

# Consent Across the Spectrum: Comparing Queer and Cis-Heterosexual Approaches to Sexual Agreement

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## ABSTRACT

This study explores how sexual consent attitudes differ across gender identities and sexual orientations in Germany. Using a German version of two scales from the Sexual Consent Questionnaire by Humphreys and Herold (2007) and a third newly developed scale on consent negotiation tactics, data from 399 diverse online participants were collected. Results show that cisgender men find asking for consent less important (scale 1), are more likely to believe that the length of a relationship reduces the obligation to obtain consent (scale 2), and tend to normalize persuasion tactics (scale 3), compared to transgender, intersex, non-binary, and other (TIN) individuals and cisgender women. Between heterosexual and non-heterosexual participants, differences were only found on scales 1 and 3, but not on scale 2, suggesting that the attitude related to relationship length may be generally accepted across all sexual orientations, but not across all gender identities. These findings highlight how consent norms are reinterpreted across different identity groups and emphasize the need for inclusive sexual health education. Extending Humphreys' work beyond North American heterosexual samples, this research contributes culturally and intersectionally nuanced insights to the global understanding of sexual ethics.

## 1. Introduction

Communicating with each other is fundamental to recognizing the desires and boundaries of others and expressing one's own needs. Therefore, (verbal and non-verbal) communication is essential in many areas of life. The communication regarding consent to engage in sexual activities is referred to as sexual consent (Popova, 2019). A common definition of sexual consent is that its development involves two stages: (1) a mental process of decision-making and (2) verbal, non-verbal, or physical actions, which serve to give the agreement to sexual activity and permission for sexually explicit conduct (Gruber, 2022). In consensual sex, the mental process and the physical actions are in harmony (Prieto & Moyano, 2024). Sexual consent is of utmost importance because if sexual activities are not consensual, this constitutes sexual harassment, coercion, or even rape (Anyadike-Danes et al., 2024).

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Research on sexual consent has been shaped by various social movements and legal frameworks and has evolved significantly over time (Webber et al., 2024; Hinds, 2023; Torenz, 2021). Initially, sexual consent was often understood in a very simplified manner, emphasizing a binary nature of (dis)permission and focusing on binary genders (Hattery Freetly & Kane, 1995). Furthermore, in the early years, a large portion of the research was conducted with heteronormative student samples (Anyadike-Danes et al., 2024; Hirsch et al., 2019; Jozkowski & Wiersma, 2015; Jozkowski et al., 2014; Jozkowski, 2013; Jozkowski & Peterson, 2013; Hickman & Muehlenhard, 1999; Hall, 1998). Consequently, assumptions about sexual consent have been predominantly shaped by heteronormative perspectives, potentially leading to the indirect exclusion or marginalization of individuals who do not identify as cisgender and heterosexual.

Even though verbal consent in particular is perceived as a clear sign of consent by both heterosexual (Hickman & Muehlenhard, 1999) and non-heteronormative couples (Beres, 2022), these findings should not lead to inaccurate generalizations, as the concept of sexual consent is perceived differently in heterosexual and homosexual encounters (Kirkpatrick et al., 2025; Sternin et al., 2022). Furthermore, nonverbal behaviors are used significantly more often than verbal behaviors to indicate consent in same-sex relationships (Beres et al., 2004). Research has shown that consent to sexual activities among gay, bisexual, and queer men (GBQM) is more often given passively (Daroya, 2022), and LGBTQ men also appear to have developed unique sexualized scripts to communicate consent non-verbally (Webber et al., 2024). In addition to the self-assessed violation of male gender roles and sexual scripts, this is probably one of the reasons why gay men in particular are less likely to ask for sexual consent with new partners and hesitate longer (Jordan, 2022).

### **1.1 Sexual Script Theory**

Sexual Script Theory (Simon & Gagnon, 1986) can serve as a foundation for a more detailed consideration of sexual consent in queer relationships. This theory was developed to account for the fact that sexual behavior is considerably more complex than can be explained by instinct theories alone (Ramos, 2024). Sexual Script Theory aims to analyze, evaluate, and explain behaviors within the context of sexual encounters using cognitive models. The foundational assumption of the theory is that individuals need to be able to assess which situations qualify as sexual and how to behave in such situations in order to participate in them (Sternin et al., 2022). According to this perspective, sexual behavior is not determined by innate biological factors but is instead guided by scripts that individuals acquire through socialization and culture. This enables individuals with the same socialization history to recognize sexual situations and respond appropriately. These scripts operate on three levels: “cultural, interpersonal, and intrapsychic” (Humphreys, 2000, p. 15). Simon and Gagnon (1986) viewed sexual scripts as intertwined with gender-specific, cultural, and interpersonal scripts. Sexual Script Theory posits that these scripts influence the perception and communication of, and about, sexual consent. Research has confirmed many hypotheses consistent with Sexual Script Theory: For example, implicit consent is more often assumed in established relationships (Humphreys & Herold, 2007; Humphreys, 2004), and "double standards" regarding sex – such as different expectations for men and women – still persist (Londo, 2017). Further confirmation that the applicability of heteronormative scripts to members of sexual minorities and people in same-sex sexual relationships may be inappropriate is evident in the fact that gender and sexual minorities (GSM), women and non-binary individuals report higher levels of sexual consent supporting attitudes measured with a scale loosely based on Humphreys revised Sexual Consent Scale (Glance & Kaufman, 2020). Furthermore, a qualitative study has shown that non-heterosexual men differ from

