


LET'S TALK ABOUT SEX....EDUCATION!

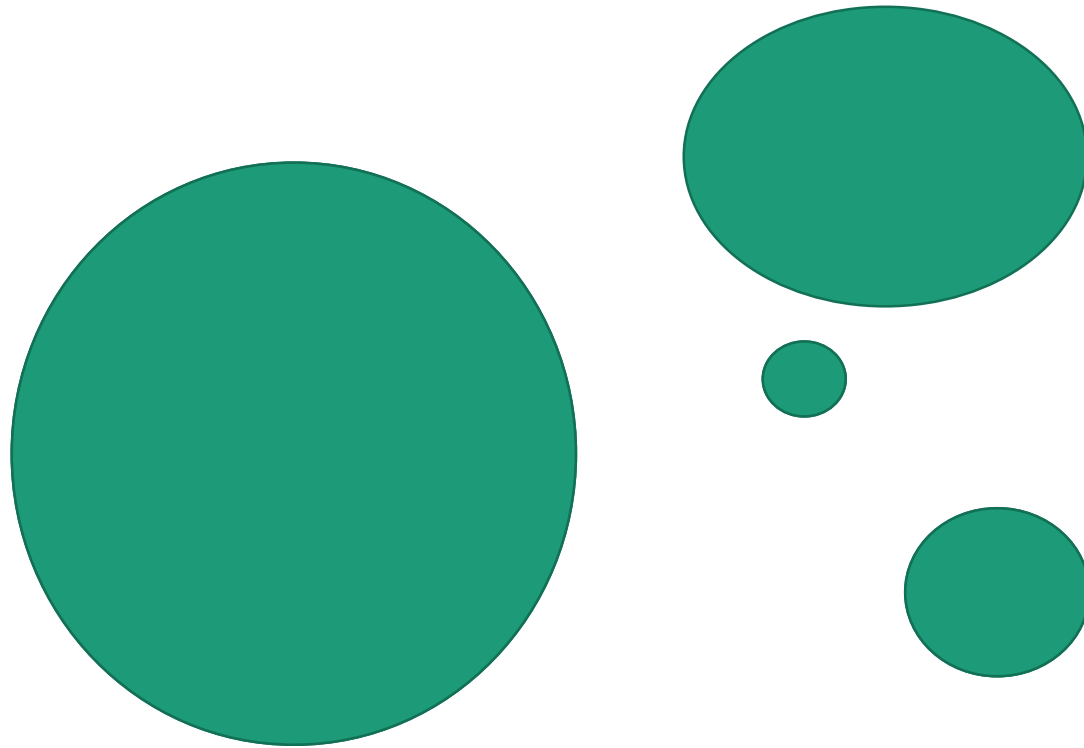
Sexuality and Sex Education for Neurodivergent Individuals



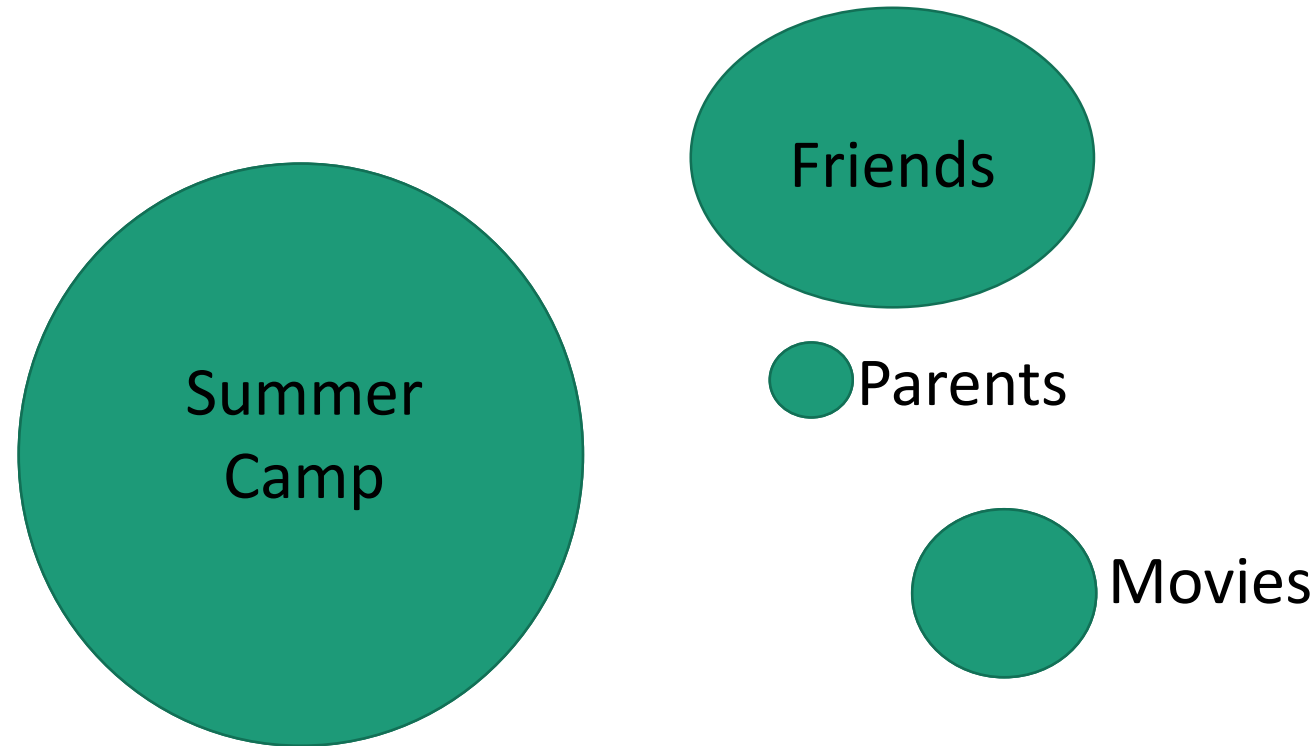
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The Help Group  because every child deserves a great future

