would move on and pretend it had never happened. As such, I did not speak to any of my professors or academic advisors about the incident or about the potential support I may have needed. It was not until years later that I realized that it was a "valid" enough reason for both personal and academic assistance. My identity as a university student encompassed most of my life – my purpose, my "career", and my social life. Having vocal, anti-violence messages – not just in the gender studies department and in "women's" groups, but also in residences, in classes, in clubs, on sports teams, etc. – would have probably helped me to understand that I was worthy of help. Most importantly, if I had known *how* I could have been helped and what options were even available, I would have known how to ask for it.

Universities should be clear in acknowledging that sexual assault is a rampant social issue specifically impacting student populations. This acknowledgement should be shown through official communications, conversations that faculty and staff have with students, and readily accessible resources. For example, every course distributes a syllabus at the beginning of the term outlining the course content, expectations, policies on academic integrity, and policies regarding submitting work on time. Within that syllabus, school policies regarding sexual assault can easily be added. At the beginning of the term, instructors can go over how students can seek accommodations for various reasons (not just for extreme illness or deaths in the family, but also for instances of sexual assault), reminding students that their success – both personal and academic – are a priority for the school. It would be extremely helpful for instructors to add information on available resources, such as the names and numbers of the sexual violence response team members and which of the nearby hospital houses the sexual assault and domestic violence treatment centre. Universities must view sexual assault as a community problem that requires community solutions.

An important consideration from these findings is that PTSD is a widespread, complex, and highly disruptive. PTSD is often a disorder that spans the life course and can look very different over time. Therefore, the expectation that a survivor of trauma would ever "get over" what happened to them is physiologically improbable. Humans' nervous systems take great lengths of time to reorganize and reintegrate post-trauma; the timeline can look wildly different for different people. Consideration for this fact must be an integral part of how we serve individuals who have experienced trauma.

5.2.4 Fatigue

A major component of my daily life post-assault was struggling with fatigue. I struggled with waking up in the morning and staying awake throughout the day. It was not abnormal for me to sleep for over 10-12 hours at a time. While sexual assault is associated with increased risk for chronic pain and affective distress that comes from disruption of pain modulation mechanisms (Hellman et al., 2018) and

the findings of several studies suggest a relationship between trauma and chronic fatigue (Doyle, Frank, Saltzman, McMahon, & Fielding, 1999; Eby, Campbell, Sullivan & Davidson, 1995; Golding, 1999; Heise, Pitanguy & Germain, 1994; McBeth, Macfarlane, Benjamin, Morris & Silman, 1999; Walker et al., 1999), it is not investigated much in existing the literature on sexual assault. However, when investigating the topic of Chronic Fatigue Syndrome, a strong link is seen between those who have been diagnosed with chronic fatigue and those with a history of PTSD (Nater et al., 2009). There is some research that explores how victims of domestic abuse and sexual violence experience some physical symptoms associated with chronic fatigue (Golding, 1999; Walker et al., 1999) such as low energy (88%), sleep difficulties (77%), and headaches (77%) (Eby et al., 1995). This is consistent with literature that demonstrates the link between life stress (family death, car accidents, divorce) and fatigue (Palmer, 2013). Given that chronic fatigue is related to the functioning of the nervous system (a key component of trauma) (Herman, 1992) and has a link to PTSD (Nater et al., 2009), it follows that fatigue should be more seriously investigated as an after-effect of sexual assault.

When discussing student populations, fatigue becomes an increasingly important topic, as it has been shown to inhibit attention and local processing (Van der Linden & Eling, 2006), the retrieval of information (LePine et al., 2004), as well as disrupting short-term memory and recall (Johnson, DeLuca, & Diamond, 1988). These are all crucial skills for learning. Given the fast pace of the university learning environment, it is possible to see how students have experienced a traumatic event would easily fall behind. As such, more exploration needs to be done regarding both the connection between sexual assault and fatigue, as well as academic assistance and support for victims of sexual assault.

5.3 Responses to Disclosure

Previous literature demonstrates that the majority of sexual assault victims (anywhere from 65% to 92%) disclose the assault to at least one person (Ahrens, Campbell, Ternier-Thames, Wasco, & Sefl, 2007; Fisher, Daigle, Cullen, & Turner, 2003; Starzynski, Ullman, Filipas, & Townsend, 2005), and those

people are most likely to be friends, family, and romantic partners – known as informal support providers (Campbell, Ahrens, Self, Wasco, & Barnes, 2001; Filipas & Ullman, 2001; Fisher et al., 2003; Ullman, 2010). My initial response to being assaulted was to tell someone immediately. This is consistent with Ahrens et al. (2007) findings that showed disclosure was likely to happen automatically with those present at the scene. I sought out my best friend initially, and then my boyfriend's roommates. I ended up disclosing to most of my close friend group (10-12 people) within 48 hours of the assault.