heterosexual men in terms of their perception of negotiating sexual consent (Sternin et al., 2022) and that salient indicators of consent of sexual and gender minority students were primarily verbal communication, with more specific forms of verbal communication also present (Griner et al., 2021).

## 1.2 Research Question

Unfortunately, most research on Sexual Script Theory – and on sexual consent more broadly – has mainly focused on heterosexual, cisgender people in North America. This includes the widely used Sexual Consent Questionnaire by Humphreys and Herold (2007). With the present study, we explore whether the construct of sexual consent is applicable to a German sample and to what extent attitudes and behaviors concerning sexual consent vary depending on gender identity and sexual orientation, thereby filling two research gaps: The cross-cultural replicability of sexual consent scales and their application to more diverse populations.

## 2. Materials and Methods

The Sexual Consent Questionnaire (Humphreys & Herold, 2007) aims to assess attitudes and behaviors regarding the negotiation of sexual consent among heterosexual romantic partners and consists of a Sexual Consent Attitude Scale (21 Items) and a Sexual Consent Behaviors Scale (9 Items). The original questionnaire was administered to Canadian heterosexual students and later versions were validated using the same population (Humphreys & Brousseau, 2010). The development of a German version of a part of the Sexual Consent Questionnaire (Humphreys & Herold, 2007) involved a careful adaptation process of the two factors comprising the Sexual Consent Attitude Scale (*asking for consent first is important* – 14 items, example item: When initiating sexual activity, one should assume no sexual consent and verbally ask for it before proceeding with any sexual activity. – and *commitment reduces asking for consent* – 5 items, example item: The necessity of asking for sexual consent DECREASES as the length of an intimate relationship INCREASES.) that considered cultural and linguistic variations.

To ensure that the content remains valid and comprehensible for the target population the items were not supplemented or changed in terms of content. This included tailoring the language used in the questionnaire to align with the specific cultural context of German-speaking participants. In order to meet the need for culturally relevant adjustments in different population groups and to supplement Humphreys' concepts, a third self-developed scale (*convince to consent* – 4 items) was added (example: I have asked my partner repeatedly about sexual activities, even though he/she said 'no' the first time.; for the full scale, see appendix). These adjustments were considered crucial to ensure that consent processes were consistent with the values and beliefs of participants across different backgrounds.

The items of the two Sexual Consent Attitude subscales (Humphreys & Herold, 2007) were translated from English to German and back using the online tool *DeepL* and the function it contains to find synonyms with the participation of a bilingual expert in the field of sexual consent. All items in their English original and the German translation can be found in Table 4 in the appendix.

For the third scale, a pool of items was created from literature and questionnaires that attempt to capture sexual persuasion tactics (Krahé, et al., 2016; Snell Jr, Fisher, & Miller, 1991; Koss et al., 1987), and then items with the same content were sorted together using card

sorting (Rugg & McGeorge, 1997) at an expert workshop (3 people with a master's degree or higher). Through consensus discussion, 4 items (see appendix) were ultimately selected.

Content validity of the revised instrument was assessed through two cognitive interviews, one expert review, and a content pre-test with ten participants to improve the clarity and cultural appropriateness of the questions, to ensure that they are understandable and meaningful to the general population (Sharma & Ruikar, 2025; Taherdoost, 2022).

A data protection-compliant online questionnaire (SoSci Survey; Leiner, 2023) was used to reach a broad and diverse sample. The link and QR code were distributed via social media (Facebook, Instagram, WhatsApp) and flyers. Data collection took place from 9 July to 4 October 2023. At first, participants had to read through information about the content of the questionnaire and give their informed consent. In addition to the 23 questions used to assess the three consent scales, which were answered on a 7-point Likert scale (1 *strongly disagree* to 7 *strongly agree*), participants were also asked to provide demographic information. A total of seven questions were asked: gender identity (options: *female, male, diverse, non-binary, non-binary female presenting, non-binary masculine presenting, other*), age, sexuality (options: *lesbian, gay, queer, heterosexual, asexual, bisexual, pansexual, other*), formal education (options: *school pupil, left school without qualifications, secondary school certificate, intermediate school leaving certificate, technical college entrance qualification, A-levels, university degree, other*), current relationship status (options: *single, dating one person, dating multiple people, in a committed relationship with one person, polyamorous, cohabiting, married*), where the person grew up (options: *rural, urban, large city, other*) and religious affiliation (options: *Catholic, Protestant, Jewish, Muslim, other, none*). For all *other* answers, there was an open input field in case the participants chose to elaborate further.

