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Experience of Adults with Special Needs in Sexual Education Programs

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Abstract
Adults with special needs are discouraged from exploring their sexuality, expressing it, accessing sexual health care, and learning about their sexual rights. As a result, this population experiences higher rates of sexually transmitted diseases and sexual abuse than the general population (Saxe & Flanagan, 2014). Adults with special needs deserve to receive sexual education programming that provides them with the information they need to make informed choices about sexuality and relationships. Understanding their experiences in sexual education programs can better inform future programming for this population.

Introduction
Adults with special needs are often viewed as childlike or asexual. They are discouraged from exploring sexuality. This is internalized and results in poor self-image and negative feelings towards sexual impulses and urges (Swango-Wilson, 2008). This population has the same sexual feelings as any other human being. Their voices and experiences about sexual education are absent in current literature.

Question/Objective
To understand the lived experience of adults with special needs in sexual education programs.

Methods
Phenomenology: a research method that explores a shared lived experience

Social Constructionism: the theoretically framework used in this study

Participants
• 6 individuals chose to participate in interviews
• 3 identified as female, 3 identified as male
• All were diagnosed with Autism and/or Intellectual Disability
• All were their own guardians

Themes

Theme 1: Feelings of Embarrassment and Discomfort
“Th was really uncomfortable when I saw them using the lubricants in the classroom. At that time in high school, I had to walk. I had to excuse myself from the school because I was too uncomfortable and disgusted on it.” (“David”)
“Learning about STDs made me afraid of sex.” (“Alex”)
“I got made fun of a lot in the class.” (“Bill”)

Theme 2: The Importance of Sex Ed
Sub theme: Individuals learn a lot
“We learned about periods, how to be a woman, and having sex.” (“Sasha”)
“We had to learn all the different parts of the reproductive system like all the organs.” (“Alex”)

Sub theme: Individuals learn how to apply their knowledge of sex and healthy relationships in everyday life
“What you learn in sex ed can prevent unwanted pregnancies.” (“Jill”)
“I learned about birth control for men and how to use it correctly. Having the steps explained helped me learn.” (“Alex”)
“It’s important to learn about sexual health because you want to protect yourself and not get in situations that you can’t control.” (“Samantha”)

Theme 3: Trusted Sources of Information
“I would go to my doctor to ask questions because doctors are the ones that make you feel healthy.” (“David”)
“I would go to my counselor. She knows that stuff. They know about sex stuff.” (“Bill”)

Results
Three themes were identified through the study. 1) Adults with special needs experience feelings of embarrassment and discomfort during sexual education programming. Individuals report being bullied in classes, feeling so uncomfortable they need to leave the classroom, and being embarrassed about the subject matter being discussed. 2) Even though this population may experience discomfort and embarrassment, they identify that sex ed is important to receive. Individuals report learning a great deal about birth control, reproduction, STDs, and self-advocacy in relationships. Not only that, they learn how to apply this knowledge to their everyday lives. 3) Adults with special needs are able to identify who they trust in their lives to give them correct information about sex and relationships. Overwhelmingly, individuals identify medical providers (primary care doctors and mental health counselors) as the sources they trust the most for sexual health information.

Discussion/Conclusions
What has been absent from current literature on this topic are the voices of adults with special needs and their experiences in sex ed. The fact that adults with special needs identify the value of sex ed in their everyday lives and who they see as trusted sources to provide them with correct information is groundbreaking. Individuals with special needs want to learn about sexual education and healthy relationships. Further work on this topic could include developing curriculum for primary care doctors and counselors to better prepare them to speak to this population about sexual health care. Future research studies that aim to understand the experiences of adults with special needs in sexual education programs may consider utilizing “ethnodrama” as a research method (Davis, 2014). Since this population often struggles with articulating their experiences, ethnodrama would offer another means to express their experiences.