

Navigating uncertainty, employment and women's safety during COVID-19: Reflections of sexual assault resistance educators

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COVID-19 affects women in ways unique to the impacts of structural inequalities related to gender, sexuality, disability, race and socioeconomic status. In this article, we reflect on our own experiences of the pandemic, as feminist students, workers and sexual assault resistance educators located in a Canadian post-secondary setting. Situating ourselves within feminist responses to sexual violence prevention, as facilitators of the Enhanced Assess, Acknowledge, and Act (EAAA) sexual assault resistance education programme for university women, we reflect on the impacts of the COVID-19 pandemic on our work as EAAA facilitators in our Canadian university. We explore the theoretical possibilities that critical disability theory and queer theory present to the EAAA programme, and argue that incorporating concepts from these frameworks will complement the goals of the EAAA programme and improve inclusivity of queer, trans and disabled participants. We conclude with a look into the future by anticipating the impacts of COVID-19 on our future work.

KEYWORDS

COVID-19, reflections, sexual assault resistance education, women's safety

1 | INTRODUCTION

Sexual violence, which we use as a comprehensive term inclusive of sexual harassment, coercion and assault, has long been regarded as a gendered issue. Preventing and responding to women's needs regarding sexual violence are

important priorities for many women and feminist activists and academics alike. Sexual violence disproportionately affects the lives of women and girls (Roze & Koss, 2001; Senn, 2015), and in Canadian statistics, it is estimated that one in three women will experience sexual violence in their lifetime (Statistics Canada, 2006). Sexual violence and other forms of violence against women continues to be one of the most prominent issues that impact the lives and wellbeing of women, girls and marginalized genders throughout the world today.

The international COVID-19 pandemic affects women and marginalized communities in ways unique to the impacts of structural inequalities. In this article, we reflect on our own experiences of the pandemic as feminist students, workers and sexual assault resistance educators in a programme called the Enhanced Assess, Acknowledge, and Act (EAAA) programme. We do this to discuss the impacts of the COVID-19 pandemic on both the issue of sexual violence and our work as resistance educators at a Canadian university. Making the most of the available time granted to us by the unanticipated situation created by the COVID-19 outbreak, we then look towards the future of the EAAA programme, both as a feminist project and as an important intervention that must adapt to meet women's needs during and after pandemic times. We include a section exploring the theoretical possibilities that critical disability theory and queer theory present to the EAAA programme, which originates in radical feminist theory, and argue that incorporating concepts from these frameworks will complement the goals of the EAAA programme and improve inclusivity of queer, trans and disabled participants. Finally, we conclude with a look into the future of impacts of COVID-19 on our work with hopes for continuing sexual assault resistance education programming.

2 | EAAA: A FEMINIST RESPONSE TO SEXUAL VIOLENCE

Increasingly, sexual violence in higher education has become a public concern, with releases of documents like, *It's Never Okay: An Action Plan to Stop Sexual Violence and Harassment* (Ontario, 2015) and *The Summary Report of the Student Voices* (CCI Research Inc., 2019) which identify that women are disproportionately exposed to sexual violence in institutions of higher education. In response to women's increased risk of sexual assault during the post-secondary setting, the EAAA sexual assault resistance education programme was developed by Dr Charlene Senn (2015) based on decades of prior feminist research on women's resistance against male violence. EAAA is a four-unit, 12-hour-long programme that addresses myths of sexual coercion and assault, educates women about their sexual rights and teaches women how to defend themselves against male attackers using effective forceful verbal and physical resistance strategies.

EAAA is the result of many years of feminist research contributions, primarily from the discipline of feminist psychology, as well as women's self-defence teachings of Wen-Do Toronto (see Nurius & Norris, 1996; Roze & Koss, 2001; Senn et al., 2015; Ullman, 1997). Developed by Dr Charlene Senn, PhD, a radical feminist researcher from the University of Windsor (Senn, 2011), EAAA is an empirically validated programme. It is supported by a randomized controlled trial of 899 first-year women attending three different Canadian universities which showed that women who completed the programme were found to be 46 per cent less likely to have experienced a completed sexual assault and 63 per cent less likely to have experienced attempted sexual assault one-year post-programme (Senn et al., 2015).

The EAAA programme is delivered into four units, usually taking place over two days or four evenings. Each unit of the programme has particular objectives which are achieved through various discussions and activities. The objectives of the first two units, *Assess* and *Acknowledge*, include recognizing risk of sexual assault for all women, understanding the differences between assault by a stranger versus an acquaintance, and overcoming emotional barriers related to identifying risk and initiating acts of resistance (Senn, 2015). The logic of *Assess* and *Acknowledge* being the first units of the programme is that with this order, women will be better prepared to actually use the self-defence strategies they learn and practice in the later units. As a programme for women, EAAA is empowering in that it provides women with tools to respond to situations that arise from no fault of our own:

We are not advocating a 'just say no' approach here – according to Koss, Dinero, Seibel, and Cox (1988), 70% of date rape victim-survivors in their sample said 'no' and physically resisted, but were raped anyway. The AAA algorithm is a way for women to have a well-rehearsed and realistic plan for using physical force when necessary to escape dangerous situations without spending time anticipating and fearing them. (Rozee & Koss, 2001, p. 300)

During the third unit, *Act*, women learn physical and verbal resistance strategies to effectively deter attackers. As part of our training to prepare to teach the *Act* unit, we, as EAAA facilitators, attended annual training with Wen-Do Women's Self-defence, an organization in Toronto, Ontario (Senn, 2015). During *Act*, participants practice strategies such as yelling, making a fist and punching, front and back kicks, elbow strikes and breaking out of body holds, and think about how they would use these moves in realistic scenarios in which a male acquaintance is becoming increasingly threatening (Senn, 2015, Unit 3: *Act*; see also Chard,).