My boyfriend's roommates - my friends - continued to dismiss my story in the days and weeks that followed. "We weren't there, so we can't know", was the common theme. "There are two sides to every story" and "don't just believe Laura" were the things said to my boyfriend. Other friends and family responded with "why were you even there?", "how much did you have to drink?", and "I wish you wouldn't drink so much," which placed the responsibility for the assault onto me, the victim. Although informal support providers are more likely to respond positively than law enforcement and other formal support providers, they still engage in high levels of overt negativity, such as blaming or doubting (Davis, Brickman, & Baker, 1991; Ullman, 2010), as well as more covertly negative efforts such as encouraging secrecy (Herbert & Dunkel-Schetter, 1992). I experienced both overt and covert negative responses from friends and family. My experience with receiving hurtful reactions is not uncommon; 75% of women receive some form of negative response to disclosure of sexual victimization (Ahrens, Cabral, & Abeling, 2009) and 20% regret the initial decision to disclose (Jacques-Tiura, Tkatch, Abbey, & Wegner, 2010).

Negative reactions are informed by broad, deeply entrenched "rape culture": attitudes regarding biological sex, gender, and sexuality that inform people's attitudes on sexual assault (Rozee & Koss, 2001). Through rape culture, it is assumed that sexual violence is a fact of life and ultimately inevitable (Buchwald, Fletcher & Roth, 1993). According to Herman's landmark cultural analysis "The

Rape Culture" (1988), society fosters and encouraged assault by instructing citizens that it is normal and

natural for sexual relations to involve aggressive behaviour on the part of men. Researchers argue that

as long as these types of relationships are supported, sexual assault will remain a common occurrence

(Barnett, Sligar, & Wang, 2018; Herman, 1988). Rape culture encompasses "rape myths", which are

stereotyped or false beliefs about rape, rape victims, and rapists (Burt, 1980; Lichty & Gowen, 2018).

Rape myths include beliefs that blame the victim and distort the role of the perpetrator (i.e. when

women drink, they're asking for trouble) (Payne, Lonsway, & Fitzgerald, 1999). Rape myths were first

defined by Burt (1980) as "prejudicial, stereotyped, or false beliefs about rape, rape victims, and rapists"

(p.2017). These attitudes and behaviours are consistent with the overarching social pattern described in

Ryan's (1976) text, *Blaming the Victim*, in which people attribute responsibility for social problems on

those targeted or impacted instead of recognizing the responsibility of immediate actors or the

influence of larger macro-level structures. The more a person accepts rape myths and adheres to

traditional gender roles (e.g. men are dominant, women are submissive) the less likely they are to label

the situation as an assault (Grubb & Turner, 2012).

Research demonstrates that friends tend to provide the most positive social reactions such as

emotional support, and these responses are mostly perceived as healing (Ahrens, Cabral, & Ableing,

2009; Filipas & Ullman, 2011). Over the course of a couple years, this has proven accurate. Although the

first friends I told were not helpful, other friends I disclosed to later on often were. My disclosure was

often met with both emotional and tangible support, such as assistance contacting counselors. I did find

that the most helpful reactions came from women identified friends, which is consistent with previous

literature (Banyard, Moynihan, Walsh, Cohn, & Ward, 2010; Lorenz et al., 2018). The most harmful

responses came from male friends. Some male friends acknowledged the assault but did not provide any

tangible support, which I perceived as indifference. Literature demonstrates that men are typically more

uncertain about how to help (Ahrens & Campbell, 2000; Banyard et al., 2010). I believe some of my male

friends felt this way, but others truly just did not want to be involved. Others insinuated that I was either

lying about the entire incident, or just confused about what had happened; these reactions are largely

informed by rape myths, as previously discussed (Burt, 1980; Payne, Lonsway, & Fitzgerald, 1999).

Family and romantic partners typically have more mixed responses, including blame, disbelief,

control, distraction, and egocentric reactions (Filipas & Ullman, 2001). None of my family responded

with disbelief, but some did display both blaming and egocentric reactions. Whereas my friends

understood the university party environment in which the assault occurred, my family overall did not.

They could not get past the fact that I had been drinking at a party, seeing the assault as a direct result

of my alcohol consumption and choice of friends. Coming from a religious background (Protestant

Christian), some family members saw my indiscretion (by way of my drinking) as the root of the

problem. Individuals who identify as Protestant or Roman Catholic have demonstrated higher rape myth

acceptance compared to those who identify as atheist or agnostic (Barnett, Sligar, & Wang, 2018), which

may have increased the blame placed on me by some members of my religious family. These reactions

manifested not only as blaming statements, but also as anger aimed at me. These reactions are

categorized "betrayal trauma", a reaction beyond negative or blaming that comes from trusted

individuals that violate the victim's trust or well-being (Freyd, 2008). These types of reactions most

commonly come from family members or significant others (Lorenz et al., 2018). These reactions may

come from people feeling helpless, inadequate, angry, and frustrated – which all negatively impact their

interactions with the victim (Ahrens & Campbell, 2000; Milliken, Paul, Sasson, Porter, & Hasulube, 2016).