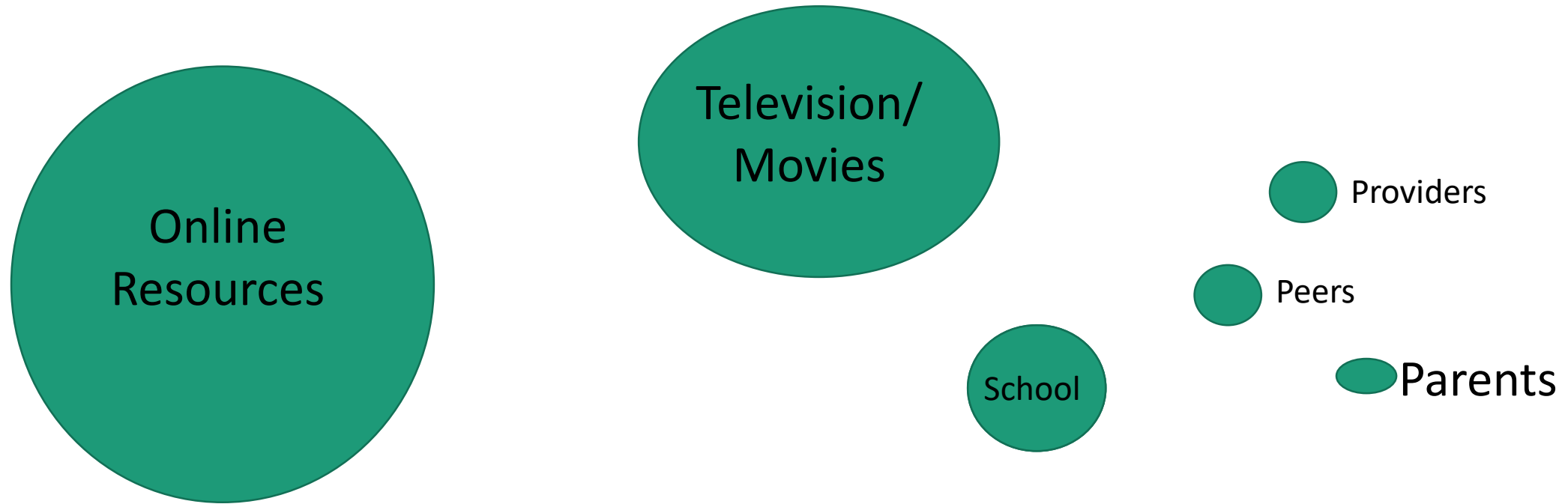
Where Did You Learn about Sex?