The self-defence unit, although only a short part of the 12-hour-long programme, is based on research about how women experience and respond to violence. Women are encouraged to identify and work through their own particular barriers to resistance. The moves they learn are designed to use large body parts against smaller and more vulnerable body parts on the attacker (eyes, nose, throat, collar bone, testicles, knees, etc.) because this strategy helps resistance efforts to be effective regardless of women's physical strength (Senn, 2015, Unit 3: *Act*). The programme reinforces the belief that all women are capable of physically defending themselves, and in the *Act* unit, participants are given the tools to believe this for themselves (Senn, 2015).

The EAAA programme can be taught in its original *Assess, Acknowledge, Act* format first suggested by Rozee and Koss (2001) based on the cognitive ecological model Nurius and Norris (1996) conceptualized. But a fourth unit, *Relationships and Sexuality*, was added because the feedback Dr Senn received 'while she was developing [EAAA] reflected the fact that [women] wanted more help dealing with and resisting sexual pressure within their longer-term relationships' (Senn, 2015, Unit 4: *Relationships and Sexuality*, p. 3). This final unit 'enhances' the original AAA conceptual framework for responding to sexual coercion by providing additional activities and discussions related to women's sexual desire, communication and romantic relationships (Senn, Gee, & Thake, 2011).

The *Relationships and Sexuality* unit has particular focus on expanding women's experiences of sex from normative sex which prioritizes men's pleasure above women's and involves practices which are not protective of women's safety, towards including a range of sexual activities and language maximized for women's pleasure and comfort. According to the developer's argument for the inclusion of the enhanced sexuality unit, this education 'is critical to women's increased abilities both to seek out sex they do want and to reject and actively resist sex that they do not want' (Senn et al., 2011, p. 74). The units that comprise the EAAA programme result in an educational experience which is empowering and informative for many women, including those who are survivors of prior acts of sexual and other forms of violence.

A successful programme requires two facilitators, who work together to advertise and facilitate the EAAA programme for women students on our campus. 'We' are the authors of this article and are the facilitators of the programme at our university. As EAAA programme facilitators, we are employed by our university as casual student employees, who carry out the programme as instructed by the facilitator manuals developed by Senn (2015). We are responsible for recruiting and communicating with interested participants, setting up and taking down the programme, facilitating the programme, supporting women during the programme, and more. We are supervised by Campus Trainers who train us in facilitating the programme, provide us with meetings to plan and debrief after programme sessions, assist with any needed purchases and correspond with the programme creators. We aim to provide young women in our campus community with knowledge about how to defend themselves in potentially assaultive situations in order to reduce the risk and level of harm violence poses to women's safety and wellbeing, and to deliver Senn's (2015) feminist programme in a way that is inclusive for as many students as possible. COVID-19, though, has prevented our ability to continue our work.

3 | SEXUAL VIOLENCE AND COVID-19

The issue of sexual violence did not disappear when COVID-19 became a crisis in Canada. In fact, the social effects of pandemic times place women at an increased risk of violence, and 'mounting data suggests that domestic abuse is acting like an opportunistic infection, flourishing in the conditions created by the pandemic' (Taub, 2020, p. 1). Evidence suggests that family violence increases following large-scale disasters, and at times when families are spending increased time together, such as over holidays (Bradbury-Jones, 2020; Taub, 2020). Public health instructions to stay at home to help reduce the spread of the virus essentially asked women who live in abusive homes to stay in close proximity to an abuser for extended periods of time, and to reduce contacts outside of the home. Isolation is a risk factor for sexual violence and other forms of violence (Senn, 2015). Chances of bystander intervention are lower when women are isolated, and as women stay at home, they may have an increasingly hard time reaching out to support networks including friends, family members and crisis lines. Being laid-off, or being made to work or study from home, lowers women's connections with others and opportunities to leave abusive homes. The ability of others to observe and inquire about warning signs of abuse are reduced by physical distancing measures. A survivor needing urgent health care following physical or sexual violence may experience increased anxiety about seeking services from a hospital because of additional concerns about risk of coronavirus transmission, and may be unable to access other social services to cope with the impacts of sexual and intimate partner violence. Other infrastructural impacts of the pandemic, such as reduced public transportation service and cutbacks to social service agency hours and funding, create further barriers to accessing services.

