

# Dating, Relationships and Sexuality

For those with Autism and I/DD

By

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# Introduction



# Parents – Why hesitant?

Beliefs – About sexuality and their child – or sexuality and disabilities

Grief – bringing up this topic, may bring up a sense of loss

Personal History – their own past may be negative (sexual experiences and experiences with those that work with their children).

Behavior – if they learn masturbation – it will consume them.

Time – when will they be able to do discuss this with their child

# Internet

- The internet is a link to the outside world and almost becomes a substitute friend. In regards to sexual experiences , the internet will be the adolescents guide, and pornography the tutor,” Dr. Fred Volkmar





## Getting Started

- This is not a one-time conversation
- This is not a two-time conversation
- Sexuality education is an ongoing interaction

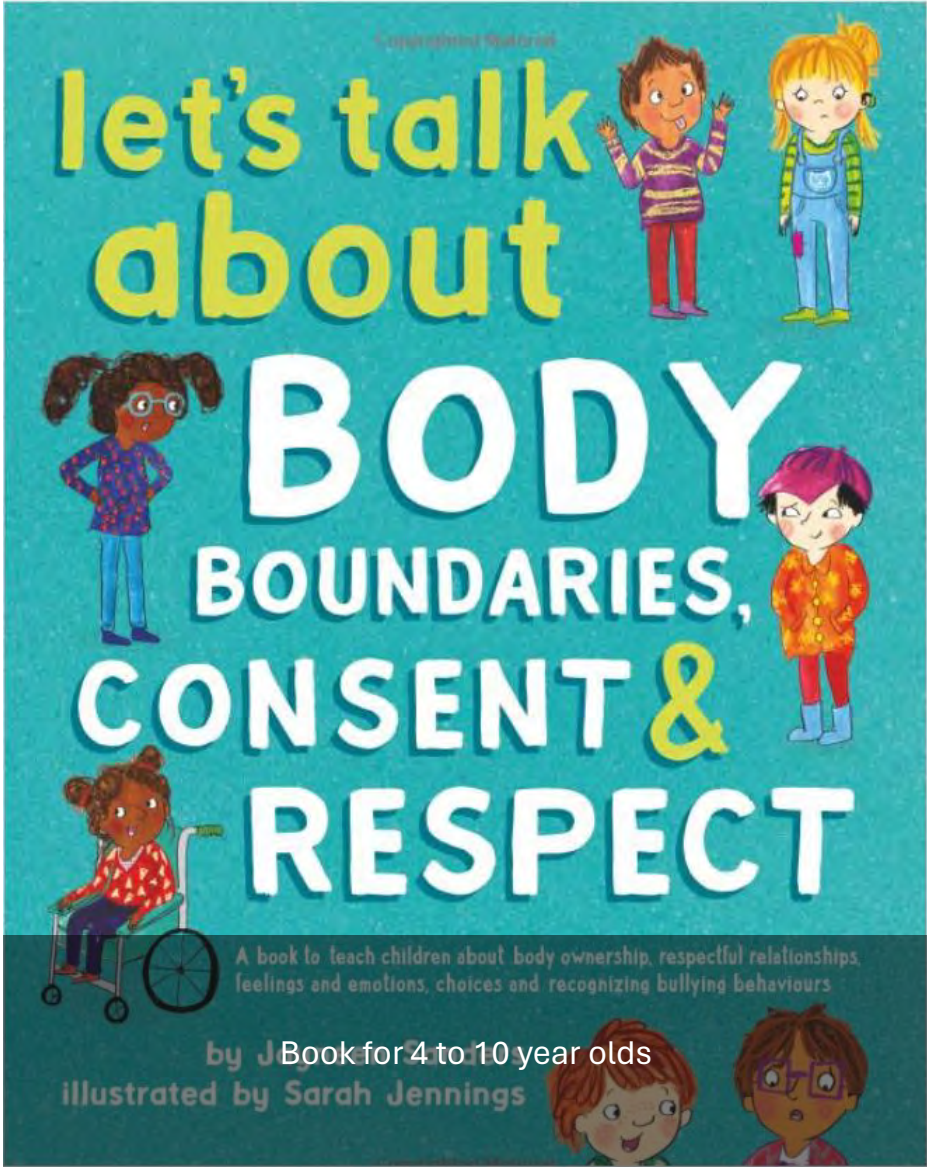


# Resources

Where to go for answers



Are they too young?  
Developmentally?



# Teaching Boundaries

Look at this boy. He is trying to hug his little sister.

Does she look happy about it?  
Do you think she wants to be hugged? How can you tell?



Here is what the boy should have done ...

Can I have a hug please?



Yes! You can!