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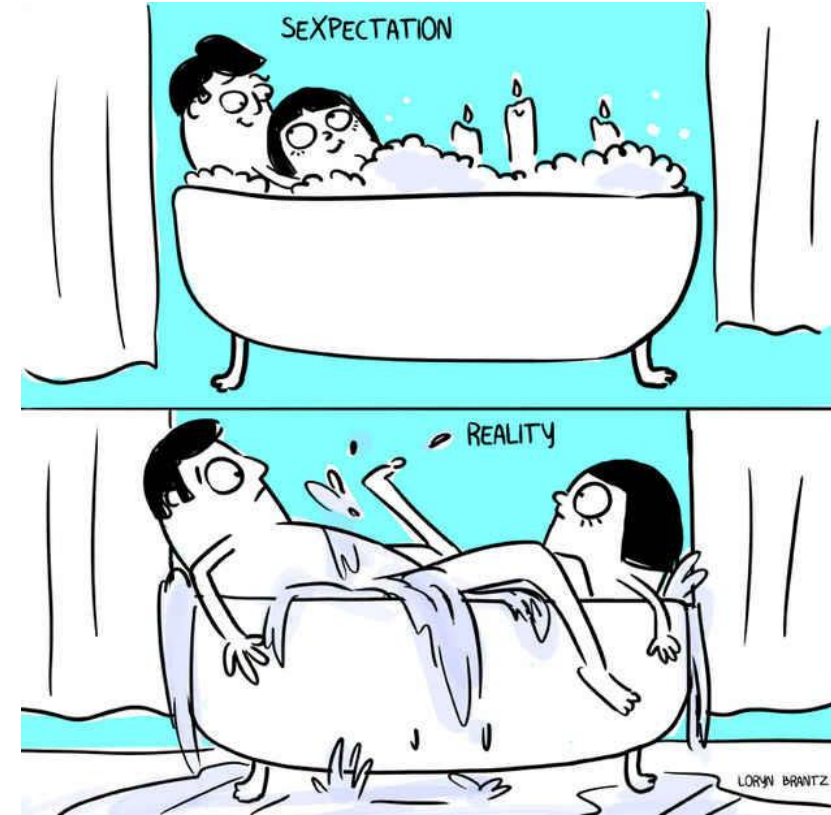


Where Do Autistic People Learn about Sex?



Problems with these Sources

- Television/Media/Internet
 - Often not realistic depictions of sex
 - Misinterpretations common
 - Invalid Sources



<https://www.buzzfeed.com/lorynbrantz/sexpeception-vs-reality#.dwLyLQ4bB>

Problems with these Sources

- Sex Education in Schools
 - Variable access to autistic population
 - Greater emphasis on abstinence
 - Little emphasis on social components
 - Fails to include LGBTQIA+ identities



Problems with these Sources

- Parents
 - It's awkward!
 - How do I teach?
 - When do I teach?
 - Am I the right one to teach?



Core Impairments of Autism influence Sexual Behaviors and Relationships

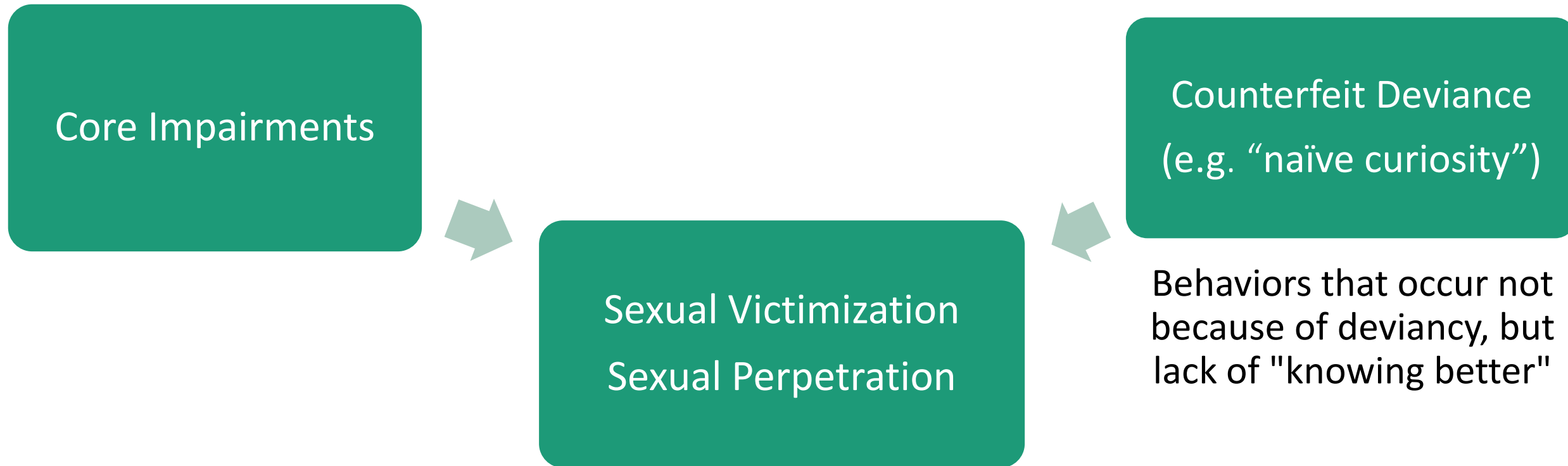
Social Communication

- Social Emotional Reciprocity Difficulties
- Theory of Mind Deficits
- Social Reasoning Challenges