While many significant others respond with anger and aggression (Lorenz et al., 2018), my

boyfriend was almost exclusively concerned with my well-being (at least that is what my perception

was). My boyfriend was undoubtedly my biggest ally and greatest support throughout the aftermath of

my assault. I never experienced doubt, control, or distraction from him. At my request, he talked to our

friends on my behalf, he accompanied me to the police station, and he encouraged me to pursue positive avenues of adjustment, such as formal mental health counselling.

When I began my graduate degree, I started talking very openly about the issue of sexual assault on a regular basis. Within the Recreation and Leisure department in which I was working, I found much understanding and appreciation for the seriousness of my area of interest. However, one of the pathways in the data representation leads to an incident where an academic advisor in my department called alcohol-involved sexual assault "a fine line". I was so shocked when he said that to me, I could not even muster a response. He was referring to the confusion surrounding alcohol-involved sexual assaults. "When it comes to situations involving alcohol, the line becomes hard to see", was what he was getting at, which is exactly the rape myth that this thesis seeks to disavow. "The line" – the difference between criminal violence and consensual fun – is thick, solid, and always present. It is each individual's responsibility to know where that line exists and honour its presence.

5.3.1 Just World Beliefs

When faced with a disclosure of sexual assault, observers engage in a complex sense-making process (e.g. where it happened, what went on during the assault, the victim/perpetrator relationship) to determine whether or not a situation qualifies as an assault and who is responsible for it (Lichty & Gowen, 2018). As a society, we tend to believe in causality: there is a relation between our actions and what befalls us (Kaplan, 2012). This justice-driven assumption is what Lerner (1965, 1978) described as "Belief in a Just World" (BJW) or "Just-World Hypothesis". It is a deeply engrained, widely upheld motive, which enables us to adapt to our environment as if it were stable and orderly (Lerner, 1980; Lerner & Miller, 1978). The implication of the comments I received such as "I wish you wouldn't drink so much" and "why were you even there?" was that the assault happened because of something I had done; if not for my actions, it would not have happened.

People confronted with unjust experiences or unexpected misfortunes usually employ one or more cognitive strategies to defend their sense of justice and reaffirm their belief in a just world; usually dismissal or rationalization of the situation (Lerner, 1980). Research shows that individuals generally have a strong need to perceive the world as just, and therefore believe that rewards will be granted to people who strive for them and punishments will be meted out to those who deserve them (Kaplan, 2012). Many people believe that the social system is fair, legitimate, and justifiable (Kaplan, 2012). Therefore, victimization is usually attributed to an individual's reckless behaviour or unworthy character (Dalbert, 2001; Furnham, 2003; Valor-Segura, Expósito, & Moya, 2011). This rationalization maintains people's beliefs that a similar misfortune will not befall them as long as they remain prudent and of good character (Hayes, Lorenz, & Bell, 2013; Lerner & Miller, 1978; Valor-Segura, Expósito, & Moya, 2011). Just World Beliefs can pertain to many different situations (i.e. crime, poverty, natural disasters, accidents), but appear mostly to victims of sexual assault (Valor-Segura, Expósito, & Moya, 2011).

5.4 Police

Immediately following my interaction with law enforcement, I was not unhappy with the way I had been treated. I did get an audience with a constable. He did listen to my whole story and record it. He didn't tell me that he didn't believe me. He did put my report into a provincial database. However, upon further reflection, I now realize that my expectations for how I deserved to be treated were extremely low. My journey with the justice system began and ended in one Sunday afternoon with one meeting with a constable.

There was very little consideration for the fact that I had recently been the victim of a serious violation. My boyfriend, who accompanied me to the police station, had to wait in the foyer, isolating me with the constable I had just met. I had one interview-type interaction with a constable, who recorded my story one time, questioning me as I described my experience. In that moment, he had me decide whether or not I wanted to open an investigation. As a recently traumatized nineteen-year-old

who had never had any interaction with the justice system previously, I had no idea what that meant. I was terrified. When describing the investigation process, the constable said I would have to tell my parents, which was a terrifying prospect to me. I immediately said no. Looking back, I have no idea why that was even brought up. I was nineteen - a legal adult. My parents lived in a different city. Surely it would be my decision whether or not to involve my parents?

The constable asked me if it might have been consensual, since I didn't remember everything. Maybe I had agreed, and I just forgot. There seemed to be doubt that what I was describing to him was sexual assault. Police and the legal system search for signs of resistance to classify an incident as a rape (Abarbanel, 1986; Marx et al., 2008).There is a common flawed belief that victims should have done more to prevent to or react to a sexual attack (Kalaf et al., 2017), which does not make sense given the above discussion on involuntary reactions to trauma.