Apart from voluntary participation and informed consent, no additional inclusion or exclusion criteria were defined. However, on the first page of the questionnaire (introduction), there was a trigger warning, as sexuality is a sensitive topic, as well as information that the survey is targeted at people who already have sexual experience.

### **3. Results**

The questionnaire was accessed 1,245 times during the survey period, 399 people completed at least part of it and 203 people completed it in full. Of the 399 people who completed at least part of the questionnaire, 211 identified as female (52,9%), 106 identified as males (26,6%) and 37 identified as TIN (trans, inter or non-binary, 9,3%). 45 answers were missing (11,3%). The average age was 25.60 years ( $SD = 7.72$ ;  $N = 350$ ). With regard to sexual orientation, 214 respondents identified as heterosexual (53,6%) and 138 respondents identified as non-heterosexual, thereof 52 identified as bisexual (13,0%), 42 as queer and pansexual (10,5%), 27 as homosexuals (6,8%), 8 as asexual (2%), 9 as "other" (2,3%) and 47 persons did not answer the question (11,8% missing). Further demographic information can be found in Table 1.

Persons who have not specified their gender or sexual orientation (missing data) were not included in the corresponding analyses. Consequently, data from 354 individuals (211 women, 106 men, 37 TIN) could be analyzed for gender differences, and data from 352 individuals for sexual orientation (see details on heterosexual and non-heterosexual preferences). Potential biases resulting from the exclusion of non-respondents were assessed using an independent samples t-test. No differences were found with respect to age ( $p = .745$ ), education ( $p = .492$ ), employment ( $p = .136$ ) and relationship status ( $p = .129$ ), place of upbringing ( $p = .462$ ), or religious affiliation ( $p = .241$ ).

*Table 1: Responses of respondents to questions about educational background, relationship status, where they grew up, and religious affiliation in absolute numbers and percentages*

	<b>Answers to demographic questions in numbers and percentages</b>	
	<b>n</b>	<b>%</b>
<i>Education</i>		
School pupil	27	6.8
Secondary school certificate	5	1.3
Intermediate school leaving certificate	29	7.3
A-levels	149	37.4
University degree	127	31.8
Other	15	3.8
Total	352	88.4
<i>Relationship status</i>		
Single	147	36.8
Dating one person	22	5.5
Dating multiple people	7	1.8
Committed relationship with one person	85	21.3
Polyamorous	7	1.8
Cohabiting	60	15.0
Married	20	5.0
Other	5	1.3
Total	353	88.5
<i>Grew up</i>		
Rural	111	27.8
Urban	110	27.6
Large city	127	31.8
Other	5	1.3
Total	353	88.5
<i>Religious affiliation</i>		
Catholic	38	9.5
Protestant	67	16.8
Muslim	3	0.8
Other	11	2.8
None	231	57.9
Total	350	87.8

*Note: Answer options included in the questionnaire that were not selected by any respondent are not shown in the table (e.g., left school without qualifications).*

All analyses were conducted with IBM SPSS Statistics (Version 30).

### 3.1 Psychometric Characteristics of the Three Scales

To assess the factorial validity of the three scales (*asking for consent first is important*, *commitment reduces asking for consent*, and the newly developed *convince to consent*), principal axis factoring with promax rotation ( $\kappa = 4$ ) was conducted after the response values for negatively worded items (reversed items; see items marked with an \* in Table 4 in the appendix) were reversed. The number of factors was fixed at three, consistent with the intended conceptual structure. Initial analyses revealed good internal consistencies (Cronbach’s  $\alpha = .840, .702$  and  $.705$ ) but a poor factorial structure with low communalities, substantial cross-loadings, and weak factor loadings for several items. In response, items were excluded iteratively across successive EFA runs based on the joint consideration of low communalities ( $< .25$ ), weak primary loadings ( $< .50$ ), and salient cross-loadings, alongside conceptual fit with the intended scale.

Through this process, 12 of the initial 23 items were removed (one from *convince to consent*, two from *commitment reduces asking for consent* and nine from *asking for consent first is important*) to improve model clarity and structure. The final 11-item solution yielded good psychometric results: all factor loadings exceeded  $.55$  (except for one cross-loading at  $.339$ , see Table 5 in the appendix for all loadings), the Kaiser-Meyer-Olkin measure was  $.771$ , and Bartlett’s test of sphericity was significant,  $\chi^2(55) = 636.33, p < .001$ . The three extracted factors explained 60% of the total variance and aligned well with the intended conceptual dimensions. Reduced scales had sufficient internal consistency (Cronbach’s  $\alpha = .770, .702$ , and  $.712$ ), the means were not normally distributed. Because the scale scores were ordinal and not normally distributed, group differences were tested using rank-based, non-parametric procedures (Kruskal–Wallis for comparing women, TIN respondents and men, and Mann–Whitney U tests for comparing non-/heteronormative individuals), which operate on ranks and therefore do not assume interval-level measurement or normality. However, in-depth analyses showed that internal consistencies differed somewhat between the subgroups (e.g., heterosexual and non-heterosexual individuals; see Table 6 in the appendix). An overview of Cronbach’s  $\alpha$  coefficients for various scenarios – including when individual items were omitted – can be found in Table 7 in the appendix.

