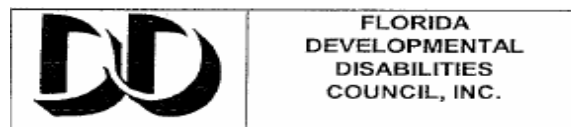


LIFE SPAN HOLISTIC SEXUALITY
EDUCATION FOR CHILDREN
&
ADOLESCENTS WITH
INTELLECTUAL/DEVELOPMENTAL
DISABILITIES:
*SEXUALITY POLICIES AND
PROCEDURES*

DEVELOPED FOR PARENTS, CAREGIVERS AND
EDUCATORS



Florida Developmental Disabilities Council, Inc

For additional copies of Life Span Holistic Sexuality Education for Children and Adolescents with Developmental Disabilities: Sexuality Policy and Procedures contact:

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Sexuality Policy and Procedures

	<u>Page</u>
1. Introduction: Social-Sexual Education – Policy Considerations	4
2. Guiding Principles	5
3. Consent Determination	6
4. Guidelines for Preparing to Conduct Sexuality Education	7
a. Student Education	7
b. Teacher and Parent Education	8
5. Non-normative Sexual Expression	8
6. Dating	9
7. Sexual Activity between Consenting Young Adults	10
8. Birth control	12
9. Preventing STD's	13
10. Pregnancy	14
11. Sexual Abuse or Exploitation	15
12. Resources	17
12. Appendix - Quick reference fact sheet on choice and educational instruction.	18

Introduction: Social-Sexual Education Policy Considerations

Winnifred Kempton, a pioneer in the field of sexuality and individuals with intellectual/developmental disabilities, stated: Individuals with disabilities “are in the triple bind of being the people who need the greatest amount of basic planned sex education, who received the least, and who are then punished by society for not knowing what others know: (1986, p.229).

We cannot assume that children and adolescents with intellectual/developmental disabilities have access to the same knowledge and information as their non-disabled peers. Not all schools or family settings provide opportunities for learning to take place. Even when education is provided, it may not address the unique learning needs of individuals with intellectual/developmental disabilities. Educational programs may teach avoidance of sexually transmitted diseases, unwanted sexual activity, and inappropriate sexual behavior, while avoiding teaching the knowledge and skills necessary to develop friendships and loving relationships. It is therefore imperative that schools and parents or guardians work together from early on to prepare children and adolescents for responsible sexuality expression in adulthood.

A commitment to cultivating changes requires education for both educators and parents/guardians. Social-sexual educators (formal and informal) need to be trained to explore whether or not their own values, beliefs, and knowledge impede rather than help an individual with his or her knowledge development. It is important that social-sexual educators know what resources are available to assist with assessment, communication and learning. When planned sexuality education is provided for an individual, either at home or school, dialogue and collaboration between educator and family *must* occur so as to provide a consistency of information, as well as, a balance between providing safety for the individual and individual rights.

The Instructional Guide for Educators and Instructional Manual for Parents or Caregivers were designed to provide a consistent continuum of learning between school and home. It is important that schools and families communicate throughout the learning process. The guide and manual were designed so that schools could use it as a stand alone curriculum, or incorporate the individual lessons into any mainstream social-sexual classroom instruction. The use of the guide and manual are clearly stated throughout and should need no more explanation. What does need to be established though are guiding principles and policy that the schools will adopt in addressing the social-sexual needs and learning process of each child with an intellectual/developmental disability. This document is to serve as format for schools and families to use when dealing with specific issues that may arise as part of the learning process while using the manual, and/or as separate incidents relating to the sexual development of a child with an intellectual/developmental disability.

Guiding Principles

“All individuals with intellectual/developmental disabilities have the same inalienable rights to life, liberty, and the pursuit of happiness as all other individuals. This includes the right to responsibly engage in interpersonal relationships, which include sexual expressions, where there is mutual consent.” (Ames, 1995: 265)

Loving relationships, whether they are platonic, familial or romantic, are an important component of a person’s physical, emotional and mental well-being. Accordingly, educators and parents need to consider this aspect of life to be a priority in a person’s education.