Atypical Behaviors

- Stereotyped Behavior
- Routines, Rituals, Rigidity
- Highly Restricted Interests
- Atypical Sensory Processing

Core Impairments of Autism influence Sexual Behaviors and Relationships



Core Impairments of Autism influence Sexual Behaviors and Relationships

- Risk of sexual abuse, violence, and exploitation
 - 78% of autistic adults reported at one occurrence of victimization
 - As children, higher incidence of sexual assault by peers
 - As adults, higher incidence of unwanted sexual contact
 - Autistic college students are twice as likely to experience unwanted sexual contact
- Risk of perpetration/being accused of sexual crimes
 - DD population 7x more likely to have contact with Criminal Justice System
 - Retained for 11 years longer than non-autistic peers in psychiatric settings

Importance of Sex Education

Myths

- Autistic individuals do not have sexual drives or interest.
- Physical development differs in autistic adolescents.
- Teaching about sex and sexuality causes problems.
- Sexual behaviors in autistic individuals is aberrant or wrong.

Facts

- Most autistic individuals have typical sexual/romantic feelings and desires.
- Autistic individuals have the right to learn sexual education and engage in sexual activities.
- Without proper education, autistic individuals may engage in socially inappropriate or dangerous ways to fulfill sexual and intimacy desires.
- Sex Education is preventative and proactive.

What to Teach and How to Teach

What

- Facts
- Skills
- Terms (Proper and Slang)
- Social Aspects

How

- Explicit
- Break Down into More Manageable Pieces
- Use of Images and Video
- Visual Supports
- Vignettes
- Role Play*
- Examples from Real Life*
- Return to Topics Repeatedly
- Check for Comprehension

Inclusion of LGBTQIA+ Identities

- Higher rates of LGBTQIA+ Identities.
- Higher rates of depression, anxiety, and other mental health concerns in autistic LGBTQIA+ individuals compared to heterosexual or cisgender autistic adults.
- Higher incidence of gender variance in autistic individuals.

Inclusion of LGBTQIA+ Identities

- Explanation of body parts and intercourse; inclusion of Intersex.
- Monitoring absolute terms (e.g., “most individuals assigned female at birth” versus “all women”).
- Ask individuals their preferred language and remain open to new identities or terms.
- Do not assume someone’s sexual orientation or gender identity.

What to Teach and How to Teach

FACTS

- The Body
 - Anatomy
 - Masturbation
 - Puberty
 - Pregnancy
- Sex with Self & Others
- Personal Hygiene
- Legal Aspects
- Boundaries/Touch

Medical versus Slang Terms

Actual images

Normalization of variations in
body parts

Explicit Laws

Public versus Private

Rating	I can touch what parts of my body?	Where can I do it?
5	Genitals (privates)	Bedroom—door closed, Bathroom—at home
4	Thighs, Bottom, Inside Nose	Bedroom or Bathroom
3	Bare Feet, Belly	At Home
2	Arms, Legs, Hair	Anywhere
1	No touching	Anywhere



Masturbation: Reflection Questions

What are you own personal beliefs about masturbation?

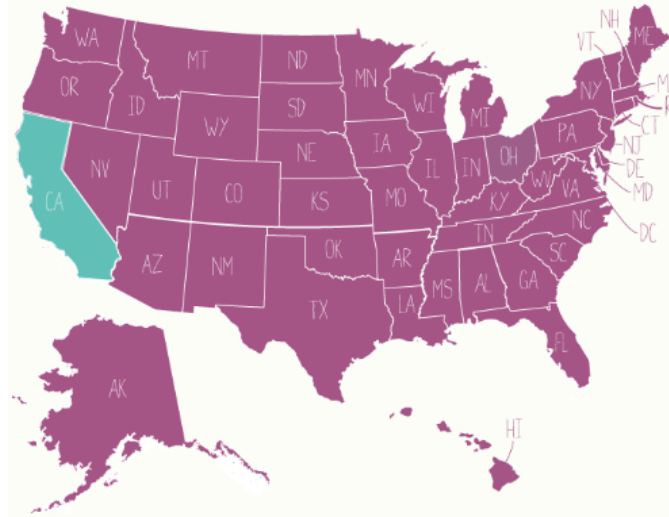
What has influenced your beliefs around masturbation? (e.g., media, family beliefs, religion, porn)

Have you figured out what makes you feel excited when masturbating? (e.g., sexual fantasies, videos, images, sex toys)

If you masturbate, where is a place that you feel is private and comfortable enough for masturbation?