"Secondary victimization" often occurs within criminal justice system (Alderden & Ullman, 2012; Venema, 2016), which encompasses "victim-blaming attitudes, behaviour, and practices engaged in by community providers, which further the rape event, resulting in additional trauma for rape survivors" (Campbell, Wasco, Ahrens, Sefl, & Barnes, 2001, p.1240). Victims report that police are reluctant to take their reports, ask whether the victim responded sexually to the rape, and make statements about the case not being serious enough to pursue (Campbell, 2006). For victims who experience penetration, reporting to the police appears to exacerbate the impact of the sexual assault and increase depression levels (Kaukinen & DeMaris, 2009). I can understand why that is, as the constable I was dealing with made me describe the event in detail, asking very nonchalantly where the perpetrator penetrated and what part of his body he used. Having to say the exact words made the experience that much more painful and traumatizing for me.

Police are more likely to perceive sexual assault reports as legitimate when there is "strong evidence": obvious violence or personal injury, DNA evidence, or the presence of a weapon during the assault (Venema, 2016). Officers look for "anything to indicate that it was forced upon them" such as ripped clothing, bite marks, or scratches (Venema, 2016, p.887). Officers also are more likely to trust reports that happen within 24 hours of the assault (Venema, 2016). Some officers believe that "the serious one is the stranger… with a gun, with a knife, in the bushes" (Venema, 2016, p.886). However, there is no evidence that supports that sexual assaults perpetrated by strangers are more "serious" or that being victimized in the bushes is any less damaging as being assaulted in your own home. This conception of "real rape" is highly problematic, as was noted in the literature review, since the vast majority of assaults do not happen by deranged strangers in the bushes or in dark alleyways. Interestingly, Jordan (2002) found that rape myth acceptance among women identified police officers was just as pervasive as that of male police officers, which suggests that organizational culture, socialization, and peer pressure may influence personal more than other individual characteristics such as gender. Negative evaluations, including victim blame and diminished perceptions of victim credibility, are more likely when the victim was intoxicated at the time of the assault (Bieneck & Krahé, 2011; Schuller & Stewart, 2000; Spears & Spohn, 1996; Venema, 2019). Research shows that alcohol and drug use by the victim significantly deters case progression (Campbell, 1998; Chandler & Torney, 1981; Frohmann, 1997; Kerstetter, 1990; Spears & Spohn, 1996; Venema, 2019). In fact, Campbell (1998) found that victims who were drinking prior to the sexual assault were 4 times more likely to have their cases dropped during the beginning of the legal process.

After their first contact with police, many victims are reluctant to engage with the criminal justice system or seek other assistance (Campbell, 2006; Campbell & Raja, 1999;2005). This was especially true for me. After that encounter with the constable, I didn't ever talk to him or anyone else from the police again. I was given a business card for victim services, but that's it. The message was

clear: it is too bad this happened, but there is really nothing we can do for you. A shoulder shrug,

essentially. I didn't seek out any other formal support providers such as doctors or counsellors until

almost one year post-assault.

Police responses have not significantly improved over the past 30 years (Jordan, 2001; Temkin &

Krahé, 2008; Venema, 2019). Research clearly indicates the negative and traumatizing experience of

many sexual assault victims when they report to police (Campbell, 2006; Campbell, Wasco, Ahrens, Sefl,

& Barnes, 2001; Chen & Ullman, 2010; Felson & Pare, 2008; Frazier & Haney, 1996; Frohmann, 2002;

Kaukinen & DeMaris, 2009; Konradi & Burger, 2000; Larcombe, 2002; Martin & Powell, 1994; Monroe et

al., 2005; Patterson, 2011; Rich & Seffrin, 2012; Ullman & Townsend, 2007). A recent study reported

that approximately one third of women identified sexual assault reports stated that the victim decided

not to pursue charges after the initial interview, although a clear rationale for this decision was not

included in the police report (Murphy, Edwards, Bennett, Bibeau, & Sichelstiel, 2014). This feels

unsettling to me, because that is exactly what I decided – not to pursue an investigation that would lead

to charges. However, I don't feel like I was given proper information or resources to make such an

important decision. My motivation to not move forward with an investigation was purely fear. I was

terrified. I didn't want to see my perpetrators face ever again. I didn't want to deal with the aftermath of

my assault. It was one-week post-assault and the police were the first formal support service I had

sought out. What I wanted to do at that point was lock myself away and never interact with anyone

again – obviously when faced with the decision to make the situation more intense or to not address it

at all, I chose the path of least resistance.

It is clear that the majority of disclosures to law enforcement are handled in a way that is

damaging to victims and lack a basic understanding of trauma (Venema, 2016; Venema, 2019). Based on

this study and previous research, police officers and police service staff should be required to complete

in-depth training regarding trauma and the foundations of trauma-informed care. Police services may

often be the first formal support that victims encounter and therefore their interaction is incredibly important for victim recovery.