Key guidelines to keep in mind:

- Individuals with intellectual/developmental disabilities have the right to learn about sex, sexual exploitation, sexual abuse, safe sex and other issues regarding sexuality;
- Individuals with intellectual/developmental disabilities have the right to request information about sexuality and all forms of social relationships;
- Some individuals with intellectual/developmental disabilities may need support in recognizing opportunities and in developing skills and knowledge which will help them develop loving relationships;
- Many individuals with intellectual/developmental disabilities may require continuing education regarding sexual/physical abuse, and/or greater protection against victimization than the non-disabled population;
- Individuals with intellectual/developmental disabilities have the right to develop expressions of sexuality reflective of age, cultural values, social development and social responsibility;
- Any opportunities for learning should be, to the extent possible, individualized to meet the unique learning needs of each individual

Healthy sexuality and sexual behavior is a result of social skill competencies and social inclusion. The intention of this policy is to focus on individual competencies and provide support and/or learning opportunities to address specific skill deficits of the individual.

This policy reflects the notion that human relationships and sexuality are sources of human fulfillment and joy, as well as, basic human rights. These human rights include:

- “Freedom from sexual stereotyping
 - Freedom from sexual oppression
 - Freedom of information
 - Freedom to control one’s own body
 - Freedom to express affection”
- Acton, 1992

Consent Determination

Sexual expression between two consenting adults in a loving relationship is a natural and positive life experience. All humans, regardless of intellectual abilities, have the innate desire to love and be loved. It is well known that trauma can result from non-consenting sexual interactions. Government, families, and societal norms have also placed barriers, legal or opinion based, on the ability for individuals with intellectual/developmental disabilities to explore their sexuality. It should be noted that the sooner an individual can receive sexuality education, the more enabled they will be to engage in a loving and fulfilling relationship.

It is important that individuals are protected from coerced sexual acts. However, it must be recognized that it may also be harmful to prohibit two consenting adults the ability to enjoying a loving relationship to its fullest sexual potential. There are many facets that need to be considered in order to determine whether an adult has the ability to consent to sex. These include, but are not limited to: has the individual been given the opportunity for sexuality education; accurate evaluation of the desires of the individual; individual's intellectual ability to understand the responsibilities involved in a sexual relationship; individual's ability to understand abusive or coercive relationships; behavioral indicators that would enable the individual to engage in appropriate loving sexual relationships. For the purpose of this document the following points regarding consent should apply.

1. The issue of consent is only relevant for those individuals age 18 or older. However, saying this it is important to ensure that the topic consensual sex is taught. Individuals age 18 or over may need to be assessed to determine their ability to engage in consensual sex.

Note: Anyone who is his/her own guardian is considered to be consenting.

2. A definition of consent is:

A person 18 years or older who demonstrates an understanding that his or her body is private, that he or she has the right to say no, and that he or she knows that the conduct is distinctly sexual.

3. To establish consent an individual will need to be assessed to determine:

- a. The individual is clearly able to give consent.
- b. There is reasonable doubt as to whether the individual can or cannot give consent.
- c. The individual is clearly unable to give consent.

4. If ability to consent is unclear, the issue may be referred to clinicians such as a psychiatrist, psychologist or physician for assistance in making such a determination.

Guidelines for Preparing to Conduct Sexuality Education

Student Education

Policy: Formal social-sexual education will be provided for all children and adolescents, regardless of degree of disability. This education will provide accurate information presented in a non-judgmental and sensitive manner.

Student responsibility:

- Students will be encouraged to participate in formal and informal social-sexual education.
- Students will be encouraged to ask questions and discuss sexuality matters in a manner respectful of the privacy of the subject matter, and at a suitable time and place.
- Students will be encouraged to report to a pre-determined designated person (i.e. parent or school counselor) if they feel they've received inaccurate or judgmental information.

