

CHALLENGES AND  
SUCSESSES FOR  
PARENTS WHEN  
ADDRESSING  
SEXUALITY WITH THEIR  
CHILDREN WITH  
INTELLECTUAL  
DISABILITY.

By Kelly Hill, Family LEND Trainee



# What is sexuality?

- While not all individuals choose to be sexually active, all individuals are sexual beings. Expressions of sexuality include, but are not limited to, socialization, activities of friendship, boundaries in relationships, body awareness, human connectedness, genital interactions, assertiveness, self image, self-care, decision making, and personal code of ethics.



1. How do you view your son's or daughter's physical/sexual maturity?

2. Have you been able to discuss your values about sexuality as a family?

- Why/Why not?

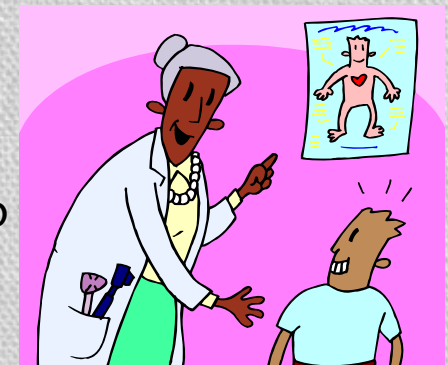
3. How did you give sexuality education to your child?

-What helped you or would have helped you when addressing this topic with him/her?

4. Have you found sex education that has been taught in the classroom to be helpful?

- Why/Why not?

5. How could/did your medical provider help you in addressing sexuality with your child?



## Parent's responses....

- Physically she developed sooner than her typical twin sister. She had her period at least 1.5 years a head of her twin. Intellectually she is maybe at a 9 - 10 year olds level, she is very interested in boys but thinks holding hands, and sleeping in the same bed is a deep relationship.
- Start when they are toddlers talking about hugging and kissing people. Ok with family if they feel comfortable but otherwise just saying "hi" like your other kids is better. Kids with disabilities sometimes can not tell in social situations when it is ok to hug someone, kiss them, sit on their laps and when it is not. It can be a big problem.
- As far as Sex Ed, we appreciate what the Seattle school district is presenting & NOT presenting in his self-contained 4th grade classroom (his class is focusing on public & private & "trusted adults").

# Responses continued...

- I started at age 7-8 to talk to her about her period, also the other girls. What would happen and what we were going to do about it. Then I had to help her and help her to stay clean. She would never use a tampon. So she just did not swim when having her period. Now she takes a birth control pill every day so she does not have a period. Her sisters do also
- We have very strong boundaries about who touches our bodies and who are safe adults. I discuss lots of safety issues with her. I also make sure she always gets dressed in the bathroom or bedroom for privacy and doors are always shut. No running around naked, ever.
- Our guys have always had and still struggle with the interactions of people and what is flirting, what is appropriate behavior with same or different sexes, what are friends and what are “girl friends”.... the list goes on.

# The Role of Medical Providers...

- No real help from Doctor, just warning that she is vulnerable to sexual abuse.
- the big one is to start early, appropriately to young children and then move into older/ with pictures so can see what you mean. She also attended the FLASH curriculum in middle school but not sure got much out of it as she would have wanted to ask questions and would not have been appropriate there. She and I still talk about it together and also with her doctor at her physical.