The EAAA programme is one piece of the puzzle that coexists alongside other prevention efforts. As a programme for women, EAAA does not prevent sexual violence by educating or rehabilitating perpetrators, nor does it provide survivors with essential services, such as shelter and health care, to enhance their immediate safety. Rather, the role of EAAA, and other sexual assault resistance and self-defence education programmes such as Wen-Do, is to provide the women who voluntarily attend with information and tools that help them to identify and fight back in sexually coercive situations.

As educators who deliver an empirically tested programme (Senn et al., 2013, 2015, 2017), we know that our work is meaningful because there are now dozens of women who are better prepared to identify and respond to danger in future situations using the knowledge and skills they gained from attending EAAA training. Women who attended the EAAA programme in a controlled trial reported a significantly lower rate of completed rape than the control group, and EAAA is the only intervention of its kind that is backed by such empirical evidence (Senn et al., 2015). Furthermore, a possible secondary outcome of the EAAA programme is that women may become more knowledgeable about the reality of sexual violence and more willing to protect and support other women and sexual assault survivors in their lives.

Not only are women at increased risk and may be less likely to access support services during the current pandemic, women cannot access our educational programme in this context. As an in-person programme, EAAA relies on having a group of women in a private room for programme delivery. Small groups and pairs are used during programme activities which favour participants and facilitators being in close contact with one another. We cannot predict how long the pandemic and its physical distancing practices will continue to alter our activities. The impact of EAAA may be relatively small in scope, but it is a powerful experience for many women, and most importantly, it is a growing programme. On our campus over the past year, we noticed an increase in women's interest in the programme compared to the previous two academic years. This can be attributed to many factors, such as increased promotional efforts on our part, growing awareness about sexual violence resulting from the #metoo movement and changes within our particular campus culture. As a result of the nature of the EAAA programme being taught in a group setting and our capacities as casual contract student employees, COVID-19 effectively placed sexual assault resistance education at our university on pause. Not only do we not know when our work can resume, it is becoming increasingly clear that we cannot expect it to continue unaffected by the social infrastructural impacts of the pandemic.

4 | OUR EXPERIENCES IN-THE-MOMENT: PERSONAL NARRATIVES OF COVID-19'S IMPACT

We know that all women are strong and resilient, and will make choices that will best protect the safety of themselves and their families whilst people all around the world are confined to their homes during the COVID-19 pandemic. Education efforts, for now, are largely put on hold, and front-line services to meet the needs of women and survivors are of utmost importance. During the current stay-at-home orders and physical distancing measures, it is not possible for many prevention efforts to continue without adapting to digital spaces, a project which takes time, and uncertainty about what physical distancing measures will be in place over the next year further complicates our ability to plan for the future.

This past school year, we facilitated the EAAA programme five times. Our final EAAA session was to be held over the course of two Saturdays: 7 and 14 March 2020. On 7 March, we ran the *Assess* and *Acknowledge* components of the programme. We were looking forward to facilitating the second day on 14 March to teach the participants the necessary self-defence skills included in the programme and to work with each woman in a way which validated their own wants and needs in a romantic and/or sexual relationship. However, 14 March would not turn out the way we had planned. In this section, we turn to our own individual narratives to speak about the impact of COVID-19 on each facilitator personally.

4.1 | Margaret's narrative

On Thursday 12 March we received an email from one of our participants inquiring as to whether we still intended on carrying out the programme on Saturday. At that point, we had no university response to COVID-19, and therefore had no intention of cancelling. We did acknowledge that the world was changing quickly. 'We should send out an email if we are planning on going ahead with it', I suggested to Holly via Facebook Messenger. We then began to wonder at what point we would cancel or postpone the second day. 'I think only if the school cancels classes?' she proposed, 'if they don't then we don't have to cancel just tell people not to come if they're sick.' I responded to her in agreement, and after checking with our supervisor, we planned to continue with the programme unless the university provided any guidance otherwise.

On Friday, the next day, we planned to meet to prepare for the workshop which was to take place the following day. That morning in the gym, a usually busy place, I noticed that it was almost empty. I witnessed a person with a giant bag full of Lysol wipes walking across campus. I raised my eyebrows, sighed and thought about our programme. If the programme were to move forward, I realized it would now be much more labour intensive. We would need to reconsider the way we serve food, the cleanliness of the room we facilitate in, and how self-defence moves would be taught in a way which would not require ourselves and participants to be in close proximity and, how to teach women self-defence without using consensual physical contact for demonstrations and practices.

At 10:13 on Friday 13 March 2020, all students received an email which indicated that classes would be cancelled, and that all campus events before 30 April 2020 were to be postponed. Upon this email, we reached out to our supervisors to inquire as to whether we should postpone or cancel the programme. We received word to cancel, but were concerned about ourselves and our participants.

We now had the task of ensuring that all participants were aware that the session, less than 24 hours away, was now cancelled. My colleague sent the email which indicated we were cancelling the session and would hope to offer it again. I took the work cell phone home overnight, to follow-up with any participants who did not respond to our cancellation email by text message.