Educator Responsibility:

- Educators will provide social-sexual information and education to all students.
- Educators will respond to questions in a non-judgmental and accurate manner.
- Educators will present social-sexual information in a manner which meets the unique learning and communication needs of the individual.
- Educators will communicate all information regarding a student's curriculum to the parent or guardian and encourage input and participation from them.
- Educators will share information with the parent or guardian regarding assessment or observation on unique learning and communication abilities that may enhance home learning opportunities.
- Educators that feel an issue exceeds their comfort or knowledge level will discuss the matter with the family and school administrator.

Parent/Guardian Responsibility:

- Parents will provide social-sexual information and education to their child.
- Parents will communicate all information regarding a student's home education to the child's public educator.
- Parents will provide, where possible, ideas as to their child's unique learning and communication needs.

- Parents that feel an issue exceeds their comfort or knowledge level will discuss the matter with the school administrator or any other professional as appropriate.

Teacher and Parent Education

Policy: Appropriate state agencies and/or local school districts will provide opportunities for educators and parents or guardians to participate in training to ensure competency in providing educational instruction in the areas of relationships and sexuality for individuals with intellectual/developmental disabilities.

Agency Responsibilities:

- The agency will provide staff and/or parents or guardians training in the areas of relationships and sexuality concerning children and adolescents with intellectual/developmental disabilities.
- The agency or school districts policies and procedures regarding sexuality education will be included in all orientation for new staff, and given to all parents or guardians.
- Educators and parents will be made aware of available resources including printed information, audio-visual resources, previously trained educators, therapists and community resources.

Teacher and Parent Responsibilities:

- Teachers and parents will ensure that they obtain the necessary competencies to support the child or adolescent in learning the components of healthy sexuality.
- Teachers and parents will ensure that the child/adolescent receives accurate consistent information in a non-judgmental manner.
- Recognizing that there will be significant differences between educator and parent/guardian knowledge, values, beliefs and comfort levels regarding sexuality, both parties should make every effort to help the child or adolescent realize their own abilities and choices for safe and healthy relationships.
- Teachers and parents or guardians will request, and be receptive to, training or outside help when faced with situations that reach beyond their knowledge or comfort levels.

Non-normative Sexual Expression

Policy: Educators may find that the student may engage in non-normative sexual expression at school. Non-normative expressions may include public masturbation, public exposure, public propositioning and use of vulgar or obscene language. Educators and parents will provide a format for open communication to discuss possible supportive environments and educational opportunities to help the student to change the behavior.

When the behavior occurs:

- Educator will stop the child/student from doing the behavior.
- If the student does not stop the behavior, h/she will be removed from the present location and redirected to another location.
- The educator will communicate the episode to the parent as soon as possible and discuss possible solutions and learning activities that will help reinforce appropriate behaviors.
- Educators will implement the action plan discussed with the parents and document progress.
- If behavior continues to occur educator and parent will discuss possible professional referrals.

Dating

Policy: Dating is a normal part of growing up. Therefore, appropriate education on dating and access to dating experiences will be provided to young adult students who express an interest in dating in a manner tailored to their abilities.

Student Responsibility:

- Young adults will be encouraged to express their interests in dating others, to ask questions about dating, and to discuss with trusted adults about whom they may be interested in dating.
- Students expressing an interest in dating will be encouraged to choose dating partners who are able to consent to dating.
- Students will be encouraged to share any uncomfortable experiences that occur during dates.
- Students will be encouraged to treat their dating partners in a respectful manner.

Educator Responsibility:

- Educators will provide students with the social skills needed to successfully engage in dating experiences.
- Educators will assist young adults as needed or requested, (and with parent permission) in choosing potential places to go on dates.
- Educators will, if the student requests (and with parent permission) assist in preparations for a date.