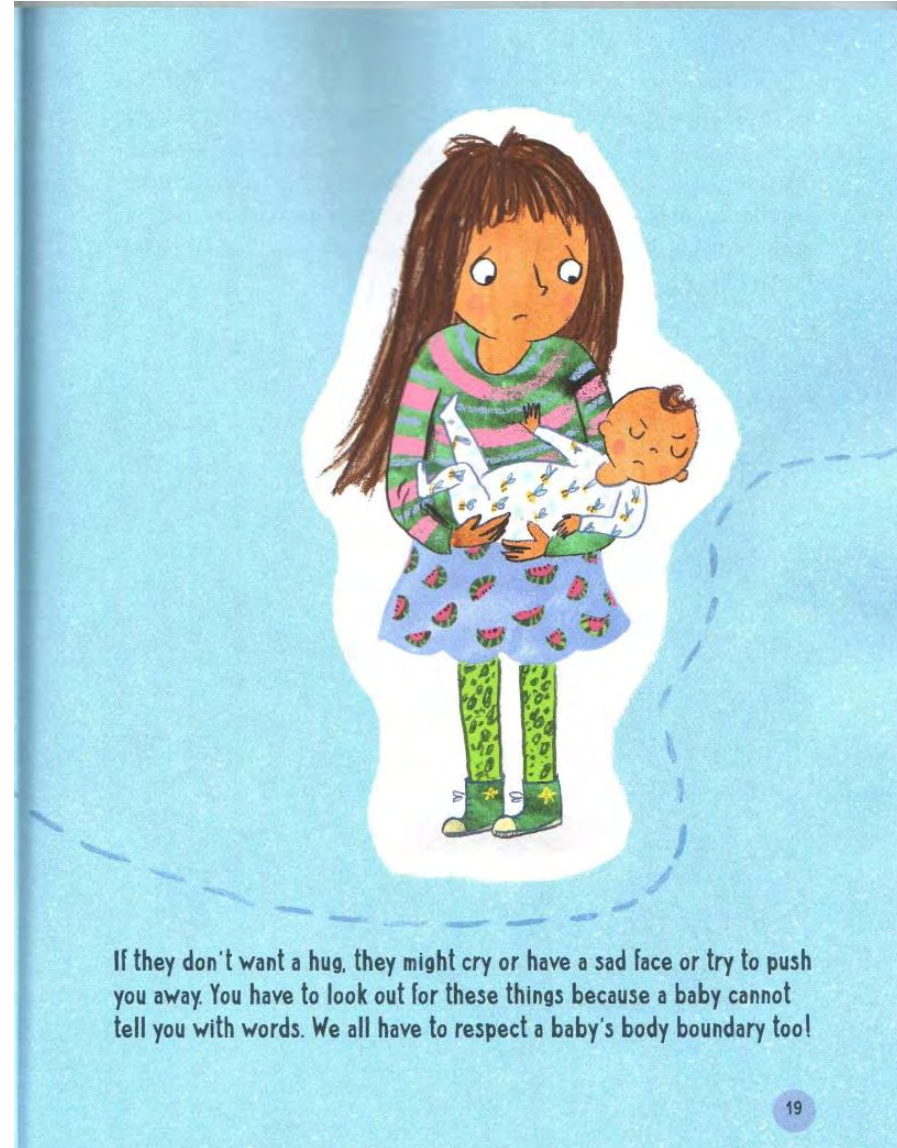


Can I have a hug please?

No, thanks. I don't feel like hugging anyone today.



