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AUTISM COMMUNITY TRAINING

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## Why listen to me talk about this topic?

- working in the field of autism and disability support for 20 years
- MA in Special Education from UBC
- Board Certified Behaviour Analyst
- Certified Sexual Health Educator
- Pursuing a Master's degree in Counselling Psychology
- teach sexual health education 1:1
- teach sexual health education to general education classes



## what we will cover

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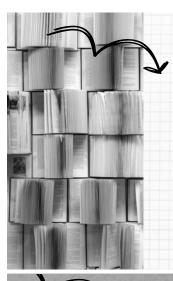
What do we know about what autistic and intellectually disabled students tell us they want from sex 2

What do parents and teachers want when it comes to providing sexual health and — safety education

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What is appropriate sex education for various age groups from kindergarten through Grade 12? L

Some ideas for how to adapt sexual health lessons for different goals and different ages



## Let's get on the same page about sexual health!

- A life-long set of safety and wellness skills
- NOT synonymous with physical acts of sex
- Knowledge, attitudes, values, behaviours, and biology
- Identity, orientation, gender roles, societal expectations these are individual and evolving
- Shaped by culture, history, education, experience (including trauma), religion
- Applies not just to your children or those you care for, but for you as a caregiver as well

What do we know about what autistic and intellectually disabled students tell us they want from sex ed?





Enhancing effective sexual health promotion for Autistic and disabled youth



Findings from focus groups and interviews with Autistic and neurodivergent youth



### What do autistic people want?

A lot of the same things that other youth and young adults say that they want - which a lots of sexual health education doesn't address

- "what a period is going to feel like"
- "how to maintain a long-term relationship"
- more discussion of pleasure

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- "know how someone is interested in you and how to respond"
- more discussion of healthy and unhealthy relationships

  SIECCAN, 2022



### ON BURNESSEE

### What do autistic people want?

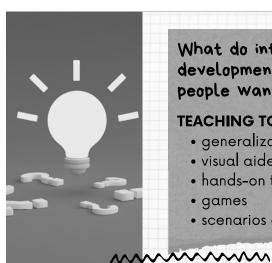
- "comprehensive and accurate sex education that addresses sexuality, intimate relationships, and gender identity (diversity) from a positive perspective" -DeWinter et al., 2023
- LGBTQ+ Autistic people want sex education to be inclusive of LGBTQ+ identities and include autistic experiences of sexuality - Jordan, 2023



# What do intellectually/ developmentally disabled people Want? Colrossi et al. (2023)

#### **IMPORTANT TOPICS:**

- to learn about anatomy and puberty (physical and emotional changes)
- to learn about consent and boundaries to protect against victimization
- learning about reproduction and birth control
- dating and relationship safety



What do intellectually/ developmentally disabled people want? Colrossi et al. (2023)

### **TEACHING TOOLS:**

- generalizable
- visual aides
- hands-on tools
- games
- scenarios and story-telling



### What do intellectually/ developmentally disabled autistic people want?

It is difficult to find research that **explicitly** asks autistic people who are also intellectually disabled - usually separated or lumped together

We can assume it would be much of the same as what the two groups, separately have stated they want.

What do parents and teachers want when it comes to providing sexual health and safety education?



### What do Parents Want?

- 85% of parents in Canada agree that schools have an important role to play in sexual health education
  - 90% of BC parents believe this
- 98.7% of parents support puberty education in school
- 86.8% believe that sexual pleasure is an important topic to be covered in sex ed in school

SIECCAN, 2020

- Even in the US, 87% of parents nationwide support sex education in schools
  - 92% of parents of elementary-aged students





### What do Parents Want?

- In Croatia
  - 78% support comprehensive sex ed rates go up as parents know what is included
- In China
  - 90% of parents had positive attitudes about sex ed for primary school children - only 40% felt comfortable doing it themselves
- In India Zhang et al., 20
  - 83% would like for sex education to be offered to their children in school
    - most felt uncomfortable doing so themselves
    - very limited access continues