### 3.2 Results by Gender Identity

On the first scale (*asking for consent first is important*), there was a significant difference (Kruskal-Wallis-Test) by gender,  $H(2) = 22.997, p < .001, \epsilon^2 = .068$ . The following groups still differed significantly after Bonferroni correction: males and females ( $p < .001$ ) and males and TIN ( $p < .001$ ). The difference between females and TIN individuals was not significant,  $p = .265$  (see Table 2 and Fig. 1).

Table 2: Mean values, standard deviations and subsample group sizes ( $n$ ) for the three scales (Scale 1: *asking for consent first is important*, Scale 2: *commitment reduces asking for consent*, Scale 3: *convince to consent*) divided by gender identity

	Scale 1			Scale 2			Scale 3		
	<i>M</i>	<i>SD</i>	<i>n</i>	<i>M</i>	<i>SD</i>	<i>n</i>	<i>M</i>	<i>SD</i>	<i>n</i>
Females	5.61	.97	150	4.52	1.39	149	2.11	1.12	128
Males	5.02	1.14	78	5.07	1.30	78	2.86	1.51	67
TIN	5.87	1.25	25	4.32	1.25	25	1.81	1.16	18

Note. Scale 1 = *asking for consent first is important*; scale 2 = *commitment reduces asking for consent*; scale 3 = *convince to consent*.

There was a significant difference on the second scale (*commitment reduces asking for consent*),  $H(2) = 9.611$ ,  $p = .008$ ,  $\epsilon^2 = .032$ . After Bonferroni correction, the significance levels were as follows:  $p = .018$  (females and males),  $p = .049$  (TIN and males) and  $p = 1.000$  (females and TIN).

On the third scale (*convince to consent*), the Kruskal-Wallis-Test showed that there are significant differences  $H(2) = 15.796$ ,  $p < .001$ ,  $\epsilon^2 = .075$ . The adjusted significance levels (Bonferroni correction) were as follows:  $p = .664$  for TIN and women,  $p = .005$  for TIN and males,  $p = .002$  for men and women. Consequently, female and TIN individuals agree more strongly than males with the notion that it is important to ask for consent (scale 1), while male participants are more likely to believe that the need to obtain consent decreases with the duration of a relationship (scale 2) and tend to agree that convincing someone to consent is acceptable (scale 3).

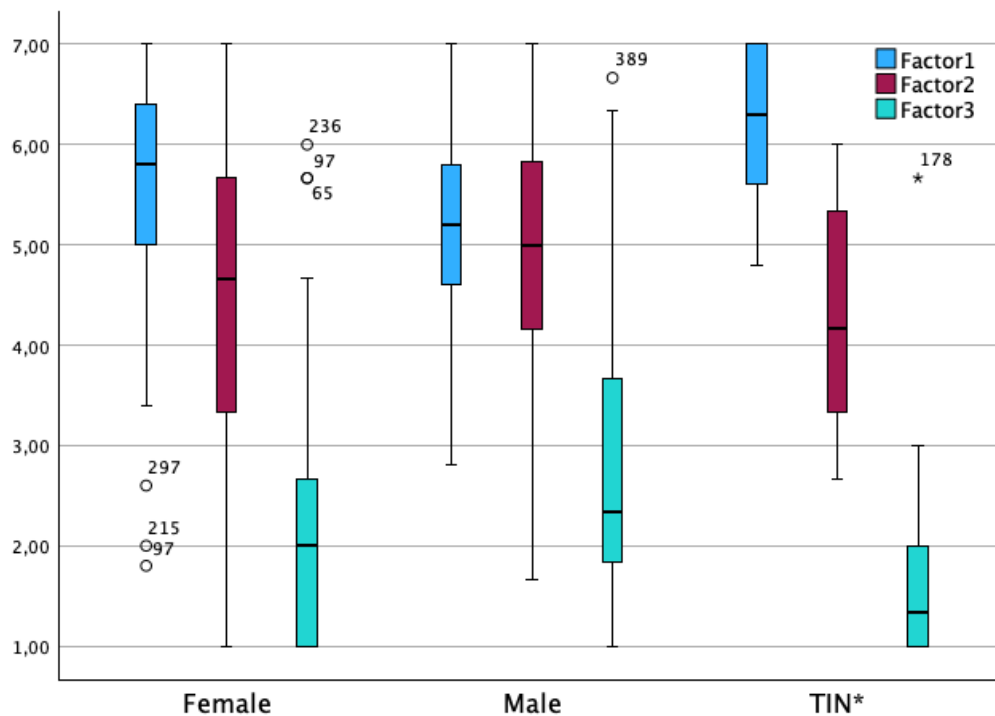


Figure 1: Boxplot of the distributions of responses on the three scales (response options from 1 “strongly disagree” to 7 “strongly agree”) divided by gender identity