Traumatic memory is inherently fragmented and thematic in nature rather than a typical integrated narrative memory. Therefore, there will be certain things that are pronounced (i.e. the sound of the perpetrator's laugh), but other things that will not be remembered at all (i.e. the chronology of what happened). Instead of thinking that the victim is lying or is mistaken about the events, police need to know that this type of memory is typical of a traumatized individual. Training should also focus on addressing victim-blaming myths and emphasize that sexual assault is a crime for which the offender is to blame (Clarke & Lawson, 2009; Venema, 2019). Literature shows that training should specifically address the role of alcohol in sexual assault (Abbey, 2015). More recently, a report commissioned by the Federal/Provincial/Territorial (FPT) Ministers Responsible for Justice and Public Safety was published that outlined the particular challenges faced when reporting, investigating, and prosecuting sexual assault committed against adults (Coordinating Committee of Senior Officials, 2018). The findings from that report outlined the lack of understanding regarding the neurobiology of trauma, as well as the role of drugs and alcohol, in the context of sexual assault on the part of criminal justice professionals, including victim service providers, police and Crown prosecutors (Coordinating Committee of Senior Officials, 2018). Among other recommendations, the report stated that all of those parties must receive extensive and ongoing training in those areas (Coordinating Committee of Senior Officials, 2018).

5.5 Alcohol, Leisure, and Victimization

As a nineteen-year-old university student, being at a party on a Saturday night was the most average leisure activity for me to be pursuing. Almost every weekend of the second year of my undergraduate degree was characterized by attendance at either a house party or a bar. Although I had experienced sexual harassment in these leisure spaces, I had no expectation of experiencing either an attempted or completed rape. However, the heavy drinking common among university populations is

consistently predictive of sexual assault (Combs-Lane & Smith, 2002; Testa, Hoffman, & Livingston, 2010). Testa and Hoffman (2012) found that occasions of heavy drinking in university were strongly associated with experiencing incapacitated rape or other sexual victimization. Situations where assault risk is heightened are particularly likely in university settings where heavy drinking is accepted as the norm (Abbey, 2002). Why is such a common activity leisure pursuit *so* dangerous for woman-identified students? Given the prevalence, why did I not have *any* expectation of being victimized? Why did I only learn about the facts when I started doing formal research on the subject?

As discussed in multiple sections above, alcohol consumption by the victim, the perpetrator, or both, immediately changes the nature of the assault to observers. The idea that alcohol-involved assault is less valid or credible is firmly opposed by literature (Lorenz & Ullman, 2016). Regardless, victim drinking behaviour brings into question the credibility of the disclosure, sometimes completely dismissing the incident completely and it critically impacting the possibility of a case being taken seriously by law enforcement. Additionally, perpetrator alcohol consumption somehow diminishes their responsibility for their behaviour. Despite the fact that consent law in Canada is clear that sexual encounters with intoxicated persons is assault, the way the law is enforced – and the social and cultural that reflects – does not reflect that. The presence of alcohol in the assault narrative often becomes the focal point, distracting from the crime itself. Stereotypes of drinking women being held responsible for their assault and the negative societal stigma of drinking and rape often weigh on the victim's attribution of the assault. In this way, self-blame is influenced by the victim's own rape myth acceptance.

Internalizing the blame can have detrimental effects on recovery (Peter-Hagene & Ullman, 2018). Women who were drinking (vs. not) before the assault tend to blame themselves more (Brown et al., 2009; Donde, 2015; Macy, Nurius, & Norris, 2007; Nurius, Norris, Macy, & Huang, 2004), perhaps because they believe being intoxicated facilitated the assault (Macy et al., 2007). Alcohol related

assaults generally result in more negative social reactions, self-blame, and maladaptive coping, which

serve as psychosocial mediators that contribute to increased PTSD (Peter-Hagene & Ullman, 2015).

Some research suggests that although alcohol-involved assaults are less violent, they may result in more

severe PTSD via self-blame attributions (Littleton, Grills-Taquechel, & Axsom, 2009). Given the

prevalence of alcohol's involvement in sexual assaults, it is completely unreasonable that alcohol is

consistently noted as a factor that diminishes or confuses the legitimacy or seriousness of the offense.

This is an incredibly serious issue, as half of all assaults include alcohol consumption by the victim, the

perpetrator, or both (Abbey, Zawacki, Buck, Clinton, & McAuslan, 2004; Littleton & Breitkopf, 2006;

Orchowski & Gidycz, 2012; Orchowski, Untied, & Gidycz, 2013). It is also problematic given how often

university students consume alcohol for leisure.

Going to a party on a weekend night was exceptionally typical behaviour for myself and my

friends in our sophomore year of university. The parties that I attended were most often held in very

familiar places, such as my boyfriend's house. This is consistent with previous literature, as a recent

Canadian study showed that 92.5% of university students reported that they drink alcohol – most often

to be social (66%) or to celebrate (59%; Canadian Centre on Substance Abuse, 2017). Additionally, 35%

of students engage in binge-drinking (which is classified as five or more drinks at one time) on a, at the

very least, bi-weekly basis (American College Health Association, 2016). Regardless of what type of

drinking they engage in personally, 89% of students agreed that there are times when it is socially

acceptable to get drunk (Canadian Centre on Substance Abuse, 2017).