At that time, we really did not know how the situation would unfold. Holly suggested that 'if the situation has died down this week, we'll try to at least offer a day for women to finish it (but it may not work well because of exams)'. We really wanted to be able to offer women the last two units, because of the evidence-based nature of the

programme, we knew missing these two sessions would impact the programme's efficacy for the group of women (Senn et al., 2015).

In the past at our university, there have been decisions to cancel the second day of the EAAA programme due to low enrolment. Attrition is a significant barrier to successful implementation of the programme that we know women at many universities offering EAAA struggle with. One potential risk, that we try to mitigate through skilled facilitation of EAAA's activities and discussions, is that women leave the programme acutely aware of their risk of sexual assault, which they may not have been as aware of prior to attending the programme. After completing the Act unit or a Wen-Do course, the hope is that women feel confident in their ability to physically fight off attackers in future situations. However, when women attend *Assess* and *Acknowledge* and not the Act unit, this outcome may not be reached. As the days crept on, we came to understand that we would not be facilitating the second day of our programme to the participants anytime soon. Our semester was moved completely online, and restrictions were implemented by the university to limit in-person visits to campus. While our employers within the university suggested we consider an online format to complete the session, personally we were exhausted from the emotional tolls of the pandemic, our studies, our work and technically, felt unprepared to teach the content in an empirically supported manner through an online format. As a result, we were unable to complete the final EAAA session of the academic year as planned.

4.2 | Holly's narrative

Before the week of 10–13 March 2020, when the pandemic reached a level of international concern which finally began impacting my surroundings, I was almost completely unaware of the increasing risk COVID-19 posed to global public health. I remember, in January, hearing about a new virus originating in China, but I admittedly felt too far removed from the risk to pay much attention.

On Thursday 12 March 2020, upon finishing the coffee I had brought to my 08:30 lecture and deciding I needed a refill to get through the day, I was surprised that the campus Starbucks would not refill my travel cup and gave me a disposable one instead. I heard jokes made in my classes that day about the possibility of this being the last time we would meet in-person for the semester. The very next day, the university made the decision to move all classes to online for the rest of term and cancel all in-person events prior to 30 April. Margaret and I connected with our participants to notify them about cancelling/postponing the second day of the EAAA programme. By Monday, my other employer, a community recreation centre, had closed its facilities as per the City's emergency protocols to prevent the spread of the new virus. I found myself suddenly without work, and finishing the final semester of my undergraduate degree online.

It was extremely disappointing to cancel the second day of our final EAAA programme for the year. From feedback received from previous programme participants, attending only the first day can result in an overall negative experience, likely because the content of the first two units is more emotionally difficult than the last two. The physical self-defence component of the programme, arguably the most empowering part in improving women's confidence in their ability to resist potential attackers, takes place on the second day. In the past when programmes have been cancelled or postponed due to low enrolment, we have at least been able to offer women the opportunity to sign up for the next set of dates, usually occurring again within a month or two since we aim to offer two or three programmes each semester. The rapidly changing situation with COVID-19 did not allow for us to make any predictions or promises about when the second day would next be offered, and we expect the persisting uncertainty of the pandemic to continue affecting our work. At the time of writing on 13 March, we were optimistic and in our email notifying women of the cancellation, we told them that we

hope that you will be able to join us for the rest of the program or a full self-defense course at a date to be determined in the near future. We will let you know possible dates as soon as we can!

I entered university and began working with the EAAA programme while in an abusive relationship, which I left during my second year, and I now find myself graduating in the middle of a global pandemic. I am glad to be returning to school in September rather than being in a position of graduating and trying to enter the workforce in a full-time position during an international pandemic that has created massive losses in employment and increased the personal risks that front-line service providers encounter in their work. Desiring to continue my employment with the EAAA programme contributed to my motivation to stay at the same university for my Master of Social Work, but with the pandemic, I now know my work will look extremely different this year. I also recently received confirmation that my graduate classes will be delivered online, a disappointing but logical decision from the university. However, the possibility of using this unexpected time to refresh the programme for our new normal during and post-COVID to reach a wider audience makes me optimistic of the future of EAAA.

5 | THEORETICAL POSSIBILITIES AND HOPES FOR THE FUTURE OF EAAA

While COVID-19 forced us to think about the women who come to our programme and what they would miss, it also allowed us to think about the women who we could not reach because of the limited inclusivity of the programme, an issue we have constantly discussed and reflected on throughout our time working together. As passionate feminists, social work students, researchers and educators, we are highly critical of ideologies which promote oppression, violence and marginalization of any group in society. Our feminism is influenced by multiple sources, and is impacted by our social location and life experiences. For us, disability theory and queer theory are particular areas of interest. We have each grown personally and professionally from facilitating the EAAA programme, and feel privileged to be a part of the important feminist project of sexual assault resistance education. We also, however, assert that in order to continue growing and maintain relevance to post-secondary students in the current era and post-COVID, theoretical influences outside of the foundational body of feminist research should be consulted.

