

Module 4:

Sexual Health & Education for Transitional Age Youth diagnosed with Autism Spectrum Disorder

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Outline

- Importance of sexual health education for youth diagnosed with ASD
- Overview of sexual health & behavior for youth diagnosed with ASD
- Promoting sexual education for youth diagnosed with ASD
 - Addressing inappropriate sexual behavior and boundary setting

Importance of Sexual Health Support for TAY diagnosed with ASD

- Transition age youth (TAY) diagnosed with ASD receive less sexual health curriculum support than neurotypical peers
- Teachers and caregivers do not feel efficacious delivering sexual health education to TAY with diagnosed ASD
- Communication and social deficits for TAY diagnosed with ASD limit their ability to access and integrate sexual health education compared with neurotypical peers
- In all, normative development of sexual feelings and drive for TAY diagnosed with ASD do not correspond with sexual health knowledge and “know-how” in romantic relationships

(Koegel, Detar, Fox, & Koegel, 2014)

Pediatric Barriers to Care for Healthy Sexual Behavior for TAY Diagnosed with ASD

- Pediatricians discussed less than 50% of age-appropriate sexuality topics (at least once) with youth diagnosed with ASD and their families during routine visits
 - Least prevalent topics included sexual orientation, psychoeducation for caregivers, and sexual abuse
- Why is it so hard for care providers to promote healthy sexual development for TAY diagnosed with ASD?
 - Perceived barriers by pediatricians:
 - Logistical barriers (i.e., contact time, access to resources)
 - Pediatrician & parent discomfort
 - Lack of training & absence of information specific to this population

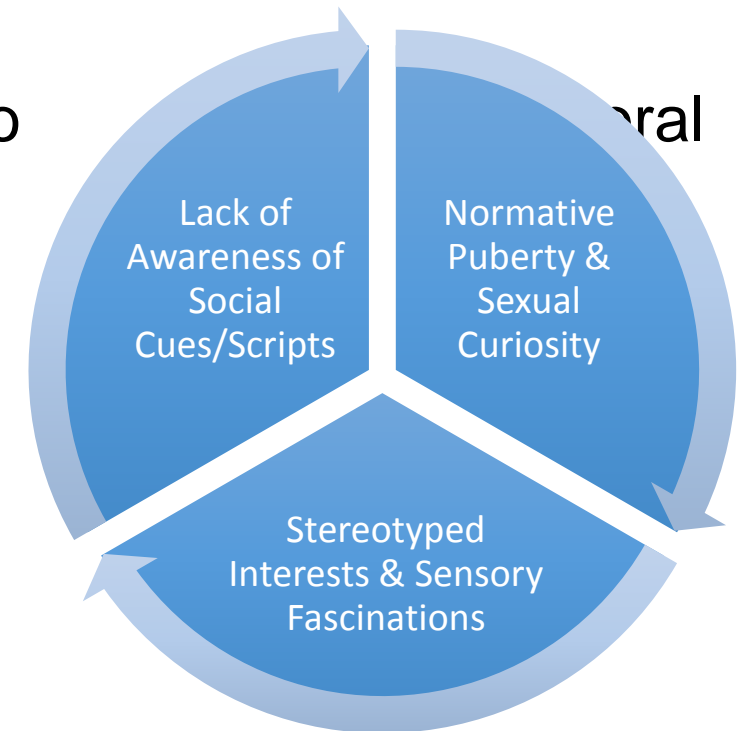
(Holmes et al., 2014)

Sexual Health for TAY Diagnosed with ASD: Typical Development

- Findings from limited research on developing sexuality of adolescents diagnosed with ASD:
 - Age-appropriate desire for sexual relationships and companionship
 - Age-appropriate sexual curiosity & engagement in a variety of sexual behaviors (e.g., masturbation)
 - More difficulty adjusting to and understanding physical changes of puberty
 - Normative development of sexuality more common for TAY diagnosed with ASD who are higher functioning
 - However, since higher-functioning TAY diagnosed with ASD might have more social interaction with peers, there is potential risk for more inappropriate sexual behavior without support
- (Chan & John, 2012; Dewinter et al., 2015; Dewinter et al., 2017)

Sexual Health for TAY Diagnosed with ASD: Challenges

1. Inappropriate sexual behavior (e.g., hypermasturbation, unwanted romantic gestures, exhibitionism) occurs with 25-30% of adolescents with ASD
 - Can be treated via psychopharm in addition to and educational interventions
 - Prevalent issues with legal consequences:
 - Masturbation and privacy issues
 - Sexual touching and boundary setting
2. Safety & increased risk for victimization
3. Mutual satisfaction in sexual relationship



(Beddows & Brooks, 2016; Chan & John, 2012; Chen et al., 2016; Fernandes et al., 2016; Koegel et al., 2014)

Promoting Sexual Health Education for TAY Diagnosed with ASD

- 50% of adolescents diagnosed with ASD have had no formal sex education compared to neurotypical peers
- Teachers perceive low-functioning youth diagnosed with ASD as having more inappropriate behavior but at less risk for legal or safety concerns than high-functioning youth who have more interactions with neurotypical peers
- Addressing parent expectations for their child's romantic or sexual lives may better support parent-child sexuality communication for youth diagnosed with ASD

(Beddows & Brooks; 2016; Holmes et al., 2016; Kalyva, 2010)