### 3.3 Results by Sexual Orientation

In the scores on the first scale (*asking for consent first is important*), there was a significant difference (Mann-Whitney-U-Test) between the mean of heterosexual individuals and the mean of non-heterosexual individuals,  $U(155, 98) = 5527.00$ ,  $z = -3.586$ ,  $p < .001$ ,  $r = .225$ . On the second scale (*commitment reduces asking for consent*), there was no significant difference between the groups,  $U(154, 98) = 7854.50$ ,  $z = .548$ ,  $p = .583$ ,  $r = .034$ . In addition, there was a significant difference between the mean of heterosexual individuals and the score of non-heterosexual individuals (see Table 3 and Fig. 2) on the third scale (*convince to consent*),  $U(135, 78) = 6279.50$ ,  $z = 2.366$ ,  $p = .018$ ,  $r = .162$ .

Table 3: Mean values, standard deviations and subsample group sizes (n) for the three scales (Scale 1: asking for consent first is important, Scale 2: commitment reduces asking for consent, Scale 3: convince to consent) divided by sexuality

	Scale 1			Scale 2			Scale 3		
	M	SD	n	M	SD	n	M	SD	n
Heterosexuals	5.28	1.06	155	4.70	1.42	154	2.48	1.36	135
Non-Heterosexuals	5.71	1.10	98	4.62	1.30	98	2.04	1.16	78

Note. Scale 1 = asking for consent first is important; scale 2 = commitment reduces asking for consent; scale 3 = convince to consent.

Consequently, non-heterosexual individuals consider it more important to ask for consent (scale 1), while heterosexual participants consider it more acceptable to convince someone to a sexual encounter (scale 3).

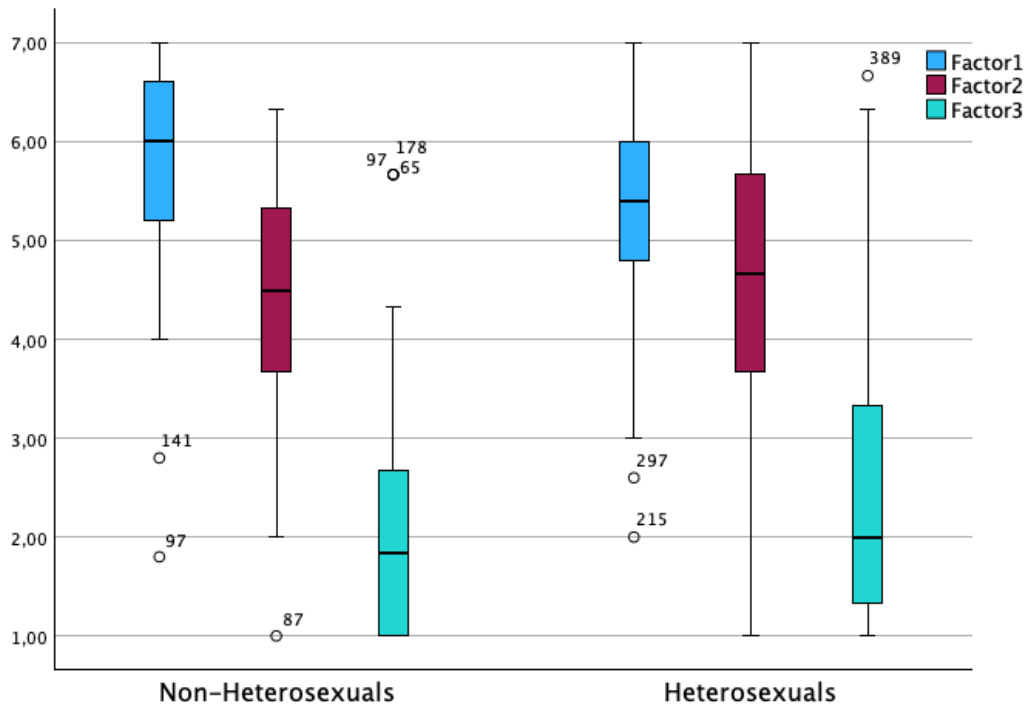


Figure 2: Boxplot of the distributions of responses on the three scales (response options from 1 “strongly disagree” to 7 “strongly agree”) divided by sexuality

