




# **SEX IS AN INDEPENDENT LIVING SKILL**

**WHY IS IT IMPORTANT TO HAVE A  
SEX POSITIVE CENTER?**

**Why did you  
choose to attend  
this session?**



# IT IS OUR HOPE THAT WHEN YOU LEAVE TODAY, YOU WILL....

- Gain an understanding that people with disabilities are sexual beings and think about the different types of sexuality that encompasses
  - Gain knowledge about why it is so important to acknowledge sexuality in human beings
  - Understand the way disability can affect sexuality and vice versa
  - Think about ways your IL Center of your work can incorporate sexuality/relationship education for your consumers
  - Gain tools and resources to bring sexuality and relationship education to your center and your work
  - Question your own values and attitudes about sexuality and become more sex positive both as a center and an individual
- 

**SEX**



**SEX IS  
NOT BAD**



**SEX IS  
GOOD**



**SEX IS**

**AWESOME**




# **SEX IS AWESOME**

## **WHEN.....**

- 1. Everyone involved consents**
- 2. Everyone involved is knowledgeable**
- 3. Everyone involved is safe**
- 4. Everyone involved is equal**



# WHAT IS SEXUALITY? ( AND WHAT SEXUALITY IS NOT)

- Sexuality is not about “doing” something that is sexual in nature
  - Sexuality is not just about private parts
  - Sexuality and sexual feelings are not immoral or bad
  - Sexuality is broad and complex
  - Sexuality is part of who we are as individuals
  - Sexuality is biological, encompassing our entire body and develops throughout the entire lifespan
  - Sexuality, like disability, is NATURAL.
- 

# GROUP AGREEMENT TIME

Judgment free zone

Safe space

Respect everyone , use respectful language- (OUCH-OOPS)

Don't assume everyone's heterosexual or from the same type of family

It's ok to pass, it is okay to sit and listen

Respect differences of opinion

There is no such thing as a stupid question

Confidentiality unless..

Have fun



**WHAT MESSAGES WERE YOU GIVEN GROWING  
UP? PARENTS, FRIENDS, MEDIA**

**ABOUT MEN?  
WOMEN?  
PEOPLE WITH DISABILITIES?**



# FIND SOMEONE WHO....

**YOUR GOAL:** Get as many “ YES“ answers as possible.

Ask each person one and only one question , if you get a “YES” have them initial, if you get a “NO” move on.

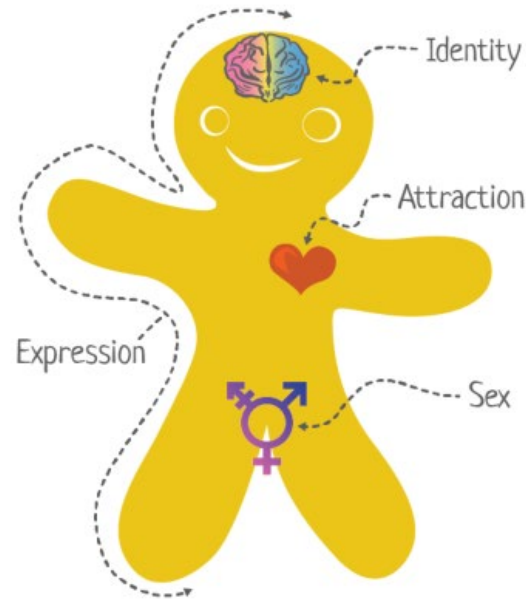
No just pointing at the question, you have to actually say the words.



# STATISTICS

- Study's show that 84 % of women and 30% of men with an intellectual disability will experience sexual assault in their lifetime.
- 49% of people with intellectual disability will experience 10 or more sexually abusive incidents
- Women with a disability experience sexual at triple the rate of those without disability
- Less than 4% of serious crimes against people with disabilities are reported.
- 66% of women with physical disabilities are sexually assaulted
- Transgender women are at a 4.3 times greater risk of murder
- 67% attempted suicide rate of trans people with disability

# The Genderbread Person v4 by its pronounced METROsexual.com



⊖ means a lack of what's on the right side

### Gender Identity

- Woman-ness
- Man-ness

### Gender Expression

- Femininity
- Masculinity

### Anatomical Sex

- Female-ness
- Male-ness

Identity ≠ Expression ≠ Sex  
Gender ≠ Sexual Orientation

Sex Assigned At Birth  
 Female  Intersex  Male

### Sexually Attracted to... and/or (a/o)


- Women a/o Feminine a/o Female People
- Men a/o Masculine a/o Male People

### Romantically Attracted to...


- Women a/o Feminine a/o Female People
- Men a/o Masculine a/o Male People

# SEXUAL BELIEF WORKSHEET

**This is just a quick self evaluation of your values and attitudes about sex. Answer each statement with a yes or a no. You will not be asked to share your answers, this exercise is just for you.**