Promoting Sexual Health Education for TAY Diagnosed with ASD

Sexual Education Topics	Rationale for Sexual Education Topic
Theory of mind	Increase awareness of effect of sexual behavior on others
Social norms and rules (e.g., privacy, consent, safety)	Increase awareness of appropriate sexual behavior across settings including privacy, consent, and setting boundaries
Interpretation of senses	Increase understanding of body awareness in relation to romantic and sexual relationships
Formal sex education	Comprehensive sex education
Coordinated parent education	Socioculturally sensitive continuity of education (Beddows & Brooks, 2016)

Promoting Sexual Health Education for TAY Diagnosed with ASD

Sexual Behavior Interventions	Example		
Applied Behavior Analysis	Systematic reinforcement of appropriate romantic and friendship relationship behaviors with reduction of inappropriate sexual behavior (e.g., public masturbation)		
Social Stories	Description of puberty-related changes that match the perspective and comprehension level of youth with ASD		
Social Behavior Mapping	Explains the social rules and norms for sexual behavior, including internal motivation and effect on others (see below)		
Hugging Classmates (Expected Behavior)	How others feel	Consequences	How you feel
Keep hands at my desk or side	Comfortable	People feel okay being around me	Happy

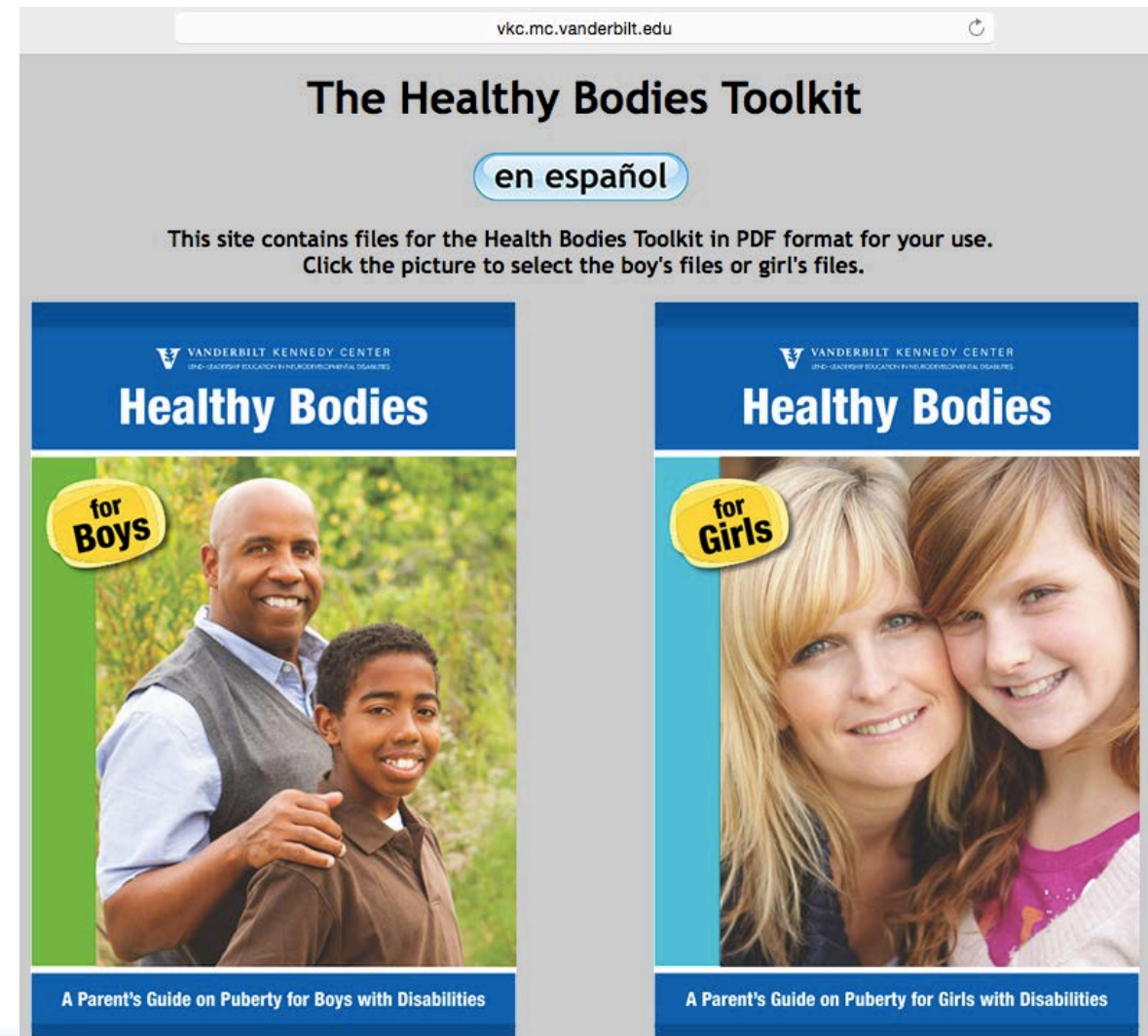
(Ballan & Freyer, 2017)

Overarching Takeaways

1. Sexuality is a normative part of development for TAY diagnosed with ASD
2. There is no one size fits all approach to sexual health - each youth diagnosed with ASD will present with their own developmental, communication, and social challenges regarding healthy sexual behavior
3. Sexual education should incorporate concrete rules that support appropriate sexual behavior and safe boundary setting in romantic relationships matching the developmental spectra of the youth
4. It is strongly recommended to include sociocultural and family systems approach to the psychoeducation and promotion of healthy sexual behavior for youth diagnosed with ASD

Additional Resources

- Sex Education Curriculum:
The Healthy Bodies Toolkit
(Vanderbilt Kennedy Center)
<http://vkc.mc.vanderbilt.edu/healthybodies/>



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