## 4. Discussion

### 4.1 Summary and Interpretation of Results

To summarize, queer and TIN participants as well as cisgender women assessed *asking for consent first* as more important than heterosexual participants and cisgender men. While prior studies emphasize the prevalence of nonverbal or passive consent in queer sexual encounters (Beres et al., 2004; Daroya, 2022), our results suggest that explicit consent is nonetheless valued more highly among queer and TIN individuals as well as women at the attitudinal level. In turn, more normative – heterosexual participants and cisgender men – respondents agreed more with *convince to consent* tactics which conversely could reflect internalized norms about sexual initiative and traditional gender roles. This result is in line with enduring gendered sexual scripts and double standards documented in heterosexual contexts (Humphreys & Herold, 2007; Londo, 2017; Clark & Hatfield, 1989). With regard to attitudes

that *commitment reduces asking for consent*, no statistically significant group differences emerged between heterosexual and non-heterosexual participants but cisgender men agreed more with this notion than cisgender women and TIN individuals. This result could mean that these beliefs are held more broadly across different identity groups and are in line with other research results (Righi et al., 2019). Effect sizes for the significant group differences ranged from small to medium, suggesting that while attitudes (and potentially behaviors) regarding sexual consent are shaped by gender identity and sexual orientation, the strength of these associations varies.

Exploratory follow-up analyses (pairwise comparisons) revealed that the significant differences on the scale *asking for consent first is important*, the scale *commitment reduces asking for consent* and the scale *convince to consent* were all due to differences between those identifying as male vs. all other gender identity groups. Similarly exciting findings emerged from exploratory follow-up analyses on sexual orientation: the significant differences on the first scale (*asking for consent first is important*) were due to differences between heterosexual vs. bisexual, pansexual and other-identifying individuals. Furthermore, there were differences on the first scale between those who identified as gay on the one hand and those who identified as queer, pan and other which seems especially interesting: differences between sexual orientation categories were not uniform which suggests that queerness is not a monolithic category (see also Worthen, 2022). The significant differences on the third scale were due to differences between heterosexual vs. bisexual individuals. But no statistical significance emerged due to Bonferroni corrections and partially too small subsample sizes.

#### **4.2 Theoretical Implications**

Our findings support the core assumptions of Sexual Script Theory, namely that our identity, socialization and context shape how we understand and practice sexual consent – our data most directly reflect intrapsychic and cultural scripting processes, but not interpersonal dynamics such as non-verbal negotiation. The results also call for intersectional models of consent that should account both for gender and sexual diversity (see also Beres, 2022; Cassar, 2025). Interestingly, our results highlight that queering sexual consent does not necessarily mean to subsequently reject all normative elements: New norms can also emerge within LGBTQIA+ communities. One new norm could be that asking for consent is seen as imperative in queer and TIN communities. However, being in a committed romantic relationship reduces asking for consent in those communities as well which implies that more traditional relationship scripts persist in more progressive groups as well.

#### **4.3. Strengths and Limitations**

Our study marks the first known German-language replication of the Sexual Consent Questionnaire (Humphreys & Herold, 2007) in a diverse sample. While the initial translation of the scale items was conducted using DeepL, all items were subsequently reviewed and refined by native speakers with expertise in psychological research. Nonetheless, the lack of a formal forward–backward translation process constitutes a limitation and may affect linguistic equivalence. Our inclusion of a third scale that captures normative and coercive sexual persuasion tactics adds not only conceptual but also practical value. Our use of inclusive demographic categories for gender identity and sexual orientation goes beyond the binary and allows for nuanced subgroup analyses. In addition, our study and results have high practical relevance for sexual education, prevention and LGBTQIA+ outreach programs in Germany.

As our sample was self-selected the study lacks generalizability as some political and or psychosocial self-selection biases are likely. Furthermore, the sample is younger, more urban in comparison to the general population, and has a higher-than-average level of education. Our subsample sizes were partially small (especially TIN individuals; N = 25) which limits statistical power. Our Bonferroni corrections for multiple comparisons may have masked real effects. Although the EFA confirmed a three-factor solution broadly aligned with the intended conceptual structure, the item composition – particularly for the first scale, from which nine items were removed – deviated from the original questionnaire. The full German version therefore requires further validation through confirmatory factor analysis and comprehensive psychometric testing including measurement invariance testing in future research.

Since sexuality is a sensitive topic, it is plausible that social desirability bias may have occurred. Furthermore, it is possible that participants who provided responses perceived as particularly socially undesirable did not disclose their demographic information and were consequently excluded from the analysis. As a result, the collected data might potentially reflect an overly positive self-perception. Future studies should employ methods designed to reduce or detect this bias.

#### **4.4 Future Directions**

Future research should aim to replicate our findings with a larger and more balanced sample, especially regarding TIN and non-heterosexual populations. Longitudinal (preferably dyadic) designs could shed light on how consent dynamics evolve over time and in romantic relationships. In addition, future studies might explore how consent is understood and communicated in contexts that remain underexamined, such as heterosexual encounters involving male victims. This is an area where consent violations are often socially minimized (even by victims) and, as Torbati (2025) notes, not always recognized within existing legal frameworks.