5.5.1 Gender Reproduction and Resistance

Without realizing it, I was taking part in what Shaw (2001) would consider gender resistance by

participating in these nighttime leisure activities. It seemed innocuous and gender neutral at the time,

until I was forced to think critically about it. Although heavy drinking has become somewhat of a norm

for all genders in university leisure spaces, there is still a lingering notion that female drinking is

"immoral" or "unladylike" (Peralta, 2010). As a result, society tends to blame sexual assault victims, who are predominantly woman identified, if they engaged in risky, "immoral" behaviours, such as drinking, prior to their victimization (Schuller & Wall, 1998).

As a result of women identified people traditionally being excluded from alcohol-involved leisure spaces, parties offer spaces for gender resistance. Because I came from a position of privilege and did not associate myself with being restricted because of my gender, I did not see how I was any different from my male peers in a party leisure space. It seemed as though we were all, in some way, asserting our individuality and agency by being in this space together. I felt like it was a safe space, because I knew so many people. Being comfortable, I showed gender resistance in many ways – for example: by consuming alcohol (especially by doing things like chugging beer or taking shots – traditionally very "manly"), and by wearing nonsexual clothing (instead of dressing in a sexy costume for Halloween, I dressed as a baby and wore a big onesie). At age nineteen, I did feel somewhat free of perceived gender norms. However, my freedom was highly restricted. It became clear, both during the assault and post-assault, that my freedom and agency in that leisure space had boundaries. Indeed, some would say that I had actually crossed an invisible boundary by being there and consuming alcohol in the first place (Romero-Sánchez, Krahé, Moya, & Megías, 2018).

This study supports the concept of leisure as a space for gender resistance in more than one way – both as a woman identified individual in a space where women are traditionally not allowed, and by rejecting the gender norms around what women should look like in that space (i.e. wearing revealing clothing). In my situation, partaking in partygoing as gender resistance came with particular risks (of which I was not aware of at the time). I believe this could be a common thread among many types of gender resistance activities. Further research should investigate the balance that exists between risk and reward when participating in gender resistance.

5.5.2 Leisure Constraints

Something that I did not anticipating arising from this research was the clear role of what is termed "leisure constraints". Constraints can be conceptualized as "factors that may prevent, reduce or modify participation, or may adversely affect the quality or enjoyment of the leisure activities" (Shaw, 1999, p.274). There are three categories of constraints: structural (such as time and money), intrapersonal (such as shyness or body image issues), and interpersonal (such the relationships between participants) (Jackson, 2007; Walker, 2007). My findings relate particularly to the interpersonal constraints among young, woman-identified partygoers. To understand women-identified participants leisure experiences, Shaw (1994) states that we must focus on "ways in which women are disadvantaged or oppressed within patriarchal society, and how their subordinate status within that society limited their access to, and enjoyment of, leisure" (p.8).

Partying as leisure is deceiving. For young partygoers, there is a sense of self-determination and freedom – key characteristics of the traditional understanding of leisure. Perhaps students are living on their own for the first time. Perhaps this is the first time they have been able to make decisions about their personal schedule: who they see, where they go, and what they do. This was certainly the case for me and my peers. Leisure, as mentioned above, provides the opportunity for self-expression, autonomy, and gender role resistance (Shaw, 1994; 2001). As a white, cisgender nineteen-year-old with no history of sexual abuse or violence, I did not see parties as anything other than spaces for freedom and independence. Strangers and acquaintances had groped me at bars and clubs before, but I had seen and negotiated that constraint (negotiations are behaviours that leisure participants enact to overcome constraints). When small acts of violence came, like groping and grabbing, I would swat hands away, pleasantly excuse myself, make panicked faces at my friends, excuse myself to the washroom, or stay in a tight-knit circle with my girlfriends. I had always successfully negotiated this barrier. However, the almost insurmountable constraint facing me, that I did not know was there, was the very high

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probability of a more aggravated form of sexual violence. In this sense, participating in gender resistance

through partygoing was dangerous for me as a woman identified individual. It appears that for woman

identified participants, partying is almost simultaneously normative leisure (almost deceptively so) and

deviant leisure, depending on the outcome of one's experience. For example: If you had a good time

with your friends, you have participated in a social gathering typical of your age and life stage. However,

if you become a victim of sexual assault, you should have known better than to put yourself in that

position. My research is consistent with previous literature suggesting that particular constraints exist

for woman identified participants as a result of their gender. I think there is much more to explore in the

area of unstructured social leisure as opposed to the more traditional conceptions of leisure such as

sport and recreational programming participation.