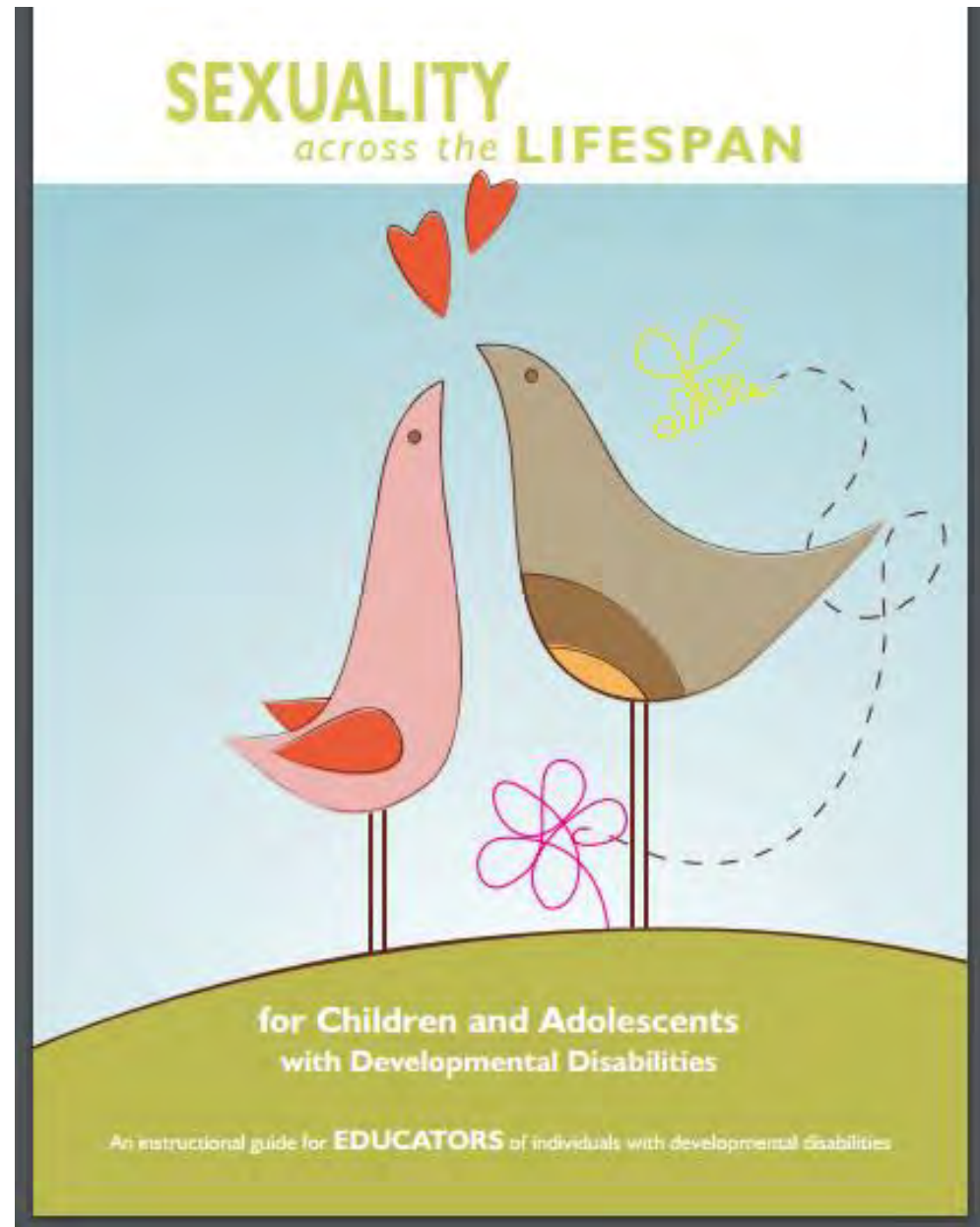
## Even without Words



If they don't want a hug, they might cry or have a sad face or try to push you away. You have to look out for these things because a baby cannot tell you with words. We all have to respect a baby's body boundary too!



Available  
Online

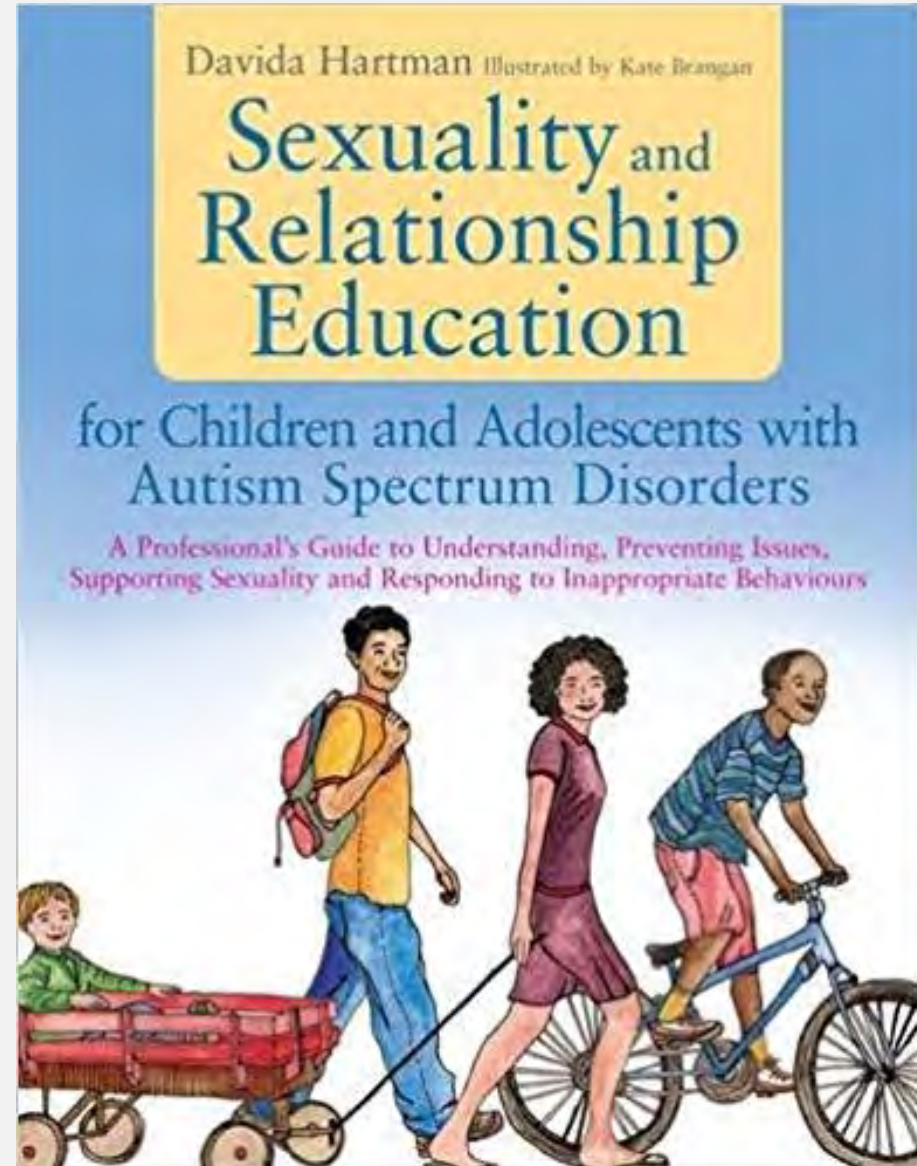




# Sexuality and Relationship Education (SRE)

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- Davida Hartman – author, Senior Educational and Child Psychologist
- Using this book as a guide
- No one book will provide you with all that you need if you work with a diverse population – Spectrum.
- You will need additional supplies/materials





# SRE Organization Checklist

- Complete
- What's missing?
- How will it get fixed?
- You must have policies in place first
  - Involve stakeholders – Survey parents and staff
  - What will happen if something comes up
  - Look at national policies
  - What training will be involved
  - What will you do if something is discovered – abuse
  - And so much more