# **RISK FACTORS FOR PEOPLE WITH DISABILITIES**


- ✓ Physical limitations can cause increased vulnerability
  - ✓ Need for personal care attendant
  - ✓ Abuse by Doctors, Nurses, or Caregivers
  - ✓ Language, speech or vocabulary limitations
  - ✓ Isolation-limited support system
  - ✓ Lack of sexual autonomy, or self autonomy
  - ✓ Unsafe organizational structures or policies
  - ✓ Decreased access to good Sexual Education
- 



# WHAT'S WORKED FOR US SO FAR

- Create brag-worthy activities and experiences.
  - Creating a network of caring, safe professionals who they can trust.
  - Family support (support groups, parent education).
  - Collaboration with CAPSA, education and therapist.
  - Healthy relationship classes in special education classes.
  - Sex positive staff training.
  - Created a “safe space” LGTBQA+
  - Comprehensive sexual education for over 90 people with disabilities.
- 


# **MYTHS ABOUT TEACHING SEXUAL EDUCATION TO PEOPLE WITH DISABILITIES?**

- 1. People with disabilities aren't sexual beings.**
  - 2. They are "Angels"- (mind of a 3 year old).**
  - 3. They learn it at school.**
  - 4. They wouldn't be able to handle it.**
  - 5. It will plant a seed in their minds.**
- 


# MYTHS ABOUT TEACHING SEXUAL EDUCATION TO PEOPLE WITH DISABILITIES?

1. We already had “the talk”
2. If we teach about it we are condoning it-  
LGBTQ
3. They aren’t interested- questions
4. We didn’t need it explained to us, it will  
come naturally, they will figure it out- TSS,  
condoms
5. It will cause them to sexually act out

# **EXPLOITATION PREVENTION**


- Boundaries in relationships
  - Relationships and body rights
  - Personal care and body rights
  - People with disabilities are systematically denied access to basic information about sexual health and relationships
  - Dependency on others for long term care, social isolation and attitudes can make people more vulnerable to abuse
  - Overprotection can increase risk for abuse
  - Increasing self esteem and support systems decreases risk of abuse
  - Use teachable moments
- 

# HOW TO DISCUSS SEXUALITY

- Be sex positive
  - You don't have to have all the answers
  - It's OK to feel embarrassed
  - It's OK to answer later
  - Give facts, not opinions
  - Be concrete, graphic
  - Use repetition
  - If they are not understanding what you are saying, find a different way
  - Try to give a consistent message
  - Try not to react- poker face
  - Use teachable moments
- 

# TEACHABLE MOMENT FORMAT

## RESPONDING TO BEHAVIORS OR COMMENTS

1. Is it better to ignore the situation or comment, if it is inappropriate, then continue with the following steps
  2. Name the behavior/comment to the person as you see or hear it.
  3. Find out the meaning or cause of the behavior/comment to the person. Find the why?
  4. Decide what message you want to give.
  5. Give the messages by responding simply.
  6. Encourage the person to give you feedback
- 

# THREE KINDS OF QUESTIONS

## A. Factual, how to

What is a boner?

How are babies made?

How do I meet people?

## B. Values, Opinions

Should I have sex?

What contraception should I use?

## C. Personal

When did you start having sex?

Did you have sex last night?



# SCENARIOS: WORKING WITH CONSUMERS

A consumer masturbates in the bathroom at your agency/school. She locks the door to maintain privacy, but she is sometimes in there for up to 45 Minutes. There is no other bathroom for employees to use. What might be going on? How would you respond?





# SCENARIOS: WORKING WITH CONSUMERS

**You see a consumer giving a bear hug to a new staff member on the first day of work. What might be going on? How would you respond?**



# SCENARIOS: WORKING WITH CONSUMERS

A staff member is visiting a person with a disability in their home.


The consumer is watching pornography and leaves it on while the staff person is there.

What might be going on? How would you respond?



## **SCENARIOS: WORKING WITH CONSUMERS**

**A 14-year-old female thinks a boy likes her because he is putting his arm around her on the school bus . He is actually making fun of her. What might be going on? How would you respond?**




# SCENARIOS: WORKING WITH CONSUMERS

A female consumer tells you that a man at work is constantly touching her breasts and legs whenever he gets a chance (in private). What might be going on? How would you respond?



# FINAL THOUGHTS

- **People with disabilities are sexual**
  - **Sexuality is a natural part of being human**
  - **Sexuality is all encompassing; body, privacy, social, relationships, prevention**
  - **Teaching sexual health can help individuals with independent living in general**
  - **Even if you don't teach classes, being approachable and askable with this topic is a great step**
- 

**COMMENTS?  
QUESTIONS?  
IDEAS?**

# FOR MORE INFORMATION

## OPTIONS *for* Independence

Making independence a reality

106 East 1120 North, Logan  
UT 84341

435-753-5353

[www.optionsind.org](http://www.optionsind.org)

Presenter: Jennie Ostermiller

Email: [jostermiller@optionsind.org](mailto:jostermiller@optionsind.org)