EAAA was developed under the research of a radical feminist who sought

to put feminist and social psychological theories into practice; to expand and reinforce young women's knowledge and skills so that they are better able to defend themselves against sexual coercion and assault by known men; and to facilitate broader social change on sexual assault at least on my own campus and city. (Senn, 2011, p. 121)

Radical feminism, founded on Marxist principles, identifies women as a subordinate class within a patriarchal society. This approach to feminism 'starts from the idea of conflict between the sexes as a fundamental conflict, and oppression against women as a direct implication of patriarchy' (Vukočić, 2013, p. 35). Wilchins (2004) critiques lesbian/feminism and radical feminism for the tendency to 'adopt ... a reflexive antagonism toward anything male, and ... to ground womanhood in the most rudimentary biological determinism' (p. 15). As a result, lesbian feminists, particularly within academia, are at times 'automatically hostile toward transgender people', and historically, 'lesbian/feminist and "radical feminist" academics' have used 'transgender men and women as examples of everything from wrong-headedness and *false consciousness* to artificiality and patriarchy gone wild' (Wilchins, 2004, p. 15; emphasis in original).

Due to the focus on a male/female sexual binary, radical feminism appears inadequate for EAAA in the present day. Increasingly, young women and feminist spaces are becoming more welcoming to gender identities and expressions outside a rigid and exclusionary definition of womanhood. We hope that future renditions of the EAAA programme will continue to adapt to the ever-changing needs of young women and marginalized folks. In this section, we introduce relevant concepts from queer theory and critical disability theory, present critiques of some aspects of Senn's (2015) programme, and suggest possible ways of increasing accessibility and inclusion of queer, trans and disabled perspectives.

5.1 | Queer theory and critical disability theory

The meaning of queer theory has taken multiple forms over time (Seidman, 1994). The term 'queer' itself can take on a broad meaning, as that which is external to the dominant normative theoretical lenses, and represents those who fall outside of a typical normative binary (Colebrook, 2009). 'Queer is by definition whatever is at odds with the normal, the legitimate, the dominant. There is nothing particular to which it necessarily refers' (Halperin, 1995, p. 62, cited in Liljeström, 2019, p. 29). Queer theory has a particular focus on identifying hegemonic power imbalances in which normalization and norms occur, and builds upon feminist theory, sexuality, gay and lesbian studies, and transgender studies (Seidman, 1994).

Queer theory questions the very meaning of sex and gender, as 'somewhere in the 18th century, sex as we know it was invented' (Laquer, 1992, cited in Wilchins, 2004, p. 78). Liljeström (2019) outlines that central focuses in queer theory include the revelation of gender and identity; the conflation between terms with gender, sex and sexuality, and the impact of this; and using queering methodologies to question sexuality and pleasure.

While there is no single way to understand and approach disability using critical disability theory (CDT), the aim of this theory, is to reinterpret what it means to be disabled, to bring the perspectives of persons with disabilities into reality and to challenge barriers to universal accessibility (Reaume, 2014). CDT analyses how societal perceptions of disability impacts equity of opportunities for inclusion, increases barriers and takes away fundamental citizenship rights from disabled peoples (Rioux & Valentine, 2006). CDT advocates for the alteration of conventional perceptions of persons with disabilities as 'pitiably, tragic victims who should adjust to the world around them', to seeing people with disabilities as equal members of society (Reaume, 2014, pp. 1248–1249). It challenges binary approaches to disabilities and the 'othering' of disabled persons (Devlin & Pothier, 2006; Vehmas & Watson, 2014).

Central to CDT is understanding how oppression of disabled people is perpetuated in society at large (Goodley, 2013). This oppression is called ableism, defined by Hodge (2013) as 'a network of beliefs, processes, and practices that cast disability as a diminished state of being human' (p. 108). Ableism is embedded in structures which assume normativity, negatively impacting persons with disabilities, making them invisible in society (Goodley, Liddiard, & Runswick-Cole, 2018). Furthermore, expectation of ability and judgement based on abilities, ingrained and overlooked in society perpetuate ableism, drive disabled persons to the outskirts of society (Goodley et al., 2018; Wolbring, 2008).

Queer studies and critical disability studies overlap and contribute to one another in that they both critique ideals of hegemonic normalcy and universal norms that exclude the atypical (Sherry, 2004). The analysis of sexuality conversations surrounding disability and sexuality further have relied on queer theory. Loeser, Pini, and Crowley (2018) identify that both disabled and queer persons, and disabled queer persons have historically been viewed as deviant. Considering this along with critiques of feminism's lack of inclusion of trans experiences, it is therefore not surprising that there are inadequacies within the EAAA programme in including queer, disabled and disabled queer persons.

5.2 | Possibilities for queer theory and critical disability theory and EAAA

Using a queer theory lens, we adopt Butler's (2004) definitions of gender for our analysis:

Gender is not exactly what one 'is' nor is it precisely what one 'has'. Gender is the apparatus by which the production and normalization of masculine and feminine take place along with the interstitial forms of hormonal, chromosomal, psychic, and performative that gender assumes. (p. 42)

We agree with Butler's (2004) identification that gender is not contingent on a binary of 'masculine' and 'feminine' and believe considering gender (as a social concept) triumphs sex (as a biological concept) in facilitating a

programme made for women (referring to the gender) such as EAAA. Within both feminism and queer theory, the relationships between gender and sexuality are complex (Liljeström, 2019). In our critique of the EAAA programme, we also

separate sexuality from gender, so that to have a gender does not presuppose that one engages sexual practice in any particular way, and to engage in a given sexual practice, anal sex, for instance, does not presuppose that one is a given gender. (Butler, 2004, p. 54)

This is imperative for an inclusive perspective on sexuality, to make all women (again, specifically referring to gender) feel safe to take our programme and represented in its content.