## APPENDIX C SRE Organization Checklist

PRIORITY POLICY AND PROCEDURES AREAS	YES	NO
<b>SRE Programmes</b>		
Is SRE being taught in a planned and consistent manner to all children within the organization?	<input type="checkbox"/>	<input type="checkbox"/>
Are SRE goals included in IEPs?	<input type="checkbox"/>	<input type="checkbox"/>
Are programmes individualized?	<input type="checkbox"/>	<input type="checkbox"/>
Are programmes developmentally appropriate?	<input type="checkbox"/>	<input type="checkbox"/>
Do programmes include person-centred goals relating to a healthy sexuality and the development of intimate relationships?	<input type="checkbox"/>	<input type="checkbox"/>
Are children receiving a concurrent, comprehensive social skills programme?	<input type="checkbox"/>	<input type="checkbox"/>
Are programmes taking into account up-to-date research into best practice interventions and teaching tools with regard to ASD?	<input type="checkbox"/>	<input type="checkbox"/>
Do staff feel confident in providing SRE?	<input type="checkbox"/>	<input type="checkbox"/>
Are staff being provided with support (e.g. supervision, training, mentoring or shadowing) in the area of SRE?	<input type="checkbox"/>	<input type="checkbox"/>
Are all staff (including frontline staff) involved in all steps of the child's SRE programme?	<input type="checkbox"/>	<input type="checkbox"/>
<b>Child Protection</b>		
Are staff regularly trained in child protection issues (e.g. identifying and reporting abuse, and managing disclosure)?	<input type="checkbox"/>	<input type="checkbox"/>
Are children also trained in recognizing and reporting abuse, as is developmentally appropriate?	<input type="checkbox"/>	<input type="checkbox"/>
<b>Behaviour</b>		
Are staff aware of the typical sexual behaviours displayed by children?	<input type="checkbox"/>	<input type="checkbox"/>
Are staff aware of the reasons why a child with ASD may be displaying sexual behaviours?	<input type="checkbox"/>	<input type="checkbox"/>
Are staff trained in positive behaviour management strategies, including low arousal techniques?	<input type="checkbox"/>	<input type="checkbox"/>
Are staff proficient in undertaking and analysing FBAs?	<input type="checkbox"/>	<input type="checkbox"/>
Are <i>all</i> staff responding to challenging behaviours consistently?	<input type="checkbox"/>	<input type="checkbox"/>



# SRE Child Checklist

## APPENDIX B SRE Child Checklist

### Notes on the Child Checklist

1. The following checklist aims to cover the priority learning concepts within each SRE teaching concept. There will most likely be additional areas just as important as the ones listed, which will be specific to individual children.
2. Not all areas listed will be developmentally appropriate for all children. In addition, how a child shows that they understand a concept, or carries out a skill, will depend on the individual child. For example, one child with little language may show that he knows his own gender by correctly pointing to pictures of boys, while another may be able to answer verbally. In addition, the degree of independence expected of the child in carrying out these skills also needs to be individualized, as some children may always need some support, e.g. prompting. Criteria for success need to be decided by the child's parents and professional team.

PRIORITY LEARNING CONCEPT	YES	NO
<b>Gender</b>		
Does the child know their own gender?	<input type="checkbox"/>	<input type="checkbox"/>
Do they know other people's genders?	<input type="checkbox"/>	<input type="checkbox"/>
<b>Body Parts and Fluids</b>		
Does the child know the basic body parts?	<input type="checkbox"/>	<input type="checkbox"/>
Can they label sexual anatomy?	<input type="checkbox"/>	<input type="checkbox"/>
Can they label internal body parts?	<input type="checkbox"/>	<input type="checkbox"/>
Can they label body fluids?	<input type="checkbox"/>	<input type="checkbox"/>
Do they have an understanding of the function of the body parts?	<input type="checkbox"/>	<input type="checkbox"/>
Do they have an understanding of the function of the body fluids?	<input type="checkbox"/>	<input type="checkbox"/>
<b>Growing and Changing</b>		
Does the child understand that their body will change?	<input type="checkbox"/>	<input type="checkbox"/>
Do they understand about change and growth in general, e.g. aging and future changes in circumstances?	<input type="checkbox"/>	<input type="checkbox"/>
Do they understand where they fit into the life cycle?	<input type="checkbox"/>	<input type="checkbox"/>