- An integral component of training and date preparations will entail assisting students in feeling attractive and positive about themselves as human beings.
- If a date will occur during school time (e.g. field trips or having lunch together in the cafeteria), with parent permission, educators will assure that all dates are chaperoned unless *both* young adults have been deemed able to have unsupervised time.
- Educators will talk with students about how to cope with rejection in dating situations.
- Educators will maintain open communication with parents/guardians about students' dating interests and socio-sexual training conducted in the educational setting.

Parent/Guardian Responsibility:

- Parents will provide socio-sexual information and education to their child in preparation for dating.
- Parents will assist their child as needed or requested in choosing potential places to go on dates.
- An integral component of training and date preparations will entail assisting students in feeling attractive and positively about themselves as human beings.
- Parents will assist as needed or requested in preparations for a date.
- A family member or other responsible adult should chaperone all dates unless *both* young adults have been deemed able to have unsupervised time.
- Parents will provide transportation or assistance in obtaining transportation to and from the date, if requested or needed.
- Parents will talk with their children about how to deal with rejection in dating situations.
- Parents will maintain open communication with educators about their child's dating interests and socio-sexual training conducted at home.

Sexual Activity between Consenting Young Adults

Policy: Sexual activity, such as holding hands, hugging and kissing, is considered a normal form of sexual expression between informed consenting adolescents and an important source of pleasure and human connectedness. In students of legal age who are still in school, sexual activity beyond holding hands, such as petting and intercourse is also considered a normal form of sexual expression. This includes heterosexuality, homosexuality, and bisexuality. All

adolescents and young adults in the education system are entitled to sexuality education, based upon their level of cognitive functioning and expressions of interest in sexuality. The school's policy regarding sexual activity and family culture and values need to be considered during any educational program regarding this subject. However, the student/young adult's right to express and explore him/herself must also be taken into consideration. Socio-sexual education will be provided to all students according to their abilities in a nonjudgmental and positive manner.

Student Responsibility:

- Students will ask a trusted adult any questions about engaging in sexual activity with a person in whom they are interested, in private and at a suitable time and place.
- Sexual activity such as handholding, hugging and kissing should only occur when consent has been given by both parties. Sexual activity beyond the above mentioned should only occur between two consenting adults. The student must respect when another individual says "no" to sexual or other intimate activity and stop the activity immediately.
- Sexual activity between consenting young adults must be conducted in a private area and must not infringe upon the rights of anyone else or school policy.

Teacher and Parent Responsibility:

- Educators and parents will provide students who are deemed able to give informed consent with socio-sexual training regarding sexual activity. School policy and/or family culture or values will be imparted as part of this training.
- Educators and parents will train students in the important skill of saying no to unwanted sexual contact and in respecting when another person says "no".
- Educators and parents will teach students the difference between acceptable behaviors in a private setting and behaviors that are acceptable in public settings.
- Educators and/or parents should discuss concepts of pleasure and affection during socio-sexual training.
- Educators/parents will include as part of educational training discussion on ways in which students with mobility issues can express their sexuality in a manner that is physically comfortable for them.
- When young adults are found engaging in sexual activity and one person is not a consenting adult, they should be interrupted in a respectful and non-judgmental manner to prevent any further activity. The reason for the interruption should be explained with both parties in private in a manner appropriate to each person's understanding.

- Educators must follow school incident reporting procedures, including notification of all necessary parties, including parents/guardians and completion of an incident report.
- The educators and parents will communicate about any sexual activity to mutually evaluate the situation and determine if further action is necessary, including but not limited to medical attention, socio-sexual education, or relocation of one of the students to a more appropriate program.
- If there is an area relating to sexuality that parents or educators feel uncomfortable discussing with students, it is important to communicate this to others then find someone who is able to discuss the particular topic with comfort.

Birth Control

Policy: All young adults of legal age and assessed as having the ability to consent, have a right to be sexually active in a way that is appropriate and safe for them and their partners. All young adults meeting the legal age and consent assessment will be provided with information on birth control/contraception upon request, or upon educator/parents' knowledge of sexual activity taking place.

