

.46 Sexuality and DD (6-21)

Feedback Exercises

Chapter One

1. T/F Sexuality is part of who you are as a person (identity and preferences).
2. T/F Teaching people that sexuality should not be expressed can create problems that negatively impact mental health or behavior and how they are treated by others.
3. T/F People with disabilities should **not** have the opportunity to develop close, trusting, and committed relationships.
4. T/F In providing sexuality education it is important to be aware of the identity and preferences for each person.

5. Identify three reasons why people do not share or provide meaningful information about social/sexual behavior with people who have intellectual or developmental disabilities.

6. Which of the following are true statements about people with I/DD and information about social/sexual behavior:
 - May not understand the information because it is too abstract (can't be seen or touched).
 - May have difficulty remembering and applying the information in different situations.
 - They generally learn this age with peers during school or from parents.
 - They clearly understand what behaviors are appropriate from watching others.
 - May not fully grasp what is shared because the pace of instruction is too fast.

7. Match the terms to their definitions.

A. Sex

B. Gender Identify

C. Sexual Identity

_____ Describes how a person thinks about themselves when they have romantic or sexual relationships.

_____ Identification as being male or female at birth based on biological facts.

_____ Beliefs about what it means to be a boy or girl, or a man or a woman.

8. List four of the six common values that most everyone agrees on regardless of their sex, gender identify, sexual preferences, and religious beliefs, according to Kathrine McLaughlin.

9. What are three important roles that DSPs have in regard to sexuality and people receiving services?

Chapter Two

1. The relationships people have are called _____.

2. A _____ is the way two or more people are connected.

3. List 4 qualities of a healthy, positive relationship:

4. T/F Relationship mapping should be used to help staff decide who a person supported can have a relationship with, and people they should not be allowed to see.
5. T/F People with I/DD may need help or support to understand how to get to know someone.
6. T/F People behave and learn differently in groups.
7. T/F Teaching someone how to navigate the hidden rules of a group is an essential part of teaching social skills, self-advocacy and self-determination.
8. Give two examples of “hidden rules” for social situations you could point out to people you support. Give examples of things that, if done, could result in loss of friendship.

Chapter Three

1. What are two situations discussed in the chapter that can be a challenge involving consent?
2. List four aspects of *privacy* related to sexuality.
3. What are four assessment questions that should be addressed in regard to a person’s right to privacy?

4. List four examples how staff can provide active support to help people gain general experience or support in making decisions.
5. T/F Person who have I/DD do not have rights related to sexuality.
6. T/F Because people with disabilities have often been reinforced for compliance they may, if asked questions about sexual activities, tell you what they think you want to hear rather than what really happens.
7. T/F Individuals aged 17 or younger in North Dakota are not legally able to consent to sexual activity, and such activity may result in prosecution for statutory rape.
8. T/F Consent is assuming it's okay because the person has done a particular sexual activity before.
9. List 5 situations in which consent **cannot** be obtained for sexual activity.
10. List 4 actions identified in this chapter that are considered a violation of privacy.

Chapter Four

1. T/F It is advisable to have a legal guardian give consent for training on safe and healthy social sexual behavior.
2. T/F If parents or guardians are in the contemplation stage about providing information on social/sexual behavior, it may be helpful for staff to provide information on the pros and cons of their family member receiving information.

3. T/F Anyone who works in an agency who provides services to people with disabilities can be a sexuality educator.
4. T/F You should not assume that a person with an intellectual disability has an identity or gender that is the same as the one valued by their family.
5. What are three types of assessment tools that providers can use to help assess needs in the area of sexuality?

6. Which type of sexual language is best to use in teaching and reporting?
 - a. Street language
 - b. Common language
 - c. Medically correct language
7. Give four examples of ways to modify information on sexuality that can help people make sense of the information.

Chapter Five

1. List four essential components of agency policies and procedures on sexuality.

2. If you encounter sexual behavior, what are five actions you can take to show respect for people you support and preserve their dignity?

3. What are four reasons why people with DD are often at a disadvantage in meeting sexual needs?

4. T/F Planning for birth control should be done by DSPs for the people they support.

5. T/F Inconsistent methods in providing supports to people with learning challenges decrease effectiveness of the intervention.

6. Privacy should consider which of the following?
 - a. The need for private places.
 - b. Rules for respecting each individual's privacy.
 - c. Possible physical barriers to protect privacy.
 - d. All of the above

7. List three areas of *legal* rights that policies and procedures should include in regard to social and sexual behavior.

Chapter Six

1. T/F People with disabilities are seven times more likely to be abused than people without disabilities according to the US Justice Department.
2. List four reasons why offenders may target people with I/DD for sexual abuse.
3. List five possible signs of sexual abuse.
4. What are five skills that should be assessed as part of risk management for individual safety?
5. List six general guidelines when responding to a victim of sexual abuse.
6. What is trauma-informed care?