Lavanya et al., 2011; Pandey, M. K., & Sathyanarayana Rao, 2023



## What do Parents of Autistic/Disabled Students Want?

- The vast majority want sexual health education for their child
- Who they want to deliver it varies:
  - Themselves with additional support and resources
  - Medical professionals
  - · Teachers
- Not all parents agree on what sex ed should include and who should deliver it, but agreement there should be something



## What do Parents of Autistic/Disabled Students Want?

- Topics Parents think are essential:
  - Safety and protecting against vulnerability
    - safer sex practices STI and pregnancy prevention with a focus on perceived negative consequences of sexual activity
    - understanding public and private
    - sexual abuse prevention
  - · Hygiene and menstrual care
- Parents of kids with ID/DD are less likely to think teaching about sexual behaviours and contraception are necessary

Strnadová et al. (2022)



## What do Parents of Autistic/Disabled Students Want?

- Parents and children/youth do not always agree on what should be taught or what is most important
  - $\circ$  autistic young adults report engaging in more sexual behaviour and experiencing higher rates of sexual victimization than their parents reported on their behalf  $^{\rm Hartmann\ et\ al.,\ 2019}$
- But, sometimes, parents are more open than we might think
  - parents say teaching about masturbation is important where disabled youth may not Colrossi et al. (2023)



## What do Teachers of Autistic/Disabled Students Want?

- Some want to deliver themselves but face barriers; some want other staff to take it on
- Teachers believe sex education should start early
- Teachers want parents to have more comfort when talking with them about sexual behaviours or sexual health education goals
- Teaching resources that match the needs of students or individually tailored interventions

Borawska-Charko et al. (2023) Strnadová et al. (2022)



## What do Teachers of Autistic/Disabled Students Want?

- Topics Teachers think are essential:
  - safety and protecting against vulnerability
  - o online safety
  - understanding acceptable and unacceptable behaviour, including laws
  - o increasing autonomy and ability to make their own, informed choices
  - knowing their rights about sexuality
  - LGBTQ+ inclusive sex education
  - o development of social connections and skills

Strnadová et al. (2022)



### What often happens

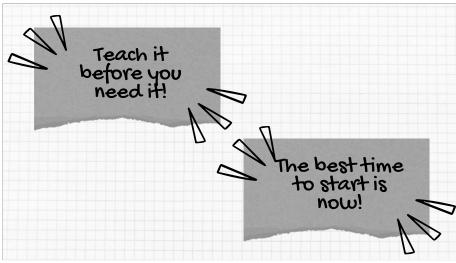
Barnard-Brak et al., 2014

	NO ID*	MILD ID	MODERATE or PROFOUND ID
% receiving SEX I	47.5%	44.1%	16.18%
likelihood of the studen benefiting from sex educat teacher perspective		68%	25%



The only significant demographic variable that predicted receipt of sex education was more expressive communication skills

What is appropriate sex education for various age groups from kindergarten through Grade 12?

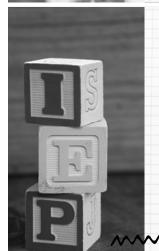




# Sexual Health Education in Schools starts with Government

- Ministries of Education set sexual health curriculum for schools
- In BC Physical Health Education Learning Standards
  - o fact-based, not values-based
- Helpful guidelines for families and caregivers
  - o can and SHOULD supplement at home
  - this is where you can teach family values





## Individualized Education Plans

- for all children with a designation
- just as goals from other curricular areas can be added to a child's IEP, so too can sexual health and safety goals
- domains could include:
  - o social-emotional
  - communication
  - o physical health



### BC MoE Standards for K

- · Practices that promote health and well-being o self-care skills
- names for parts of the body, including private parts - both sexes
- learning parts you don't have is a safety skill
- · appropriate and inappropriate ways of being touched
  - CONSENT
  - o types of touch, NOT people
- · caring behaviours in groups and families
  - o caring/safe vs. unsafe/tricky





# BC MoE Standards for G1

- o self-care skills
- · names for parts of the body, including private parts - both sexes
  - expanding and building
- e.g., penis and testicle; vulva and labia
- · appropriate and inappropriate ways of being touched
  - CONSENT
  - types of touch, NOT people
- · caring behaviours in groups and families
- · identifying reliable sources of health
- o family; teacher; books