Since queer and trans women/folks are underrepresented in research on sexual assault, statistics referenced in the EAAA programme do not include up-to-date information on sexual violence against these communities. In one activity in the *Assess* unit, women are asked to name a group of women at higher risk for sexual assault (the suggested answers are women/girls with disabilities, First Nation, Metis and Inuit women, young women and previously victimized women) and the troubleshooting guidance provided to facilitators for when participants inquire about other racialized, gendered and sexualized social locations references 'some research [that] ... suggests that trans-individuals (trans women and trans men) are at a higher risk of sexual violence than non-trans men, but not than for non-trans women' (Senn, 2015, Unit 1: *Assess*, p. 16). Despite lacking concrete statistical evidence, this creates a hierarchy where cis women are at most risk of sexual assault, followed by trans men and women, then finally cis men. In this same activity, Senn (2015) acknowledges that disabled persons are at a higher risk of sexual violence but does not elaborate on disabled women's increased vulnerability being situated within an ableist society. By identifying this without providing more insight, visibly disabled women in the room may feel othered, or having heightened awareness of their risk of sexual assault without consol.

This activity is highly beneficial as it highlights the risks that women face, from a lens of intersectionality. A more inclusive activity, though, should recognize the failure to include statistics on other groups which may be at higher risk. Queer experiences can be included by providing statistics on estimated, likely higher, rates of sexual assault against queer and trans people, or the manual can direct facilitators to inform participants that unfortunately existing surveys fail to capture the full context of queer and trans experiences of sexual assault. To ensure that women in this activity who may fall under a group which is at higher risk do not feel ostracized, direct and in-the-moment information should be shared on why these groups may be at higher risk, and how they can decrease their disproportionate risk using the same knowledge and skills present to all EAAA participants.

In the *Acknowledge* unit, participants are challenged in various activities to put themselves into a fictitious scenario and to respond as to how the woman might be feeling and thinking, and what she could say and do in the situation. One such scenario is read out to the women about going to a bar with friends, speaking with a friend's boyfriend, when 'after chatting for about five minutes, you get up to go to the bathroom', later being pinned against the wall by the friend's boyfriend (Senn, 2015, Unit 2: *Acknowledge*, p. 19). This activity makes ableist assumptions by assuming that all participants would have the ability to 'get up' (Senn, 2015, Unit 2: *Acknowledge*, p. 19). This activity 'conforms to an aesthetics (and ontology) of normalcy – "the belief that there is an essentially correct way to have been born, look like and be"' (Darke, 2004, p. 103). It is important for participants to acknowledge their risk by putting themselves into fictitious scenarios, but the scenarios must be applicable to those who do not fit normative assumptions of gender and ability.

In an exercise intended to demonstrate that sexual assault is not the result of miscommunication (Senn, 2015, Unit 2: *Acknowledge*, p. 41), discussions about the role of alcohol also arise. In the discussion, facilitators are instructed to point out the differences in how men and women metabolize alcohol (Senn, 2015, Unit 2: *Acknowledge*, p. 42), a problematic statement when considering trans, intersex and non-binary bodies. Alcohol is said to be statistically the most commonly used date rape drug (Senn, 2015). Consistent with the information provided in the EAAA programme on alcohol, other research (Murchison, Boyd, & Pachankis, 2017) argues lesbian, gay, bisexual and

queer undergraduates use alcohol in much the same way as their heterosexual cisgender peers and it therefore contributes to sexual assault risk in a similar way. West, Graham, and Temple (2017) though propose that college students with disabilities may not participate in as many activities surrounding alcohol. These students typically do not have access to targeted alcohol and drug prevention programming (West et al., 2017). Regardless of their own relationships to alcohol use, the role of alcohol in the occurrence of sexual assault is important for all EAAA participants to know about because alcohol is present in many sexual assaults. Here, the programme content is applicable to cis women, queer and trans participants, and disabled women as long as it is delivered in a way that does not essentialize sex with gender, and negate to consider women's physical abilities.

In the third unit, *Act*, women learn physical and verbal resistance strategies to effectively deter attackers from facilitators (Senn, 2015). Queering this unit requires working to reduce the connotations of being a man with having a penis and being a perpetrator, and of being a woman with having a vagina and being at risk of sexual assault. For example, the programme should try to avoid statements that gender bodies and assume all bodies are capable of particular types of movement. In order to create a more inclusive space in *Act*, each facilitator would also require increased knowledge and training in augmenting the programme in facilitating for women of various abilities. Furthermore, when a woman is unable to complete a strategy, alternative strategies which are equivalent in purpose and effect must be shown as a complement. All women have barriers which can make them resistant to using particular self-defence moves against particular vulnerable body parts. In showing alternatives for women of a variety of abilities, such as those who may be vision-impaired, deaf or hard of hearing, have restricted mobility, all participants will have increased tools to fight off an attacker.

