

Sexual Health Knowledge Among Self Advocates

Dr. Rachelle Hole and Dylan Ermacora

Literature Review

Sex ed programs for Self advocates (SAs) focus on protection and prevention. Limited attention is given to developing healthy, positive relationships (Schaafsma, Kok, Stoffelen, & Curfs, 2014).

Negative views of sex in SAs may result in self-imposed abstinence involving fear of intercourse, intimacy, or outcome (Bernert & Ogletree, 2013).



There is a lack of information regarding choice and control for women labelled with intellectual disability (McCarthy, 2014).

Parents often do not see a need for sexual health knowledge for their children with intellectual disability (Leutar & Mihoković, 2007).

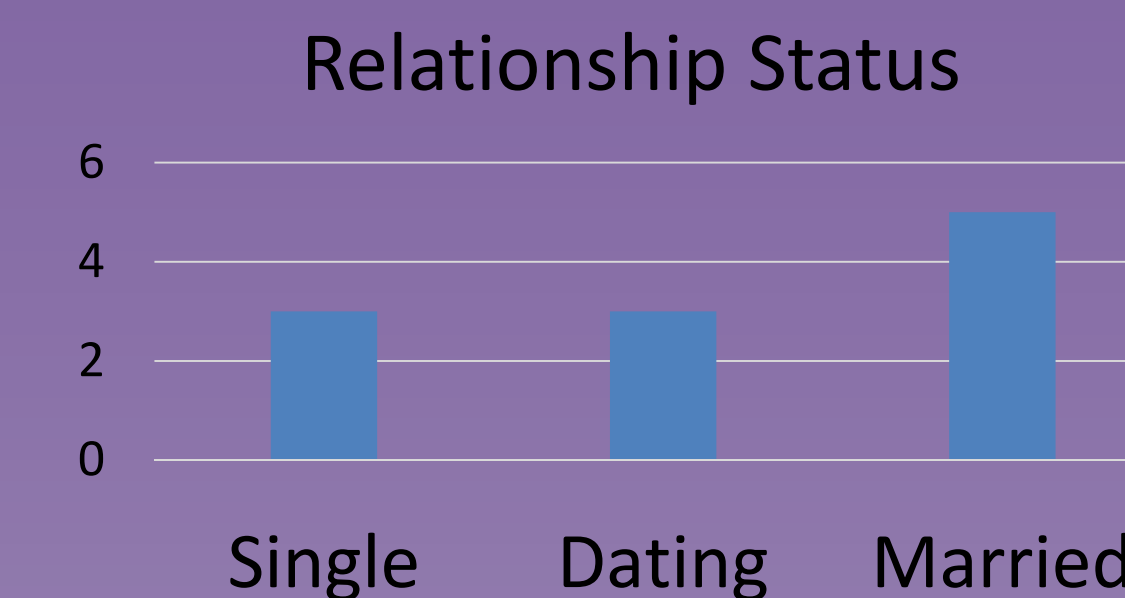


Research question:

“What are the experiences of sexual education and knowledge acquisition among adults with an intellectual disability?”

Participants

6 ♂ 5 ♀



Results

- Most reported learning about sexual health through school in an integrated classroom with students their age
- Perceptions of learning in a classroom about sexual knowledge were generally positive
- Some suggested that it was more comfortable to learn in this setting because “you don’t really have to speak”
- Suggestions for learning were to avoid making it “cut and dry” by adding “fun” elements, presenters being fully prepared before class, and segregation by gender for younger students



“Being Safe”

- Most commonly identified topic participants said they learned was about safety, boundaries and “safe sex”
 - this message was received from school, professionals, and parents or caregivers
- Several commented that their parents wanted to be “protective” of them
- One suggested that their parents didn’t talk to them about sex because they were “afraid and very protective”. Another commented that his parents’ emphasis on safety left him feeling frustrated. “It is, being [disabled], I felt in the back seat... Like, um, left out.”
- While safety is reportedly the main message being received, one participant felt that not enough information was given about potential health risks involved in sex; had to learn through personal experience.
- Few participants mentioned learning about benefits of sex or sexual pleasure. What was learned was sought out by the individuals themselves - either through lived experience or information found on the Internet

Sexual Diversity

- About half of participants said education lacked information about different sexual orientations
- Learned about mainly “male and female relationships”, but not about sexual diversity
- One participant shared they learned about sexual diversity from co-workers discussing their own relationships
- Every participant who commented on the lack of this information stated that this was an important piece of learning that should be included in sexual health education



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Research project supervised by Dr. Rachelle Hole, Associate Professor UBC, rachelle.hole@ubc.ca

Contact Dylan Ermacora at dylanermacora@alumni.ubc.ca

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