How do you let others in your household know when you need privacy (e.g., telling them, closing the door to your room)?

Sex in the States



Wondering what's going on in your state? See how your state stacks up on sexuality issues for teens. And don't forget to find out how to **make a difference on these issues**.

California

 Sex Ed Rights	17 Age of Minority	18 Age of Consent
 LGBTQ Rights	 HIV / AIDS Testing	 Condoms
 Birth Control	 Abortion Rights	 Pregnancy
 Emergency Contraception	 Sexting	 Show All

Sex ed Rights

- California state law requires that comprehensive sex ed is taught in grades 7 to 12. A school can choose to offer sex ed earlier than grade 7 as well.
- California public schools do not teach abstinence-only-until-marriage programs.
- Sex ed must include information about the effectiveness and safety of all U.S. Food and Administration (FDA)-approved contraceptive methods, including emergency contraception (EC).
- California requires that instruction and materials are appropriate for students with disabilities and students of all races, genders, sexual orientations and ethnic and cultural backgrounds.
- California law also requires instruction about gender, gender expression, gender identity and gender stereotypes.
- California requires that students in grades 9 to 12 learn about sexual harassment and violence, consent and prevention and reporting of sexual harassment.
- Parents or guardians can remove their children from sex ed classes. This is known as an "opt-out" policy.



Age of Minority

- In California as in most states, you are considered a minor (someone who is not an adult) if you are under 18 years old.
- Keep in mind that laws about whether you're considered a minor may be different if you are pregnant or married or are a minor who has gained the right to live without a parent or guardian.

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Age of Consent

- Legally, people can't consent (or agree) to sex (with someone who is considered an adult) until they reach a specific age. This is called the "age of consent." These laws are meant to protect minors from being manipulated or forced into sex with older people.
- So in California, you can legally consent to sex when you become 18 years old.

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What to Teach and How to Teach

SKILLS

- Expressing Affection
- Preventing Exploitation
- Dating
- Consent and Self-Advocacy
- Online Safety

Vignettes
Role Play
Group Discussions
Peer Support

In the table below, mark whether the activities or behaviors from the left column be to friendship, dating, or with a family member.

As in the example, you can mark more than one answer.

	Friendship	Dating	Family
<i>Example</i>			
Going to the movies together	X	X	X
Walking together hand in hand			
Giving compliments to one another			
Wanting to see each other every day			
Having contact with each other every day by phone or computer			
Hugging			
Comforting each other when one of you is sad			
Seeing each other at home			
Being honest with one another			
Playing around with one another			
Massaging each other			
Taking a bath or shower together			
Kissing on the cheek			
Kissing on the mouth			
Touching genitals			
Sleeping in one bed together			
Sleeping over			
Sexual intercourse with each other			