# SRE Individual Curriculum Plan

– Make it Measurable

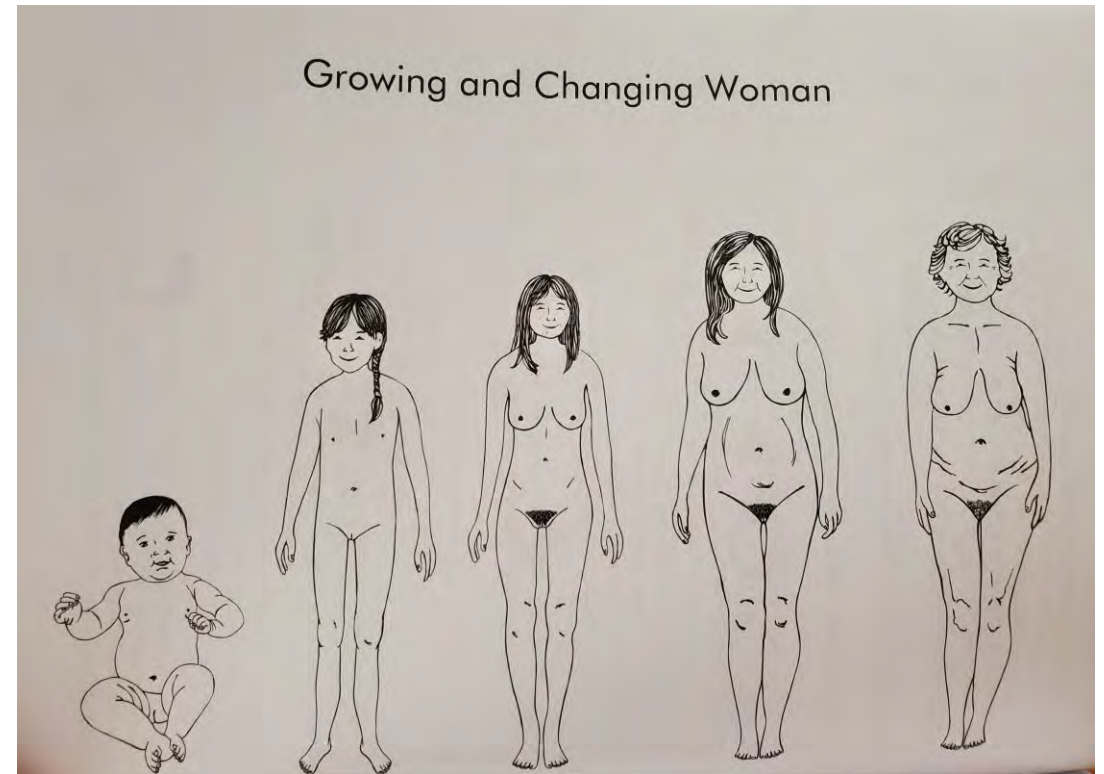
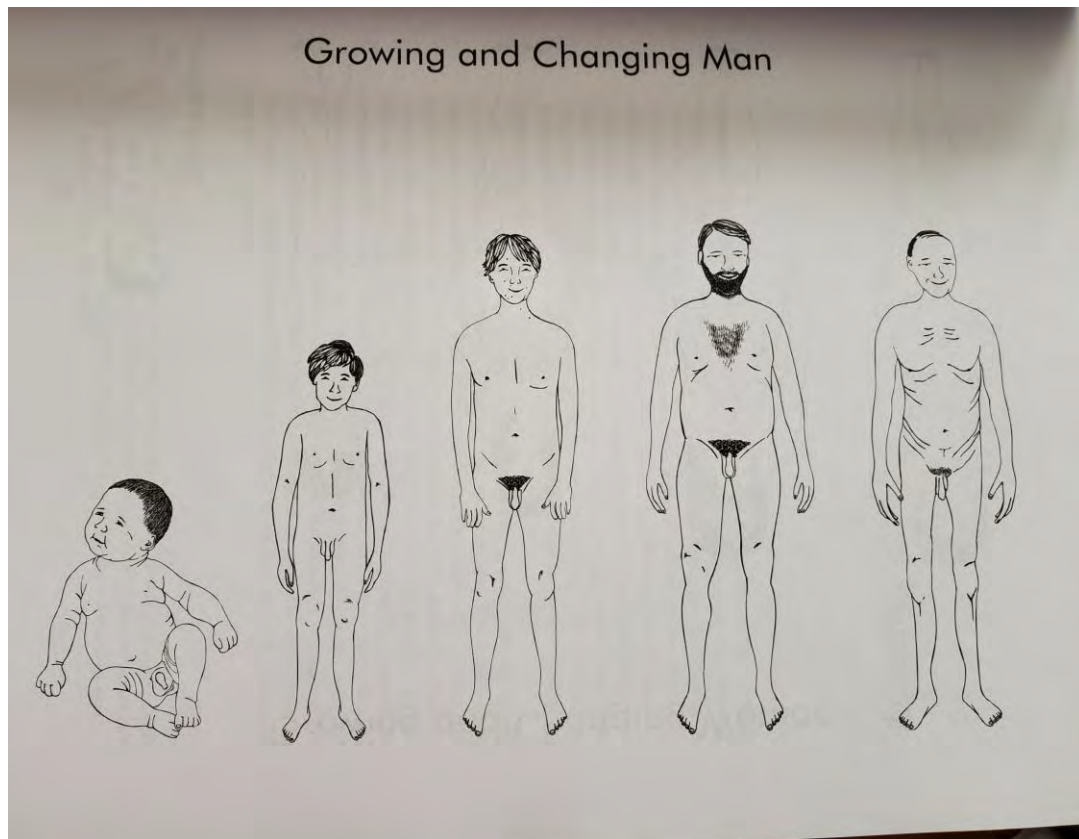
## APPENDIX D SRE Individual Curriculum Plan

SRE CURRICULUM PLAN FOR \_\_\_\_\_

CURRICULUM CONCEPT	GOALS FOR THE CHILD IN THIS AREA
Gender	
Body Parts and Fluids	
Growing and Changing	
Puberty	
Appearance and Hygiene	



# Teach Growing and Changing – SRE -Chapter 9





# Teach Appearance and Personal Hygiene – SRE - Chapter 11

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Much is covered in Puberty, but more is needed.

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Can they differentiate between clean and dirty – if no – that's where you start.

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Teach about germs

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Routines of the family – shower schedules

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Match outfits to occasions

# SRE offers a Social Stories for:

- Wet Dreams
- Changing a Pad
- Wearing deodorant





# Elevatus – [www.elevatustraining.com](http://www.elevatustraining.com)




## Curriculum: Sexuality Education for People with Developmental Disabilities

A curriculum for people who need content and tools to teach sexuality classes. This 450-page, one-of-a-kind curriculum has been field-tested and praised by experts and laypeople alike. It's cognitively accessible and designed for teams of self-advocates, staff and teachers to co-lead an inspiring and engaging sexuality class. Everything you need to teach an effective, engaging sexuality class.