#### **5. Conclusion**

This study shows that queer and TIN individuals (trans, intersex, non-binary, and others) as well as cisgender women place greater importance on asking for consent before engaging in sexual activity and view the use of persuasive tactics less favorably compared to heterosexual individuals and cisgender men. Cisgender men agree more strongly with the idea that being in a committed romantic relationship reduces asking for sexual consent than cisgender women and TIN individuals while heterosexual and non-heterosexuals do not differ in these attitudes.

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## Appendix

Table 4. All items from the three scales.

<b>Asking for consent first is important (Factor 1)</b>	<b>Descriptive statistics for the items and scale</b>		
	<i>M</i>	<i>SD</i>	<i>N</i>
Bei der Anbahnung sexueller Handlungen sollte man davon ausgehen, dass keine sexuelle Zustimmung vorliegt, und mündlich darum bitten. (When initiating sexual activity, one should assume no sexual consent and verbally ask for it before proceeding with any sexual activity.)	4.80	1.707	251
Vor jeder Art von sexuellem Verhalten, einschließlich Küssen oder Petting, sollte nach Zustimmung gefragt werden. (Consent should be asked before ANY kind of sexual behavior, including necking or petting.)	5.22	1.724	250
Die Zustimmung zum Berühren der Genitalien muss ebenso eingeholt werden wie zum Geschlechtsverkehr. (It is just as necessary to obtain consent for genital fondling as it is for sexual intercourse.)	6.11	1.375	249
Man muss nicht bei jedem Schritt einer sexuellen Begegnung nach der Zustimmung fragen. Einmal am Anfang reicht. (It is enough to ask for consent at the beginning of a sexual encounter. You don't need to ask at every step along the way.)*	4.24	1.968	201
Wenn Ihr*e Partner*in sexuelle Handlungen vornehmen möchte, ist es in Ordnung, damit fortzufahren, auch wenn er*sie betrunken ist. (If your partner wants to engage in sexual activity it is okay to proceed, even if she/he is drunk.)*	4.66	2.033	201
Sexuelle Zustimmung sollte immer VOR dem Beginn einer sexuellen Aktivität eingeholt werden. (Sexual consent should always be obtained BEFORE the start of any sexual activity.)	5.75	1.407	252
Der Geschlechtsverkehr ist die einzige sexuelle Handlung, die eine ausdrückliche verbale Zustimmung erfordert. (Sexual intercourse is the only sexual activity that requires explicit verbal consent.)*	6.58	0.937	244
Zum Thema sexuelle Einwilligung gibt es in der Gesellschaft nicht genug awareness. (More campus programs are needed to make students aware of sexual consent issues.)	5.73	1.413	251
Beim Beginn einer sexuellen Aktivität ist es in Ordnung, von einem Einverständnis auszugehen und sexuell fortzufahren, bis der/die Partner*in „Nein“ sagt. (When initiating sexual activity, it is okay to assume consent and proceed sexually until the partner indicates 'no'.)*	5.04	1.934	206
Wenn die Zustimmung zum Geschlechtsverkehr bereits besteht, muss nach der Zustimmung zum Petting nicht mehr gefragt werden. (If sexual consent for intercourse is already established, then consent for petting and fondling can be assumed.)*	4.26	2.215	203
Die verbale Bitte um sexuelle Zustimmung mindert das Vergnügen an der Situation (zerstört die Stimmung). (Verbally asking for sexual consent reduces the pleasure of the encounter (i.e., it destroys the mood).)*	5.40	1.876	220
Nonverbale Handlungen sind genauso wirksam wie verbale Kommunikation um sexuelles Einverständnis zu erteilen. (Nonverbal behaviors are as effective as verbal communication to indicate sexual consent.)*	3.87	2.049	208
Zu wenige Paare sprechen offen über die Frage der sexuellen Zustimmung. (Too few couples openly discuss the issue of sexual consent.)	5.43	1.379	251
Wenn ein sexueller Wunsch geäußert wird und der/die Partner*in „nein“ signalisiert, ist es ok, weiter über den Wunsch zu verhandeln. (If a sexual request is made and the partner indicates 'no', it is okay to continue negotiating the request.)*	6.45	1.066	244
<b>Commitment reduces asking for consent (Factor 2)</b>	<i>M</i>	<i>SD</i>	<i>N</i>
Die Notwendigkeit, nach der sexuellen Zustimmung zu fragen, nimmt mit Dauer einer intimen Beziehung ab. (The necessity of asking for sexual consent DECREASES as the length of an intimate relationship INCREASES.)	4.26	1.816	251