While the *Relationships and Sexuality* unit was added to 'enhance' the programme by giving women the ability to explore sexual desire, communication and romance (Senn et al., 2011), in a queer and CDT analysis, this unit appears the least inclusive and most normative of the programme units. The objectives of the unit, however, are rich in connections to queer theory and CDT's interrogation of normalcy, and focus on inclusive pleasure, desire and sexual freedom. If 'emancipatory sexuality education is protective for women [because] it challenges the male focus presumed in normative heterosexual interactions and scripts that support rape' (Senn et al., 2011, p. 84; see also Gavey, 2005), it therefore also holds potential to be empowering for queer, trans and disabled participants.

For example, a discussion in the *Relationships and Sexuality* unit, called *Expanding Notions of Having Sex*, aims to provide participants with knowledge about what 'having sex' means, broadening sex from meaning only penetrative penis-in-vagina intercourse, to a variety of potentially pleasurable sexual activities including oral and anal sex and mutual masturbation (Senn, 2015, Unit 4: Relationships and Sexuality, pp. 17–18). In this discussion, women are asked to define 'having sex' and 'sexual intercourse' (Senn, 2015; Unit 4: Relationships and Sexuality, p. 14). Senn (2015) then proposes the idea of 'consummative interpersonal sexual behaviour', referring to 'sexual activity that is potentially orgasmic' (Senn, 2015, Unit 4: Relationships and Sexuality, p. 15). Next, women are asked to come up with a list of 'consummative interpersonal sexual activities' in addition to vaginal intercourse. This broadening of sex from a narrow heteronormative definition that suppresses women's sexual desire and advances men's perpetration of sexual violence is important because of the insidious ways 'everyday taken-for-granted normative forms of heterosexuality work as a cultural scaffolding for rape' (Gavey, 2005, p. 2). However, ableist and heteronormative assumptions likely cause the activity to fall short of meeting its goals for all participants.

The idea of broadening what sex itself means is in alignment with queer conceptualizations of sex and desire and disrupting heteronormativity. However, while brainstorming sex acts, participants are asked to label people, based on body parts, as male or female, by describing the possible 'consummative interpersonal sexual' acts they suggest as occurring between female–female, male–male or male–female pairs (Senn, 2015, Unit 4: Relationships and Sexuality, pp. 16–17). Some limited information on considering trans people in this discussion of sexuality is included in the troubleshooting information for facilitators (Senn, 2015, Unit 4: Relationships and Sexuality, p. 16), but according to the instructions, trans and non-binary people should only be mentioned if a participant asks. Further work on specifically including trans people and their partners in this discussion is necessary in order to meet the objective of providing all participants with greater knowledge about their comfort with different words used for sexuality.

From a CDT lens, not only does this activity make assumptions surrounding what gender does what 'types' of sex, but it is potentially ableist. While this activity identifies that there are diverse ways in which 'people may experience pleasure and intimacy that is not necessarily genital-centric'(Loeser et al., 2018, p. 265) it reduces the wider conceptualizations of sex by disability advocates into a category called 'third-norm activities' (Senn, 2015, Unit 4: Relationships and Sexuality, p. 18), meaning any sex without intercourse. This term, which attempts to provide young people with an option beyond sex with a condom or no sex, is a potentially stigmatizing term for disabled folks. Furthermore, the activity gives no facilitator guidance on the inclusion of objects such as sex toys and personal supportive equipment which can enhance a disabled persons sex life. Naphtali, MacHattie, and Elliott's (2017) *Pleasure ABLE Sexual Device Manual for Persons with Disabilities* identifies that disabled persons can have motor and autonomic dysfunctions, impacting their sexuality, and that sexuality for disabled people must require increased creativity, individual to the persons who are engaging in the action. Furthermore, Loeser et al. (2018) argue,

Sex, sexuality, desire, and pleasure for people with disabilities can be experienced in and across multiple zones of the body, resulting in different understandings and knowledge of what sex and intimacy 'is' and 'can be', differing in spaces and contexts. There is a clear need for creative methodologies and methods that can help articulate and envisage more fluid, open sexual desires, practices and pleasures beyond heteronormative genito-centric thought. (p. 265)

Breaking the myth that disabled persons are unable to engage in sex is essential for this unit to be inclusive of women with disabilities rather than perpetuating ableist beliefs, and a small reference to a guide such as this can help women and their potential partners of all abilities engage in consensual, safe and fun sex. Therefore an expanded notion of sex is needed in order to increase the inclusivity of the programme for women of various abilities and for women who are in relationships with disabled persons.