Student Responsibility:

- Students who are interested in becoming sexually active will discuss their sexual needs with a trusted adult and/or medical professional to arrive at the most appropriate solution for birth control.
- Students receiving birth control will consistently and appropriately use their contraception as ordered by their doctor and will discuss with their doctor any issues relating to difficulties with contraception.

Parents and Educator Responsibility:

- Students who are planning on becoming sexually active will be assisted to receive a medical assessment for possible contraceptive needs. Public health experts recommend a baseline pelvic examination and pap smear for all females with disabilities between the ages of 17 and 21 years of age.
- Students who receive contraception from their medical provider will be assisted as needed in the proper and consistent use of birth control.
- Students receiving contraception will be assisted in completing any follow-up medical visits to assess the effectiveness and proper use of birth control.
- If a student is a consenting adult, but not his/her own guardian, the clinical team responsible for working with the person to create a care plan should meet to discuss

sexuality education needs and follow steps 1-3 in a manner appropriate to the student's needs.

- Adults providing counsel or assistance in birth control shall not arbitrarily direct the student to be abstinent without a clinically sound reason. Should abstinence be clinically indicated, acceptable alternative forms of sexual expression should be made available to him/her.
- Remember that cultures and values differ among families regarding birth control. Educators, parents and the young adult considering contraception should engage in open and nonjudgmental discussion about acceptable forms of contraception.
- In situations where the young adult is not of legal age or is unable to fully understand the consequences, such as pregnancy or STD's, of sexual activity, and yet because of the natural desire for such pleasure engages in the activity, the parent and school may wish to discuss ways in which to protect the student from risk. This may include continuous education, birth control - including condom use, supervision, or a combination of efforts.

Preventing Sexually Transmitted Diseases (STD's)

Policy: It is important to remember that the condom is the only proven contraceptive method available that also helps prevent the transmission of STD's. However, this is not always practical for persons with intellectual/developmental disabilities. Education will be provided on a developmentally appropriate manner for young adults known or suspected to be engaged in intimate sexual activity.

Parent and Educator Responsibility:

- All students will be given the opportunity to receive education on risks for and prevention of STD's. The emphasis of such education will be on teaching safe sex practices.
- Educators and parents will provide young adults who engage in, or are suspected to engage in, sexual activity with education and developmentally appropriate materials to aid in learning about the signs, symptoms and prevention of STD's.
- Any parent or educator who is aware that a young adult is engaged in intimate sexual activity should encourage him/her to speak with a medical doctor so that appropriate medical tests can be performed to rule out presence of any sexually transmitted diseases or infections.
- Parents and educators should engage in discussion and planning for young adults who are known to engage in sexual activities to assure that they have access to the appropriate education and protections about STD's.
- Educators and/or parents will provide any student found to be engaging in high risk sexual behavior (e.g. multiple partners, unprotected intercourse, oral or anal sexual activity, or

sexual activity with an intravenous drug user) counseling and sex education commensurate with his/her cognitive abilities on STD's and safer sex practices.

- Those individuals found encouraging or participating in, any of the above high risk behaviors will be provided counseling by the school as to the dangers and potential harm these behaviors can have on themselves or the individuals with intellectual/developmental disabilities.
- School officials, in collaboration with parents/guardians, will coordinate a clinical team meeting on behalf of any student who is not able to give informed consent, but is found to be engaged in unsafe or potentially unsafe sexual activity and at increased risk for an STD. The purpose of this meeting will be to explore possible protections for the student such as education, medical testing, behavioral assessments, and counseling. The person should participate as fully as s/he is able to in the proceedings.
- Items for safe sex practices, such as condoms, should be made available to the young adult at home, through the school nurse, or through a medical office.

Pregnancy

Policy: Pregnancy is always a possibility when working with young adults, even if we do not realize that there is any interest in sexual expression. Additionally, a curiosity about pregnancy and perhaps even a longing to have a child is not uncommon in adolescents and young adults. When educating young women about avoiding pregnancy, it is important to be aware of these facts and to respect these basic human longings, should they be expressed.