Die Einhaltung der sexuellen Zustimmung ist bei einer zwanglosen sexuellen Begegnung mehr erforderlich als in einer festen Beziehung. (Obtaining sexual consent is MORE necessary in a casual sexual encounter than in a committed relationship.)	3.41	2.225	249
Wenn ein Paar schon seit langem einvernehmliche sexuelle Handlungen ausübt, muss es nicht mehr bei jeder sexuellen Handlung nach der Zustimmung fragen. (If a couple has a long history of consenting sexual activity with each other, they no longer need to ask for consent during each sexual encounter.)	4.46	1.917	252
Die Einhaltung der sexuellen Zustimmung ist in einer neuen Beziehung wichtiger als in einer Bestehenden. (Obtaining sexual consent is MORE necessary in a new relationship than in a committed relationship.)	1.90	1.508	249
Je länger eine Beziehung dauert, desto weniger fragen die Partner*innen nach der sexuellen Zustimmung. (Partners are LESS likely to ask for sexual consent the longer they are in a relationship.)	5.29	1.445	250
<b><i>Convince to consent (Factor 3)</i></b>	Descriptive statistics for the items and scale		
	<i>M</i>	<i>SD</i>	<i>N</i>
Ich habe mein*e Partner*in schon mehrmals nach sexuellen Handlungen gefragt, obwohl er*/sie* beim ersten Mal „nein“ gesagt hat. (I have asked my partner repeatedly about sexual activities, even though he/she said ‘no’ the first time.)	2.00	1.448	210
Wenn ich auf eine bestimmte Handlung besonders Lust habe, versuche ich meine*n Partner*in davon zu überzeugen. (When I particularly fancy a certain sexual act, I try to persuade my partner to do it.)	2.60	1.620	210
Ich konnte meine*n Partner*in schon mal von sexuellen Handlungen überzeugen obwohl sie*/er* erst keine Lust hatte. (I have been able to persuade my partner to engage in sexual activities even though they did not feel like it at first.)	2.31	1.821	210
Ich frage nur bei "ausgefallenen" sexuellen Handlungen nach Einverständnis. (I only ask for consent for ‘unusual’ sexual practices.)	2.10	1.656	210

*Note. Only items with a white cell are part of the final factorial solution, the items with a grey background have been excluded. Scale descriptives are based on the final factorial solution.*

Table 5. Factor loadings of the final factorial solutions the results are based on.

	Factor		
	1	2	3
When initiating sexual activity, one should assume no sexual consent and verbally ask for it before proceeding with any sexual activity.	.613		
Consent should be asked before ANY kind of sexual behavior, including necking or petting.	.727		
It is just as necessary to obtain consent for genital fondling as it is for sexual intercourse.	.699		
More campus programs are needed to make students aware of sexual consent issues.)	.554		
Too few couples openly discuss the issue of sexual consent.	.565		
The necessity of asking for sexual consent DECREASES as the length of an intimate relationship INCREASES.		.604	
If a couple has a long history of consenting sexual activity with each other, they no longer need to ask for consent during each sexual encounter.		.593	
Partners are LESS likely to ask for sexual consent the longer they are in a relationship.	.339	.725	
I have asked my partner repeatedly about sexual activities, even though he/she said ‘no’ the first time.			.573
When I particularly fancy a certain sexual act, I try to persuade my partner to do it.			.589
I have been able to persuade my partner to engage in sexual activities even though they did not feel like it at first.			.840

Note. Factor 1 = asking for consent first is important; factor 2 = commitment reduces asking for consent; factor 3 = convince to consent. Loadings under .30 are not displayed.

Table 6. Cronbach’s  $\alpha$  by subgroups.

Scales	Cronbach’s $\alpha$ by subgroups		
	Factor 1	Factor 2	Factor 3
Heterosexuals	.738	.738	.718
Non-heterosexuals	.805	.637	.690
Males	.734	.700	.780
Females	.727	.700	.592
TIN	*	*	*
Overall	.770	.702	.712

Note. \*Subgroups were smaller than 30 (e. g. 24 TIN persons at factor 2). Factor 1 = asking for consent first is important; factor 2 = commitment reduces asking for consent; factor 3 = convince to consent.

Table 7: Cronbach's  $\alpha$  if items from the scales are removed and corrected item-scale correlations

	<b>Corrected item-scale correlation</b>	<b>Cronbach's <math>\alpha</math> if item is removed</b>
Scale 1: When initiating sexual activity, one should assume no sexual consent and verbally ask for it before proceeding with any sexual activity.	.439	.729
Consent should be asked before ANY kind of sexual behavior, including necking or petting.	.527	.708
It is just as necessary to obtain consent for genital fondling as it is for sexual intercourse.	.618	.705
More campus programs are needed to make students aware of sexual consent issues.)	.598	.733
Too few couples openly discuss the issue of sexual consent.	.544	.760
Scale 2: The necessity of asking for sexual consent DECREASES as the length of an intimate relationship INCREASES.	.607	.492
If a couple has a long history of consenting sexual activity with each other, they no longer need to ask for consent during each sexual encounter.	.554	.571
Partners are LESS likely to ask for sexual consent the longer they are in a relationship.	.422	.723
Scale 3: I have asked my partner repeatedly about sexual activities, even though he/she said 'no' the first time.	.489	.676
When I particularly fancy a certain sexual act, I try to persuade my partner to do it.	.512	.646
<i>I have been able to persuade my partner to engage in sexual activities even though they did not feel like it at first.</i>	.610	.519