## BC MOE Standards for G2

- · Practices that promote health and well-being, including illness prevention
- safe wiping; reporting body sensations
- strategies for accessing health information
- o asking questions to family; books; online emerging
- · strategies and skills to use in potentially hazardous, unsafe, or abusive situations
  - CONSENT
  - o teaching assertive nos; teaching reporting body sensations
- · factors that influence self-identity
  - o family, friends, community

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• emerging conversations about identity



## BC MoE Standards for G3

- · A REPEAT of Grade 2
- Practices that promote health and well-being, including illness prevention
- o safe wiping; reporting body sensations
- strategies for accessing health information
- asking questions to family; books; online emerging
- strategies and skills to use in potentially hazardous, unsafe, or abusive situations
  - · CONSEN
  - teaching assertive nos; teaching reporting body sensations
- · factors that influence self-identity
  - o family, friends, community
- emerging conversations about identity
  diversity

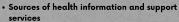


## BC MOE Standards for G4

- Practices that promote health and well-being, including illness prevention
- media messaging and body image
- strategies and skills to use in potentially hazardous, unsafe, or abusive situations including common lures and tricks used by potential abusers
  - CONSENT
- o secrets vs. surprises; tricky behaviour
- physical, emotional, and social changes during puberty - including those involving sexuality and sexual identity
  - teach it before you need it
  - emerging conversations about identity diversity

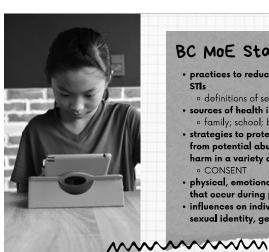


### BC MoE Standards for G5



- smart places to get sexual health information online; books; who to talk to
- strategies to protect themselves and others from potential abuse, exploitation, and harm in a variety of setting
  - CONSENT
  - o community safety skills; online safety
- physical, emotional, and social changes during puberty - including those involving sexuality and sexual identity, and changes to relationships
  - crushes what they are and how to manage them
- o changing relationships





## BC MoE Standards for G6

- · practices to reduce the risk of contracting STIs
- o definitions of sex and relative risk
- · sources of health information o family; school; books; online
- · strategies to protect themselves and others from potential abuse, exploitation, and harm in a variety of settings
  - CONSENT
- physical, emotional, and social changes that occur during puberty and adolescents
- influences on individual identity, including sexual identity, gender, values, and beliefs



### BC MoE Standards for G7

- · practices to reduce the risk of contracting STIs
- · sources of health information
- strategies to protect themselves and others from potential abuse, exploitation, and harm in a variety of settings
  - CONSENT
- · consequences of bullying, stereotyping, and discrimination
- · influences on physical, emotional, and social changes on identities and relationships





### BC MoE Standards for G8

- · healthy sexual decision making
  - CONSENT
  - o Influences on decision-making values, family
  - o Definitions of sex
  - Contraception options
- potential short- and long-term consequences of health decisions, including STIs
- · sources of health information
- strategies to protect themselves and others from potential abuse, exploitation, and harm in a variety of settings
- influences of physical, emotional, and social changes on identities and relationships



### BC MoE Standards for G9

- · healthy sexual decision making
  - CONSENT
  - o Influences on decision-making
  - Definitions of sex
  - Contraception options
- · potential short- and long-term consequences of health decisions, including STIs
- · sources of health information
- · strategies to protect themselves and others from potential abuse, exploitation, and harm in a variety of settings
- influences of physical, emotional, and social changes on identities and relationships



### BC MoE Standards for G10

- · healthy sexual decision making
  - · CONSENT
  - o Influences on decision-making
- · potential short- and long-term consequences of health decisions, including STIs
- · sources of health information
- addressing pornography as a source of information
- strategies to protect themselves and others from potential abuse, exploitation, and harm in a variety
  - o reporting gender-based violence
  - Internet safety
- o healthy, unhealthy, and toxic relationship behaviours
- influences of physical, emotional, and social changes on identities and relationships