Parent and Educator Responsibility:

- If an adolescent or young adult reveals that she is pregnant, or shows signs of being pregnant, parents and/or educators will assist her in receiving medical evaluation and care immediately.
- In order to monitor the possibility of pregnancy, menstrual cycles should be monitored as part of overall health monitoring. If changes occur, parents should make an appointment with the child's primary physician or gynecologist.
- If a student is found to be pregnant, the parent should discuss options for the pregnancy with the young woman and any professionals (e.g. medical care options, prenatal and parenting skills training, carrying the baby to term, keeping the baby, adoption, marriage, abortion). Please note that it is extremely important to be sensitive to family values and spiritual beliefs in this discussion.
- Likewise, if a male student's girlfriend becomes pregnant and he is believed to be the father, his parents should be involved in any discussion on options concerning his involvement in the pregnancy and, if the woman decides to keep her baby, in family planning discussions.

- The young woman has the right to confidentiality in the matter of her pregnancy. Only the necessary clinical team members and educational authorities should be informed of the pregnancy. If the pregnancy is the result of a sexual assault, or if the young woman is not able to consent to sexual activity, then the appropriate legal authorities must also be informed.
- If the pregnancy will be carried to term, parents and educators must address the following issues: parenting training for the parent, paternal involvement, financing, housing, child care, medical care, support services, family planning, employment/income, and any legal issues.

Sexual Abuse or Exploitation

It is known that long-term and profound harm may result from sexual abuse. Sexual abuse occurs when consent has been denied verbally or behaviorally, or when sexual activities occur with a minor. Sexual abuse includes criminal offenses such as sexual assault, public nudity, and sexual touch or exploitation. These abuses may be instigated by strangers or trusted individuals.

Individuals with intellectual/developmental disabilities have sustained high rates of sexual abuse resulting from: insufficient or lack of sexuality education; social isolation; trained compliance; reliance on others to provide care, in particular personal hygiene; barriers to communication; lack of belief by a report of abuse by an individual with a intellectual/developmental disability; prejudicial attitudes when the victim is a person with a intellectual/developmental disability; and the attitude that persons with intellectual/developmental disabilities would not be credible witnesses in the case of a criminal trial.

Educators and parents can work together to decrease the vulnerability to sexual abuse by implementing a variety of preventative measures:

- Training for educators and parents in recognizing and responding to sexual abuse.
- Ensuring that personal care is provided in a respectful and dignified way.
- Provide sexuality education to all children with intellectual/developmental disabilities.
- Educators and parents work together to complete a sexual abuse risk assessment for each child.
- Inform the proper authorities if sexual abuse is suspected.
- Listen to what the child says or how he/she acts and investigate their story.

Policy: All individuals with intellectual/developmental disabilities have the right to live free of sexual abuse or exploitation. Sexual abuse by a stranger, peer, or trusted individual will not be tolerated. Suspicion of abuse or exploitation will be reported immediately.

Student Responsibility:

- Students will be encouraged to participate in sexuality education programs which will include learning activities to understand sexual abuse.
- Students will be encouraged to report to any of several designated trusted individual any act of a sexual nature made toward them, past or present.
- Students will be encouraged to report if they witness another student being abused.

Teacher/school responsibility:

- If a child communicates to a teacher that an act of abuse or exploitation has occurred, whether it turns out to be perceived or valid, the teacher will take this report as valid and investigate.
- Parents, guardians, or appropriate child services agency will be notified immediately.
- If teachers witness or suspect any sexual abuse, they, or the school nurse, will examine the victim for indications of injury.
- Teachers/school will take precautions to preserve evidence, which may include arranging for a forensic medical examination.
- Teachers/school will ensure that necessary emotional support and assistance is provided to the student and the family throughout the process and all stages of coping with the sexual abuse.