After the *Expanding Notions of Having Sex* activity, EAAA participants individually complete a continuum sheet indicating their desire or potential desire to engage in different intimate and sexual activities with someone else. They are then invited to share any reflections on the experience of noting their interest in doing particular things and with whom. Activities range from sexual acts (oral, vaginal and anal sex) to other activities including, giving/receiving a massage, reading erotica and skinny dipping (Senn, 2015, Unit 4: Relationships and Sexuality, pp. 13–15). Making this exercise more inclusive may only require a few relatively small changes, such as to a few instances of gendered language about body parts, including discussions of objects that increase sexual pleasure and access, and adding a few more possible sexual activities, including those that do not require a normative body or normative body movement patterns. In this activity, many sexual possibilities are omitted, even though as noted above, one goal of the *Relationships and Sexuality* unit is broadening participants' conceptualization of what having sex means (Senn, 2015). These activities should account for a wider range of possible sexual acts, particularly those most relevant to queer and disabled sex.

6 | CONTINUING THE PROGRAMME IN/AFTER PANDEMIC TIMES

As facilitators of an evidence-based sexual assault resistance education programme which can no longer be approached in its traditional form, we now have an opportunity to improve the accessibility and inclusivity of the programme to a wider and more diverse audience of women. With increasing awareness that things will not 'return to normal' as we knew it before the pandemic struck, we are now considering how to get the programme content across to participants while maintaining physical and social distancing. We are hopeful that the creators of EAAA are working on an online programme, but do not know if, or when, such a programme would be made available.

There are many unknowns that complicate planning ahead for the 2020–2021 school year. Our university has moved the Fall 2020 semester online. Carrying out our traditional recruitment strategies, such as visiting first-year

lectures to talk about our programme, will be impossible. If we are permitted to continue the programme with in-person delivery, we fear that students will not be living on/near campus, hindering their ability to attend the sessions.

One such solution we have investigated includes facilitating EAAA through a web-based approach. A meta-analysis supports the use of web-based instruction: as many different tools can be used, including text, audio, graphics, synchronous and asynchronous communication. This can provide a universal approach to learning (Sitzmann, Kraiger, Stewart, & Wisher, 2006). The internet is commonly used for university students to gain beneficial sexual information (Boies, 2002), and web-based approaches have been investigated in their usefulness for an sexually transmitted infection (STI) and HIV intervention for youth (Shoveller, Knight, Davis, Gilbert, & Ogilvie, 2012). Furthermore, Mustanski, Greene, Ryan, and Whitton's (2015) investigation of Queer Sex Ed through an online format was highly satisfactory for LGBT (lesbian, gay, bisexual and transgender) youth participants who completed the programme, and youth increased their knowledge about sexual functioning, HIV and STIs, contraceptives, sexual orientation and relationships. We are hopeful that if we pursue facilitating sexual assault resistance education in an online format that we can increase the capacity and accessibility of our programme.

Unfortunately, because EAAA has been empirically supported as an in-person programme with interactive components that are necessary to its delivery, the programme would no longer be evidence-based if hastily moved to a digital platform. We would be unable to do certain activities, and may need to consider privacy and security of participants in a more complex way. Women in unstable home environments may be unable to consume the content, and web security will need to be explored. Furthermore, online formats have been identified as missing social components that are usually gained in an in-person experience. This may decrease learning outcomes (Richardson, Maeda, Lv, & Caskurlu, 2017; Shoveller et al., 2012). We may find ourselves unable to support participants' emotional needs and to create a supportive environment for all women in the programme.

Another potential option for facilitation we have explored, if social distancing guidelines permit us to do so, is to offer private group sessions to small, pre-established groups of women. Pre-established groups, such as women's clubs, sports teams and sororities, can contact us to set up a private session for their group only. This approach reduces administrative work for us as facilitators, ensures attendance and promotes strong connections between participants. Furthermore, this allows participants to reduce the amount of new in-person contacts they make with others. However, this approach may not be the most inclusive, unless we specifically target broad ranging and intersectional groups which include or are made up of diverse women. Women who are isolated or who do not have pre-established connections, though, will be missed.

Even with much of university life being hosted online, and COVID-19 taking a lot of space within people's lives, sexual violence has not gone away. There remains a need for EAAA or a similar sexual violence prevention education programme in the university setting to ensure that women know their risk of assault, and can build their confidence to fight off attackers.

7 | CONCLUSIONS

It is becoming increasingly apparent that within this pandemic, social issues which were once prioritized are becoming harder to address. Much like sexual assault, the COVID-19 pandemic disproportionately affects marginalized communities in ways unique to the impacts of structural inequalities related to gender, sexuality, disability, race and socioeconomic status. As feminist students, workers and sexual assault resistance educators we have been impacted uniquely by this pandemic. Our precarious work is more precarious than ever. Our ability to support and empower women has become complicated by issues of outreach, access and the lack of empirical evidence. Using theoretical positions of critical disability theory and queer theory, we hope that the future of EAAA and other sexual assault resistance education programming can address the issue of inclusivity of queer, trans and disabled participants. In this way, a pandemic which has evidently caused harm, can also provide an opportunity for

wide-scale improvement, allowing social structures to adapt to new ways which embrace broader diversity and inclusivity.

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DECLARATION OF CONFLICTING INTERESTS

The authors declare no conflicts of interest.

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