[LEARN MORE →](#)

Sexual Orientation




What Is Sexuality?

173940 1832

Gay Lesbian Bisexual Love lgbtq pride  
bisexual queer questioning asexual


more info

Puberty



What is a Wet Dream? (Nocturnal

Puberty



Menstruation: What To Expect

more info

## Amaze.org

- A place to start to begin the conversation
- Free videos on specific topics



The image features a central white circle with a thick green border. Inside this circle, the text "Areas of Concern" is written in a white, sans-serif font. Surrounding the central circle are various abstract elements: a white zigzag line on the left, a small orange circle with a white outline at the bottom left, a larger orange circle with a white outline at the top right, a set of four parallel white diagonal lines on the right, and a large solid orange circle in the bottom right corner.

# Areas of Concern

# Privacy – Changing Habits

- Encourage Independence!
- Don't watch them shower, change clothes, go to the bathroom while having casual conversations. If they don't need help – LEAVE THE ROOM.
- If they need help – avert gaze
- Ask permission to help, even if it is part of the everyday routine
- Explain what you are doing – wiping your bum to make sure it is clean.



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## Prison of Protection vs Ring of Safety – Hinsburger (1995), Just say Know!

- Counter to Prison of Protection is:
- Ring of Safety: protects from abuse and supports them in developing healthy, loving relationships by providing
  - Someone who listens
  - An understanding of personal rights
  - A healthy self-concept and self-confidence
  - Options for a healthy sexuality
  - Sex education
  - Privacy awareness
  - The ability to non-comply



# Teach – 21 different areas

- Assertiveness
  - Consent
  - Saying No
  - No means No
  - Different types of touch
  - Non-compliance
  - Recognizing healthy and unhealthy relationships
  - Recognizing, dealing and responding to bullying, including cyber bullying
  - Learning the difference between surprises, privacy and secrets. – **Good secrets and Bad secrets**
  - Learning how people try to
- get you to do things you don't want to.
- Sexual harassment
  - Stalking
  - Sexual abuse
  - Rape
  - Abuse within relationships
  - Pressure to have sex
  - Safety when answering the phone and door
  - Safe dating
  - Internet Safety
  - Prostitution
  - Child Pornography







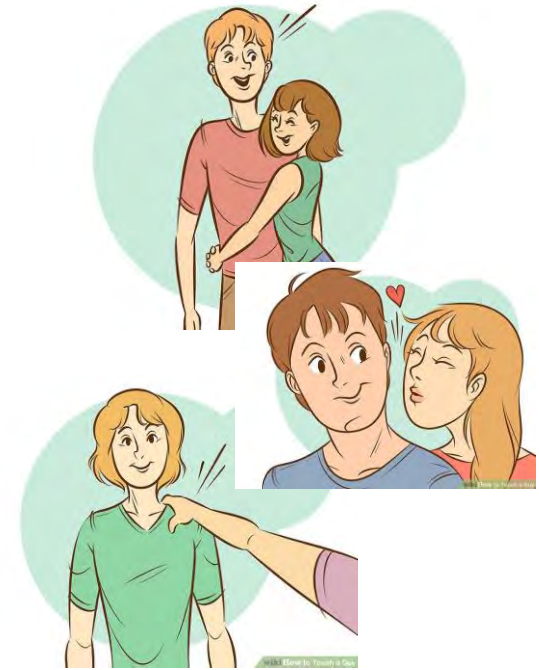
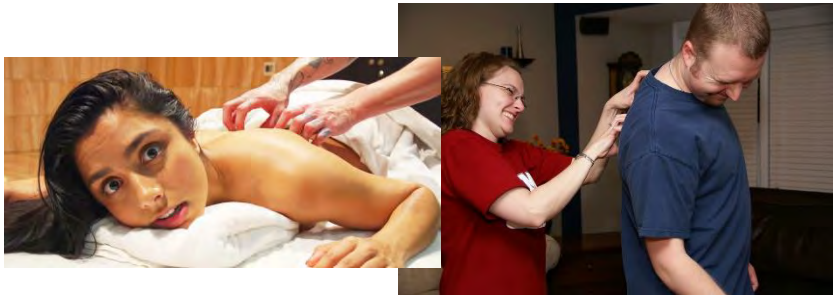
## Supports Needed

- “Hard to imagine we can alleviate the need for assistance to facilitate a healthy sexual life when all other basic needs are met through outside supports” (Mona, 2003).
- Where would they meet a partner (access)?
- How would they get their (transportation)?
- Supervised social events (privacy)?



# Types of Touch – Who can touch you?

- Sorting –
- Types of touch – rub, kiss, hug, snuggle, scratch, wrestle, high five, fist bump, etc.
- People – parent, teacher, friend, relative, stranger
- Where – arm, leg, body, cheeks, lips, chest





# Ok or Not Okay

- Someone bumps into me during a game by accident
- My little sister hugs me
- A friend of my mother's touches my penis
- The doctor touches my chin
  
- Don't give RULES – let them problem solve





# Materials – Teaching Closed Door and Open Door Behaviors



# Visser et al (2017) - Flags

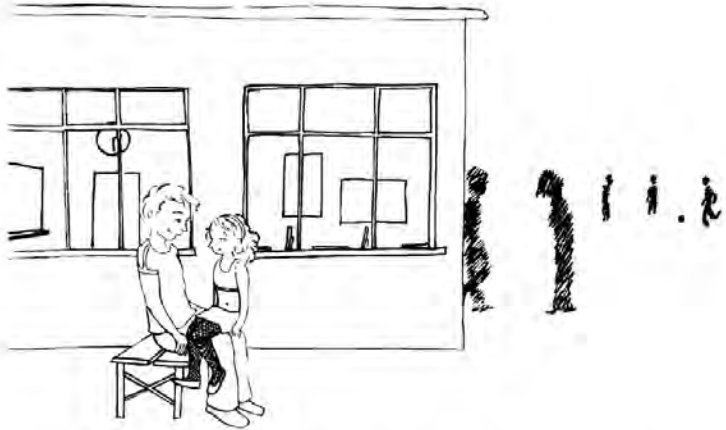


Fig. 2. Yellow flag illustration "A 12 year old girl sits on a 17 year old boy's lap".