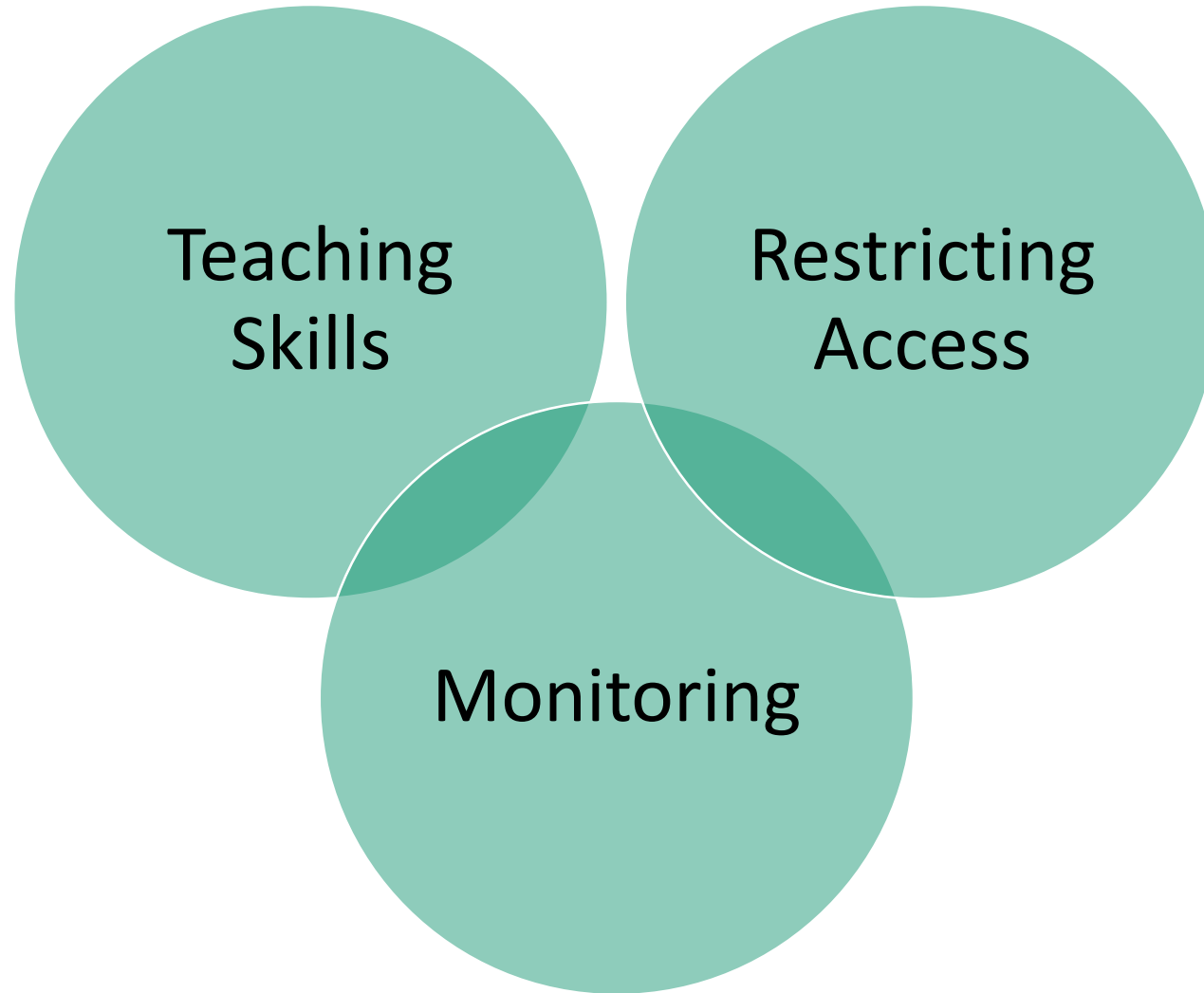
Exercise 2:

