

Beginning a Discussion:

Delivering Sexual Health Education Programming to Youth with Special Needs

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Learning Objectives:

By the end of this workshop participants will:

- ▶ Identify some unique challenges in delivering sexual health programming to young people with special needs.
- ▶ Gain knowledge through lessons learned from a specific case study focused on teaching sexual health education to High School students on the autism spectrum
- ▶ Become familiar with the Children and Youth with Special Health Care Needs Program and other useful resources

Poll:

Have you ever worked with a special needs population?

General info about teaching sexual health to adolescents with special needs

- ▶ Providing comprehensive and medically accurate sexuality education to all students, regardless of ability level, is vital to the health and well-being of all young people.
- ▶ Students with special needs are unique and diverse. Categories of special needs as defined by the Individuals with Disabilities Act include:

• <u>Autism</u>	• <u>Multiple disabilities</u>
• <u>Deaf-blindness</u>	• <u>Orthopedic impairment</u>
• <u>Deafness</u>	• <u>Other health impairment</u>
• <u>Developmental delay</u>	• <u>Specific learning disability</u>
• <u>Emotional disturbance</u>	• <u>Speech or language impairment</u>
• <u>Hearing impairment</u>	• <u>Traumatic brain injury</u>
• <u>Intellectual disability</u>	• <u>Visual impairment, including blindness</u>

- ▶ Teaching sexual health education may look different with different populations. Learn as much as you can about the unique abilities of any population with whom you work to tailor your teaching strategies.

Case study: Teaching an evidence-based sexual health program with a cohort of adolescents on the autism spectrum

- ▶ The Staten Island University Hospital CAPP Program was approached by teachers in a partner school about facilitating a cycle of the evidence-based program “Be Proud! Be Responsible!” (BPBR) with a class of self-contained students who have autism spectrum disorders (ASD). The class was a small sized health class (less than 10 students) specifically designed to support the learning needs of youth with autism.
- ▶ While CAPP Health Educators had worked with individual students with special needs in inclusion classes, they had never had the opportunity to teach a class dedicated to students with distinct, different abilities.

Lessons learned and tips to share:

- ▶ There was a need to build in extra time during each day's lesson: Be prepared for extra questions, repeating explanations, or interruptions to your "flow".
- ▶ We needed to gather information about our participants prior to the start of our "BPBR" cycle. In working with students on the autism spectrum it was helpful to know:
 - Do any students need special technical accommodations?
 - Laptop, iPad for note-taking
 - Do any of the students have paraprofessionals to support them, take notes, keep them on task, manage their behavior?
 - Do the students work in groups? In pairs? Prefer to work solo?
 - How do students react when they are asked to answer questions out loud?

Be Proud, Be Responsible!

- ▶ *Be Proud! Be Responsible!* is a multi-session curriculum that provides adolescents with the knowledge, motivation, and skills necessary to change their behaviors in ways that will reduce their risk of pregnancy or contracting HIV and other sexually transmitted diseases.

- ▶ As a result of participating in *Be Proud! Be Responsible!* students will be able to:
 1. Increase their knowledge about HIV, AIDS and risk behaviors.
 2. Believe in the value of safer sex and abstinence.
 3. Have confidence in their ability to negotiate safer sex and use condoms correctly.
 4. Be able to use condoms and negotiate sexual situations.
 5. Intend to practice safer sex.
 6. Reduce sexual risk behaviors.
 7. Take pride in and responsibility for choosing responsible sexual behaviors.

Lessons learned and tips to share:

- ▶ Draft thoughtful group guidelines that take into account the behavioral and learning needs of the group, with a focus on what to do if a participant felt uncomfortable or awkward.
- ▶ Allowing extra time for discussions and debriefs as students with ASD interpret social cues differently.
- ▶ Recognize self-stimulating behaviors are not meant to be intentionally disruptive or rude. Ask the teacher about any particular behaviors their students exhibit.
- ▶ Check in with the students regularly to ask “Do you need more time to write/think?” “Does learning about this topic make you uncomfortable?” “What do you already know/want to know about this topic?”

Lessons learned and tips to share:

- ▶ Adjust accordingly to your particular group. We needed to recognize that autism spectrum disorders are not the same as intellectual or learning disabilities and tailor content and pedagogy for these students' specific learning needs.
- ▶ Never assume participants are not sexually active. We acknowledged that although having an autism spectrum disorder may change the way our students communicated and socialized, ultimately, they were just teenagers! They still experience sexuality, desire for intimacy and pleasure, desire to date or have a partner.

Resources:

https://www.health.ny.gov/community/special_needs/index.htm