*K. Visser et al./Research in Autism Spectrum Disorders 36 (2017) 35–43*



. Red flag illustration "A 15 year old girl shows her breast on the internet in exchange for calling credit".

Green  
Yellow  
Red  
Black

*K. Visser et al./Research in Autism Spectrum Disorders 36 (2017) 35–43*




Fig. 4. Black flag illustration "Two 16 year old boys force a 14 year old girl to engage in sexual games".

## Sexuality

Sullivan and Caterino (2008) explain that individuals with ASD “are not generally involved in peer groups, they are excluded from the valuable learning opportunities that shape people’s sexual behaviors.”





Indiscriminate or  
Inappropriate-  
We overuse  
“inappropriate”  
when speaking  
about individuals  
with disabilities. –

Is it ever allowed?  
Confused?

Hugging one person but not  
another – how do I know?

Masturbation? Allowed in  
bedroom not in day program

# Are They Ready?

Time to Assess

# TALK-SC – Tools for the Assessment of Levels of Knowledge Sexuality and Consent



## TOOL FOR THE ASSESSMENT OF LEVELS OF KNOWLEDGE SEXUALITY AND CONSENT (TALK-SC)



D. Hingsburger, K. Beattie, T. Charbonneau, J. Hoath, S. Ioannou, S. King, S. Loftman, L. Lynn, K. Miller,  
M. Mudunuru, C. Outhwaite-Salmon, S. Woodhead

Name: \_\_\_\_\_  
Assessor: \_\_\_\_\_

Pre ( ) Post ( ) Test Date: \_\_\_\_\_

Section #1		Person has an understanding of public and private places, topics and body parts.			
Question	Answer	0	1	2	Total
1. a) In everyone's home, there are public places and private places. Can you tell me what are some of the private places in your home?	<p>Correct answer: Any place in your home that you are allowed to be alone and there is a door and no one can see you or dependant on one of 4 living environments:</p> <ul style="list-style-type: none"> <li>• own apartment - bedroom, bathroom most private, own apartment when alone or with an intimate partner</li> <li>• shared living/own room - bedroom and bathroom</li> <li>• shared living/shared room - when bedroom door is closed and you are all alone or with an intimate partner, bathroom</li> <li>• Parent's Home - dependant of parental rules and attitudes</li> </ul>		a) Indicates answers or equivalent	More than one of the answers provided	
K R b) Why is the bedroom in your home a private place and the kitchen is not?	<p>b) Person should be able to indicate: everyone has access to the kitchen but not everyone has access to my room, the kitchen belongs to everyone and my room belongs to me, I decide who comes in my room, I do not decide who comes in the kitchen.</p>		b) Indicates answers or equivalent		
					Total /3





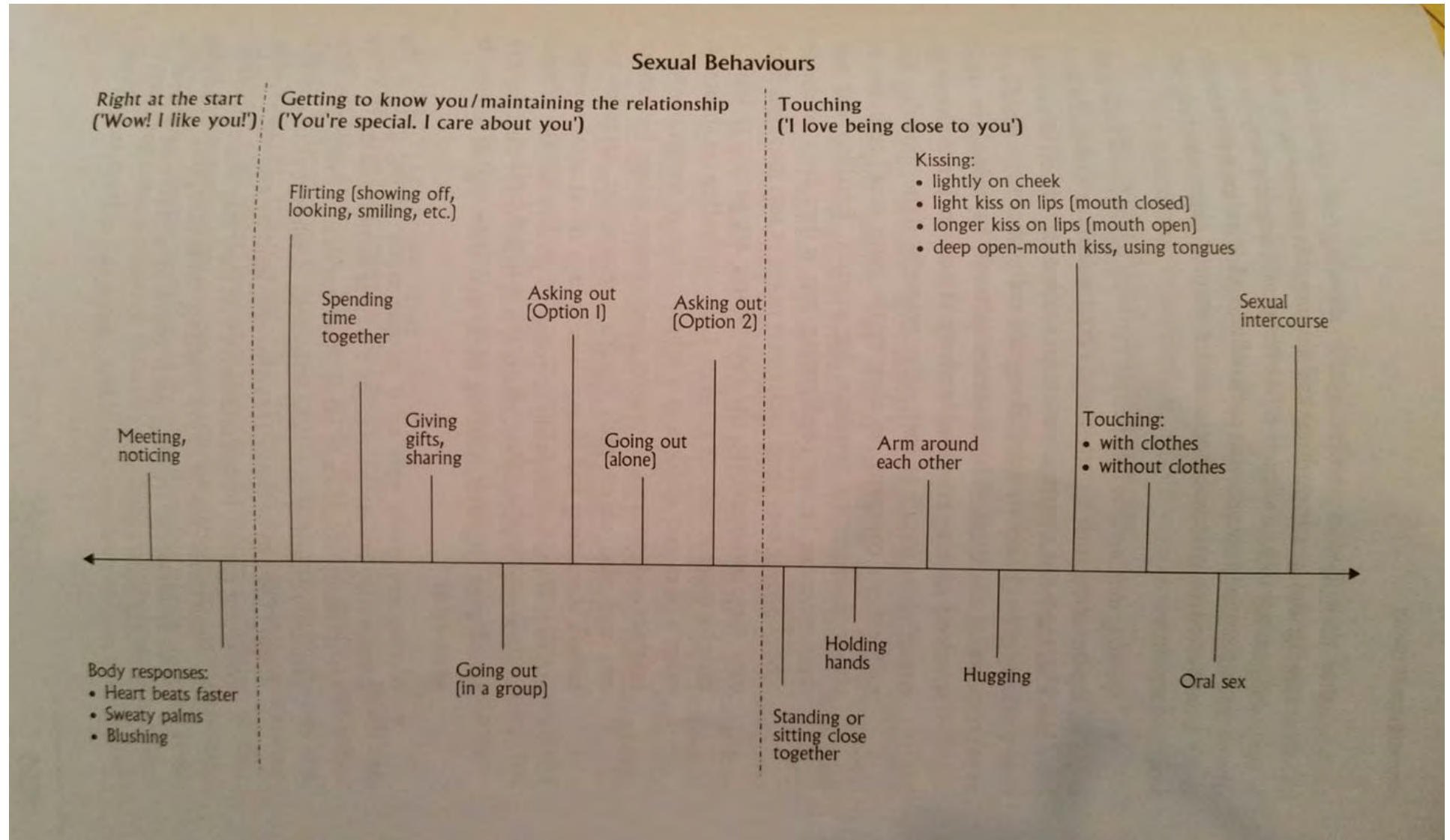
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## Emotions