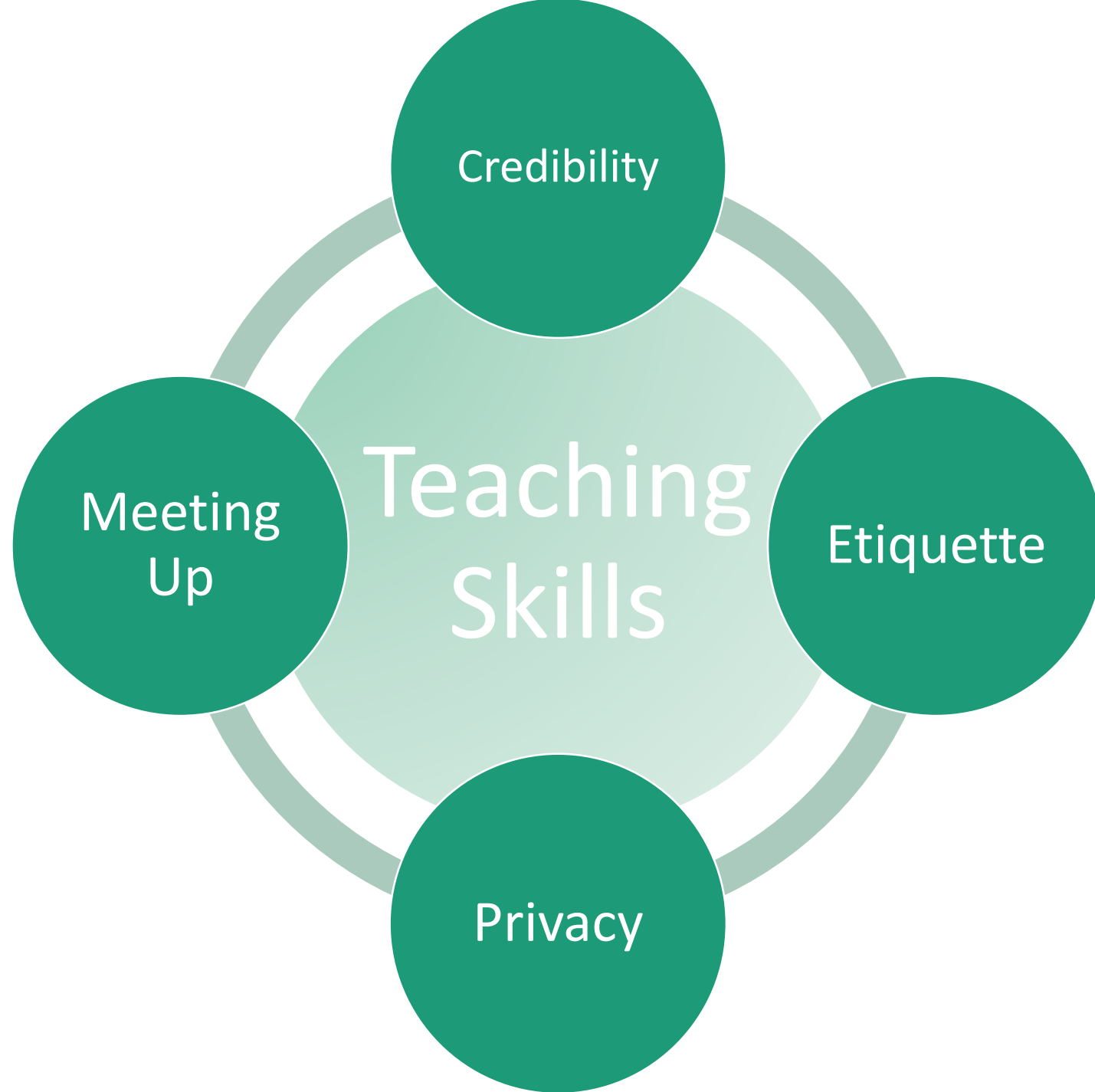
Your own personal boundaries

Using a red **stop** card and a green **ok** card, show if the following situations overstep your boundaries (**stop**) or if the situation is acceptable (**ok**).

1. A professor gives you a pat on the back because you got a high grade on a test.
2. A therapist gives you a compliment and says "You look attractive today".
3. While you are taking a test a professor leans over you to be able to read what you are writing.
4. An older man at a bus stop asks for your name.
5. An older man comes up to you at a bus stop and asks where the bus is taking you.
6. When you are in your room someone enters your room without knocking.
7. When you pass a few peers in the hall they make remarks about your appearance.
8. A good friend takes your mobile phone without asking and starts looking at your text messages.
9. In the movie theatre a stranger comes and sits directly next to you with his or her arms and legs touching yours.
10. Someone you have only met online asks for you to send them a picture of yourself.
11. Someone at a coffee shop asks if you would be interested in joining them for coffee.

Online Safety





Consent

EMOTIONAL SAFETY VS. PHYSICAL SAFETY

Physical safety is fairly straightforward: preservation of your physical health and bodily integrity.

Emotional safety can be more nebulous: preservation of your emotional integrity and mental health.

You can engage in play that's physically safe, but is emotionally edgy (cheating, for instance, or exploring kink).

Similarly, you might feel emotionally safe (perhaps in a monogamous partnership) but your physical safety is compromised if your partner has an undiagnosed STI.

Knowing the difference between physical and emotional safety is key to negotiating safer sex boundaries. And for sex to be good and consensual, you need to be able to get both your physical and emotional safety needs met. If you don't know that a protocol need you have is really an emotional safety thing, not a physical one, it can be hard to communicate with your partner(s) why you need something.

How do you figure out your emotional needs? Consider your emotional situation. Are you partnered? Single? Seeking a partner? Playing the field? A sex partner doesn't have to be the mirror image of your emotional needs, but they need to be able to hear where you're coming from and support you in it.

The bottom line is, your boundaries are your own. You get to decide what makes you feel safe. You can have *übersafe* sex by using gloves, condoms, and dental dams, and not kissing. Or you can trust in your partners to get tested and report their status to you and not use any barriers at all. It's your body, and it's your choice. You get to define your boundaries, and you can negotiate them with your partners if you want. But don't feel bad about any of them. As long as you've thought it through, they're yours and they're fine.



My "Safer Sex" Protocol

A "Safer Sex" protocol is intended to help you feel both emotionally and physically safe when engaging in sex and/or intercourse with a partner. These protocols are different for everyone and very often change depending on how you are feeling. This is not intended to be set in stone; but rather, you can modify it with time.