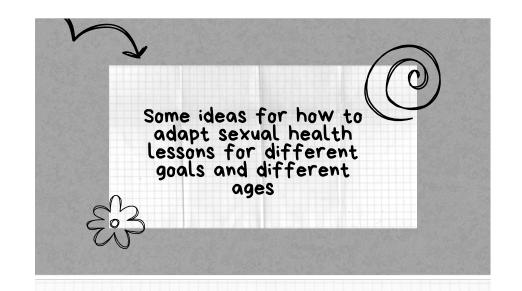


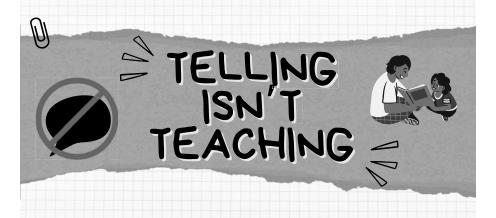


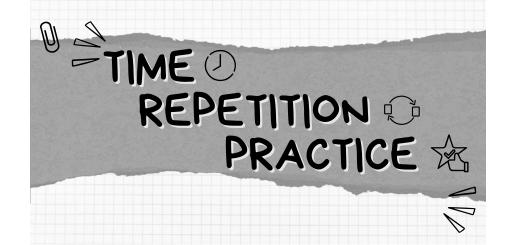
BC MOE Standards for G11-12

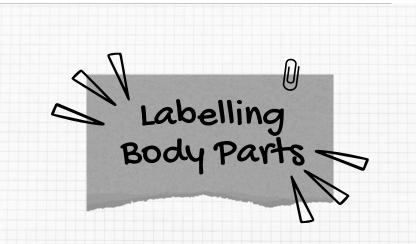
Nothing













### Start with Just Modelling the Language





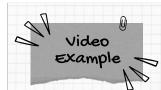
















Safe and Unsafe Touch





Label safe or unsafe touch in the moment

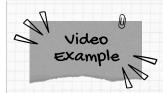


Label how a body might feel during safe or unsafe touch



Talk about who can do safe touch with private parts and why









Safe v. Tricky Behaviour









Focus on the action or behaviour not the person doing it



Think about situations your child might encounter



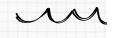
It doesn't have to be about sex or bodies







### Reporting on Body Sensations







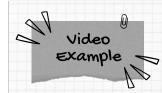


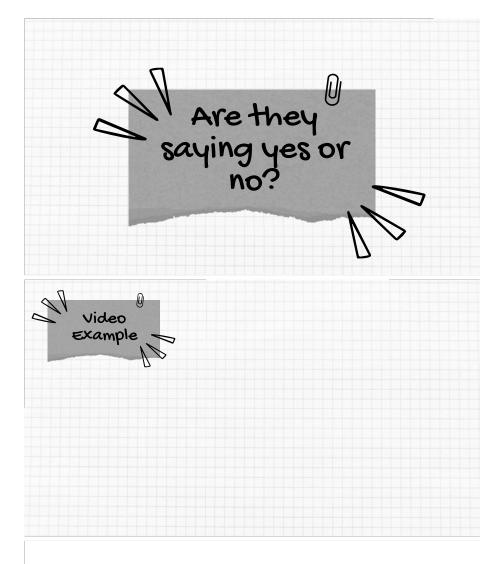
Where and Who questions - with supports



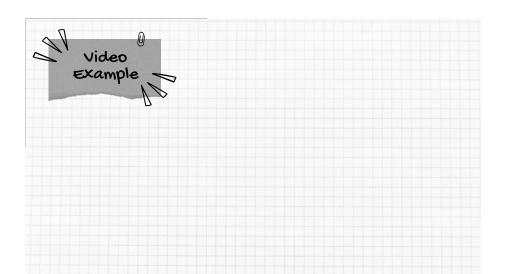
Capture natural opportunities When they happen







Self-Care
Planning for
Puberty



Recognizing Crushes and What to do about them

Video
Example



Video Example



### Wrap it Up!

- This takes time if your kid takes time to learn, don't expect sex ed skills to be learned faster. In fact, they might take longer because they are more complicated
- Think about how the person learns
  - use their strengths
  - teach other skills using similar approaches and then generalize
- Start small and build up!
- Advocate for accessible sex education!