Parent Responsibility:

- If a child communicates to a parent that an act of abuse or exploitation has occurred, whether it turns out to be perceived or valid, the parent will take this report as valid and investigate.
- Parents will communicate with educators any concerns of possible risk for abuse.
- Parents will communicate to the school if their child communicates any reporting, however small, of abuse toward self or others.
- Parents will work with the school to ensure that necessary emotional support and assistance is available for their child.

Resources Used in the Creation of Policies and Procedures

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Appendix – Quick reference fact sheet on choice and educational instruction

	Personal Choice/ Responsibility	Doesn't Hurt Me or Others	What Educators/Parents Should Do
STD's and AIDS	I need to learn what keeps me and my partner safe when we have sex.	I need to be sure that we use things that keep me and my partner safe, like a condom, spermicide, and diaphragm. I need to know what keeps us safe from STD's and AIDS.	Help me learn about STD's and AIDS. Help me meet with a health nurse or doctor to learn what I need to know. Help me to get things that keep us both safe during sex.
Sex	If I and another adult want to touch bodies or have sex, that's our choice.	Both people must want to. It must be done in private, such as in a bedroom. We must be careful about sexual diseases and not having a baby before we are ready. We must try to not hurt the other person's feelings.	Help me understand the pleasures of sex. Help me understand the responsibilities that come with having sex. Help me learn about birth control and sexual diseases. Help to ensure I have privacy.
Relationships	I can choose who I spend time with.	Respect choices of person I am with. Other people make their own choices about their relationships. People's feelings get hurt sometimes. I will try not to hurt my partner's feelings. It is never ok to hit someone.	Help me in meeting people and doing things with them. Talk about my relationships with me, but don't decide who I will or will not be with.
Sex Education	It is important to learn what makes me feel good and what my choices are in relationships.	I need to know what will keep me and my partner safe.	Help me to learn what I need or want to know.

Sex and the Law	It I have done something that hurts another person or gets me into trouble, I should be offered help.	I need to know how not to hurt others. I need to know what is against the law. I need to change if what I am doing is hurting someone.	Not to judge me. Keep information about me very private. Arrange whatever help I need.
Privacy	I can be alone in my bedroom with another person. If I share a room, I can still have some time alone in my room. If I occasionally want to be in private with someone in a sitting room, I want to help arrange this.	Other person in my room decides if they want to be in my room or not. People I share the room with must also have time alone. I must respect the privacy of the people I live with.	Help me and my roommate to arrange time when I have the room to myself at home. When it is possible, help me to be alone in a room other than the bedroom.
Birth Control	I can choose which birth control is best for me and the person I am with.	Learn about different birth control forms. Make sure I don't have a baby by accident. Find out about possible medical problems from the chosen form of birth control.	Help me if I decide I need birth control. Help me learn about the good things and the possible problems about different kinds of birth control. A doctor or clinic is where I need to go to make my decision.
Having a Baby	If I and the person I am in love with decide to have a baby, that's our choice.	We must be ready to do all of the hard things to take care of a baby.	Help me to decide if I am ready for a baby. Help me to make the arrangements to be a parent if that is what we decide.
Gay/Lesbian Relationships	If I like touching bodies with someone of the same sex (man and man or woman and woman), I want to be supported in this.	Both people must want to. It must be done in a private place. We must be careful about diseases. We must try to not hurt the other person's feelings.	Not tell me what is best for me. Support me in my choice, which may include helping me go to gay and lesbian places.

Sex Magazines and Movies	I can have movies or magazines that I find sexy.	I can only look at things with naked people when I am alone or with another adult who also wants to look at them.	If I want to buy or rent a sexy magazine or video, they will help me if I need it. Will also help me learn how to keep these materials private if I need help with this.
Playing with Myself	I can touch my body in any way that feels good for me. If I want to use a device for this, that is ok too.	I can only touch my private body parts when I am in a bedroom or bathroom at home with the door closed. I must be careful not to hurt myself.	Respect my choice and my privacy. If what I am doing may hurt me or someone else, to help me learn a safer way.