5.6 Social Justice Outcomes

5.6.1 Consent

As discussed in the introduction, the Canadian Criminal Code describes consent as voluntary

agreement that cannot be obtained if a person is deemed "incapable" of making that decision

(Department of Justice, 2015). This is largely open to interpretation, as "incapable" does not come with

guidelines. While unconsciousness has been clearly identified as incapability in the case R. v. J.A. (2011),

intoxication is still debated and varies from case to case. When the victim is intoxicated involuntary,

courts tend to agree that intoxication is closely related to incapacitation (Benedet, 2010). However,

when victims are voluntarily intoxicated, the threshold for what constitutes incapacitation is much

higher (Benedet, 2010). It is important to note that the criminal justice system itself is patriarchal force

that has a long history of sexism (Scheppele, 1992). While many overt sexist laws and procedures have

been eradicated, more persistent sexist practices remain (Scheppele, 1992). A key example of this is the

persistent use of "woman-unfriendly habits" of evaluating what counts as legal evidence (Scheppele,

1992, p.125). In addition to the problematic attitudes and behaviours of police officers, the

unfriendliness of the legal system pushes victims closer to revictimization and further harm. Regardless

of how the law is used in courts, we must societally adopt and encourage a view of consent that clearly

indicates intoxication, not just unconsciousness, as incapability to consent.

5.6.2 Rape Myth Education and Male Allyship

Instead of relevant literature and facts informing predominant social attitudes and formal

service provision, rape myths are the foundation on which our societal understanding of sexual assault

rests. A consistent theme that emerges in literature is the serious influence of rape myth acceptance in

responses to disclosures and subsequent post-assault adjustment. Ideas of "ideal" or "real" rape victims

seriously damages our societal ability to combat sexual violence effectively. There exists a very strong

belief – in schools, police departments, courts, workplaces, media, etc. – that "real" victims are those

who are suddenly and violently attacked by a stranger in a deserted public place, sustaining obvious

physical injuries, immediately reporting to the police and providing clear evidence of the attack and

their resistance to it (Hockett, Smith, Klausing, & Saucier, 2016; Maier, 2008; Williams, 1984). In reality,

very few assaults actually have these characteristics (Hockett, Smith, Klausing, & Saucier, 2016). In fact,

80-90% of all reported sexual assaults against university-aged women are committed by someone

known to the victim (Fisher, Cullen, & Turner, 2000; Parrot & Bechhofer, 1991), most often in dating or

alcohol-involved circumstances (Hockett, Smith, Klausing, & Saucier, 2016; Lorenz & Ullman, 2016).

Highly troubling is the fact that those who are more likely to accept and endorse rape myths are more

likely both to be perpetrators of assault, display pro-rape attitudes and behaviours, and dismiss or

discredit disclosures of assault.

The prevalence of sexual assault has prompted the creation of many prevention programs;

however, the impact of such programs may be short-lived (Anderson & Whistson, 2005) due to the rape

culture that is deeply embedded in our society. In order to foster meaningful change, I believe that we

must involve everyone. Sexual assault as a social phenomenon is not a problem only for those who are

woman-identified; it is a deeply troubling issue that impact us all. As Shen (2011) states, "we must all take responsibility for our collective failures in prevention and prosecution of rape" (p.3). However, as has been discussed, male peers rarely respond in helpful ways to disclosures of assault because they *don't know what to do*.

Many men believe that broad, generalized approached such as media campaigns or large public events are likely to be ineffective in engaging men in meaningful or long-term ways (Casey, 2010). Most men report that implementing strategies through personal networks is the most effective approach; tailored, individual conversations with men in their existing social, family, or professional networks (Casey, 2010). Literature highlights the importance of having messengers who appeal to, are respected by, or are reflective of the men they are speaking to, so that men can "see themselves" reflected in the discussion (Casey, 2010). As such, I believe that a strengths-based approach, including men as part of the solution, rather than the source of the problem, may be most effective. Any such initiative should focus on the facts of alcohol-involved assault, Canadian consent laws, and the complex neurobiology of trauma.

5.6.3 The Role of Universities

Given the prevalence of alcohol-involved sexual assaults in student populations, universities must take an active role in addressing this issue. Survivors of sexual assault deserve far more support (both personal and academic) than what is currently available at most post-secondary institutions in Canada. Bill 132 of the Sexual Violence and Harassment Action Plan in Ontario, put into effect in 2017, requires universities to have specific policies to address sexual assault (Legislative Assembly of Ontario). While this is a needed improvement, it is hardly enough. Sexual assault support should not simply fall under the umbrella of mental health services – which is already a strained resource at many universities. The needs of survivors are complex and specific to their victimization. Mental health professionals specializing in sexual assault and trauma should be readily available for students to access. Literature

demonstrates that trauma histories have a significant impact on learning and cognitive functioning –

core components to student success (Palmer, 2013). Victims of assault should not face insurmountable

difficulties at school as a result of their victimization. Strategies for ensuring student success and a

healthy re-integration into academic life post-assault should be understood by faculty and staff, and well

supported by a robust team of sexual assault professionals (mental health, academic and legal support,

etc.). Community resources such as rape crisis centres struggle to address the needs of the permanent

residents in the regions they serve, let alone additional student populations (Ghonaim, 2019). The influx

of students accessing these services increases the pressure on already strained services. It must fall to

the universities themselves to provide the services victims need, including but not limited to 24 hour

support lines, accessible and specialized individual counselling, groups and workshops specific to

survivors, accompaniment to police, hospital, or court, information and referrals, and community-wide

education and advocacy.