Below, you will find some examples to include in your "safer sex" protocol.

1. Asking my partner to test for STD/STI before sex with a partner
2. Testing myself for STD/STI before sex with a partner
3. Discussing consent before hand
4. Discussing "safe words" before hand (e.g., traffic light: red/yellow/green, saying a sentence of what you don't like) to check in during sexual activities
5. Using condoms (internal or external)
6. Using birth control (pill, IUD, patch, etc.)
7. Being in a committed relationship
8. Only engaging in sexual behaviors both my partner and I feel comfortable with
9. Defining what is considered sex
- 10.
- 11.
- 12.

What to Teach and How to Teach

SOCIAL ASPECTS

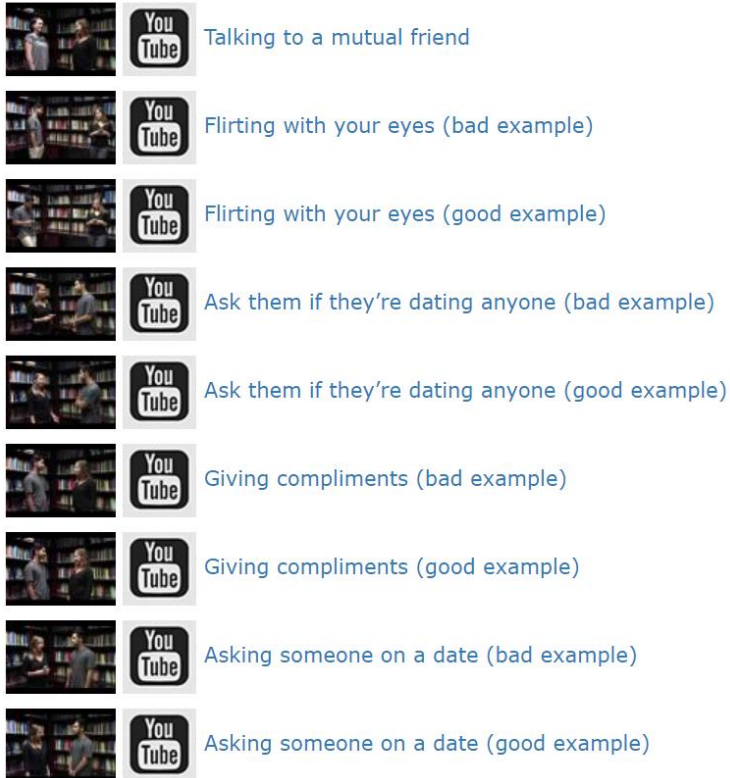
- What to Do
- What Not to Do
- How to Do It
- And...WHY? (Big ideas!)

Vignettes
Role Play
Group Discussions
Peer Support

Social Aspects

UCLA PEERS®

Dating Etiquette



- Coping with rejection
- Coping with “peer pressure”
- Normalization of sexual desires
- Being in a relationship

Considerations for Parents & Providers

- Providing a space free of judgment
- Helping your child or client identify *who* they can turn to
- Understanding your own comfort level and how cultural components may influence your beliefs
- Seeking support for yourself

Summary

- Sex education is important for the neurodivergent population.
- Parents and providers should consider sexual health as a core component of development.
- Sex education can and should be preventative and proactive.

Resources

- Sex Ed. Guide for Self-Advocates by Organization for Autism Research (OAR): <https://researchautism.org/sex-ed-guide/>
- Dr. Eileen Crehan's research lab: <https://sites.tufts.edu/crehanlab/activities/resources/>
- UCLA PEERS for Dating: <https://www.semel.ucla.edu/peers/peers%C2%AE-dating>
- Planned Parenthood: <https://www.plannedparenthood.org/learn>
- Intimate Relationships and Sexual Health: A Curriculum for Teaching Adolescents/Adults with High-Functioning Autism Spectrum Disorders and Other Social Challenges by Catherine Davies & Melissa Dubie
- Sexuality and Relationship Education for Children and Adolescents With Autism Spectrum Disorders by Davida Hartman
- Girls Growing Up on the Autism Spectrum: What Parents and Professionals Should Know About the Pre-Teen and Teenage Years by Shana Nichols
- Girl Sex 101: A Queer Pleasure Guide For Women and Their Lovers by Allison Moon
- Autism Spectrum, Sexuality and the Law: What Every Parent and Professional Needs to Know by Tony Attwood, Isabelle Hénault, & Nick Dubin

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