- Understanding them
- Managing them

# Dating and Relationships

Making  
Sense of Sex  
- Attwood



# Safety is Still #1

- Kim, Y. (2016). Evaluation of sexual abuse prevention program for children with intellectual disabilities. *Behavioral Interventions*, 31, 195-209

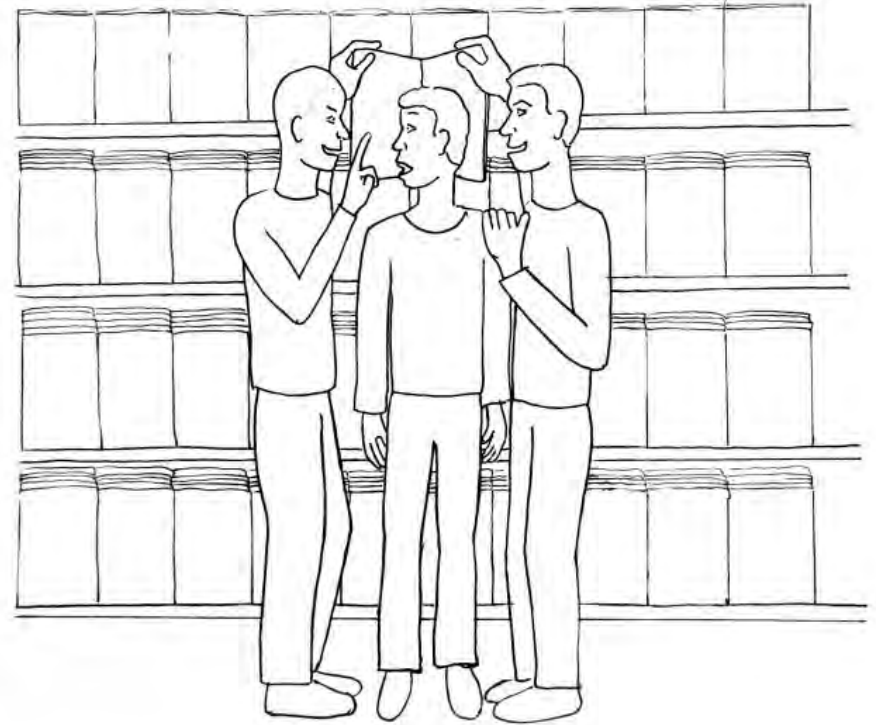
## Reasons for high rates of abuse

- Heavy reliance on compliance training
- Excluded from sexuality education
  - Leading to – insufficient sexuality awareness/may think abuse is acceptable
  - Limited social skills in this area
  - Less likely to discriminate between appropriate and inappropriate



**LESSON 1  
VIGNETTE 6**

Charlie is looking at a book in the bookstore. Two guys come up to Charlie and tell him to look at magazines with them. They force him to look at pictures in the magazines of naked people having sex.



**ESCAPE  
NOW**

*An Effective Strategy-Based Curriculum for Abuse Prevention and Empowerment  
for Individuals with Developmental Disabilities – Now*

**ESCAPE  
NOW**

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Watchung, NJ

[www.findingyourindividuality.com](http://www.findingyourindividuality.com)



# Socio-Sexual Knowledge and Attitudes Test-Revised (SSKAAT\_R)

Ages 15 to 80 - abused or abuser



ITEM: 33705

# Dating Apps

The logo for the dating app 'hiki' is displayed in white, lowercase letters on a dark gray rectangular background. The letters are stylized with a 3D effect, featuring rounded edges and a slight shadow. The 'h' is lowercase and has a curved bottom. The 'i' is lowercase and has a circular dot above it. The 'k' is lowercase and has a curved bottom. The 'i' is lowercase and has a circular dot above it.





Questions