5.7 Recommendations for Future Research

5.7.1 Restorative Justice

Given the hardships faced by victims who engage in the criminal justice system, further

consideration should be given to alternate forms of justice. Some victim advocates report pursuing

justice in other ways, such as in face-to-face facilitated meetings and civil cases, that brings together

victim and offender for the purposes of addressing harm, making amends, and ultimately contributing to

the victim's recovery process (Herman 1992, 2005; Jülich, 2001, 2006). These alternative routes to

reconciliation are referred to as restorative justice (Jülich & Thorburn, 2017). The idea of using

restorative justice techniques to address sexual assault has been debated, with supporters arguing that

it could offer a viable alternative to conventional criminal justice systems, and others arguing that it

would not prove effective given the power imbalance between victim and perpetrator (McElrea, 2004;

Jülich & Thorburn, 2017; Parker 2004; van Wormer 2009). Despite objections, evaluations of restorative

justice consistently have found that victims are satisfied with the process (Latimer, Dowden & Muise, 2005). Because of this, I believe serious consideration should be given to the role of restorative justice in responding to instances of sexual assault in society. Sexual crimes are notoriously difficult to secure convictions and the process is most often extremely damaging to victims (Jülich & Thorburn, 2017). Participation in restorative processes rather than traditional criminal justice systems could possibly enable earlier admissions of guilt and, by extension, enable victims the satisfaction of having their victimization acknowledged (McGlynn, Westmarland, & Godden, 2012). As acknowledgement of trauma is paramount to recovery and healing, restorative justice may have the potential to foster more positive outcomes for victims. Meaningful inquiry done in collaboration with victims is needed in this sphere to explore possibilities.

Chapter Six: Conclusion

My experience of being a victim of alcohol-involved sexual assault has provided a window through which to look through complex issues of victimization, social attitudes of sexual assault, and the neurobiology of trauma. Despite decades of research, alcohol-involved sexual assaults remain widely misunderstood by society in general. Women identified folks continue to be victimized at alarming rates, rape myths continue to dominate public discourse, people are consistently blamed for their own victimization, and justice for victims remains widely inaccessible. My findings can be summarized by one statement: there is a lack of understanding of the facts. Whether it is the facts of Canadian consent law and what constitutes sexual assault, the facts of how catastrophic the impacts of assault are on the lives of victims, the facts of the neurobiology of trauma, or the facts of what often characterizes sexual assault – in general, we as a society are not familiar with the facts. Collectively, we have the data and the knowledge we need; we are just not using it. It lives in research journals and databases for scholars to explore, rarely making its way into public consciousness.

In 2017, The Globe and Mail published a report called *Unfounded: Why police dismiss 1 in 5 sexual assault claims as baseless* (Doolittle, 2017). It was a 20-month-long investigation that included data from over 870 police forces across Canada (Doolittle, 2017). The report outlined the inconsistency of how sexual assault cases are handled across jurisdictions, illuminating the frequency of such cases being mishandled (Doolittle, 2017). We know from the 2014 General Social Survey (GSS) on Victimization that only 5% of sexual assaults in Canada are even reported to the police. With the 2018 report from the Federal-Territorial-Provincial Ministers Responsible for Justice and Public Safety, we are seeing more attention being paid to the staggering inaccessibility of justice for victims of sexual assault (Coordinating Committee of Senior Officials, 2018). This is no longer an issue that is relegated to the periphery of public discourse, but rather one of the most pressing social issues of our time.

This thesis has been a terribly long and painful process for me. Diving headfirst into my own trauma has been exhausting. Looking back, I can see two main reasons why I persevered despite the difficulty. The first is that I never got to fight for myself in any formal setting. The way in which the police constable acted led me to believe that I didn't have a case, and that there was nothing to do. I did not understand what had happened to me and neither did anyone else who I encountered. It has taken me years to put all the pieces together in order to conceptualize what happened, why it happened the way that it did, and why none of it was my fault. I have spent the past three years of my life dedicated to answering questions, some of which I did not even know I had. Why can I not remember large pieces of what happened to me? Why did I not fight back? Why did some friends not believe me? Why did others respond so apathetically? Why does this happen so often? Did I do something to cause it? Why do I believe that I did something to cause it? In researching this work, I have had so many of those questions answered for me. In writing this research up, I have been able to build a robust argument for my case – one that will not be heard in court but is being read by you.

The second reason for my perseverance is that I cannot change what has happened to me, but I may be able to change what happens to others. This thesis, and the research it draws upon, demonstrates that our social and cultural understandings of sexual assault are not based in fact, but in ill-informed opinions. It is necessary that our societal reliance on rape myths comes to an end. The thread that holds this thesis together is the underlying belief that there is hope for the future. I would not have taken the time to unearth and examine my personal trauma if I believed that sexual assault, or indeed, violence against women in general, was an inevitability of human existence. I not only believe that we *can* create lasting and systemic change when it comes to sexual violence in society, I believe we *must*.

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