

We are all inquisitive and therefore have many questions we want to ask, but we do not always know who or how to ask. It is so very easy for adults to overlook what a child is really trying to say. Given that they are still developing language skills, children do not always know how to say what is on their minds. They may also be afraid of getting in trouble if they express their feelings. Because of this they may make up stories. If you notice physical changes in your child, body language, unusual quietness or behaviors, then listen to these stories. They may not be just make-believe. Children who are non-verbal or unable to communicate using spoken language will still try to communicate. Taking time to have all kinds of conversations with your family member, using what ever means s/he uses to communicate, will help you learn how best to understand what your family member is actually saying. Look at body language. Your family member may have certain facial expressions or body postures for different things s/he is feeling or thinking. You can be certain that s/he will be trying to communicate with you. Your challenge, and your responsibility, is to learn how to communicate with your family member and teach him or her appropriate communication skills, no matter what the preferred method of communication. If you already know how your family member communicates, then teach this to anyone s/he comes in contact with - teachers, friends, neighbors. The more people who can have conversations with your family member, the more s/he will be able to participate in the community fully and safely.

Teach your family member how to ask a question in a straightforward manner. Do not reprimand him or her for asking what seems to you an inappropriate question. Rather praise him/her for being honest in asking the question, then discuss what was inappropriate about it.

For instance:

You and your family member are in the grocery store. You meet a neighbor, Mrs. Smith, whose husband just recently died. Your family member overheard you discussing it with another adult. Your family member says to Mrs. Smith, "So John died huh?" Of course you are horrified, but you can turn this into a positive learning experience. Your response could be something like this, "Yes, Sally, Mr. Smith did just die, and I'm sure that Mrs. Smith would like to know that we are all very sad for her and that we would be happy to help her in any way." Then when you are somewhere where just you and your family member can talk privately, go over the whole conversation again, but use the conversation skills learned in the previous exercise to show what would have been the proper thing to say. The following is one way of modeling the conversation.

You: Hello Jane (Mrs. Smith)

Jane: Hello

Sally: (Your family member) So John died huh? [Now stop the conversation and tell your family member what the appropriate thing to say would have been and practice saying that, with you playing the part of Mrs. Smith]

Mrs. Smith: Hello.

Sally: Hello Mrs. Smith. I'm sorry to hear about your husband.

Now you have modeled the conversation with the appropriate response in a positive and reinforcing way. You can model this type of conversation with many sensitive topics, as well.

Another important lesson for your family member is to figure out whom to ask certain questions.

For example:

- Questions about schoolwork - the teacher, you or another adult family member
- Questions about an argument with a friend at school - you or other adult family member
- Questions about something they saw on TV - you, other adult family member or older sibling
- Questions about one's body or feelings - you, another caregiver or adult family member, a trusted teacher (of course, if they are feeling sick they need to learn to tell any adult or older sibling right away).
- Questions about an adult or an older (or younger) child touching him/her in a way that does not feel good - Immediately tell a parent, teacher or other trusted adult. You need to teach your child who these trusted adults are, but remember, unfortunately, sometimes the person you think is a trusted adult may be the person who is trying to touch your family member. You need to also teach your child that should this happen it is important to tell you about it.



ADVANCED SOCIAL SKILLS

Activities and Discussion Points

These activities can be used to help adolescents demonstrate progress toward understanding what is needed to act in a socially appropriate manner in school and the community. The following pages will give you ideas and activities to teach your family member these important basic skills. The skills covered in this section build upon the skills stressed in the Beginning Social Skills section.

Knowledge and Understandings:

- Other people's anger
- Expressing affection appropriately
- Fear
- Self-control
- Rights of self and others

Attitudes and values:

- Appropriate feelings

Self-management skills:

- Showing respect for self and others

Interpersonal skills:

- Learning how to talk to peers and adults
- Understanding and exhibiting appropriate and respectful behavior
- Learning how to express feelings regarding emotions

Social Skills: Hints for Parents/Caregivers

Sexuality begins and ends with developing good social skills and respecting oneself and others. Advanced social skills require building on good communication stressed in the Beginning Social Skills section. To fully participate as an adult in society an individual needs to grasp the social skills concepts of how to deal with anger, the various types of affection and the appropriate use of each, how to overcome fearful situations, strategies for self-control in a variety of situations, that everyone has rights that need to be respected, and lastly how to avoid situations that may cause harm to self and others.

Note: Multiple learning activities may need to be used to meet the needs, interests, maturity and cognitive levels of children.



Feelings

Anger

In Exercise 5 in the Beginning Social Skills section we worked on understanding our own feelings, including anger. In this section we are going to work on recognizing and dealing with other people's anger. Whether the anger is directed at us as individuals, as part of a whole group (such as in a classroom or at a family gathering), or whether it is someone expressing anger about something totally unrelated to us, there are appropriate and inappropriate ways of dealing with anger.

Exercise 7: Anger directed at you

Following the steps used in previous role modeling exercises, here are several ideas for exercises to use with your family member.

1. Using the listening skills learned in Exercise 1, listen to what the person is saying.
2. Try to understand what the person is feeling. Use the feelings picture board or flash cards you made for exercise 5 to help your family member identify the angry picture.
3. Discuss whether there is any response that your family member could make to the person who is angry. This of course would depend on the situation, which is why modeling as many situations as possible is helpful.
4. If the situation calls for a response (such as an apology or affirmation that you heard what the other person was saying), practice responding with the correct words or statements - "I'm sorry I didn't listen to you," "I'm sorry I didn't clean my room when you asked," "I can see you are angry at the other person, what can I do to help?", or "I am listening to what you are saying." For an individual who is non-verbal but can make gestures with the head or hands, practice the following: good eye contact, nodding the head in a yes, sign language for yes (a closed fist moved up and down as one would nod yes with the head), or other affirmative body language that would let the speaker know s/he is being heard and understood. If your family member uses a language board, you may need to make some additions added for correct responses. Again, teaching as many people as possible how your family member communicates will help significantly.

Note: It is also important to teach when it is not appropriate or necessary to deal with another person's anger. This may be in a case of an abusive situation where the best course of action is to leave immediately and find a trusted individual to tell.

Other role modeling exercises on anger:

1. In this situation, the role modeling you are going to use is that of a classroom teacher. The whole class was very loud and disruptive, not responding to prompts to be quiet. The teacher got very angry. The correct behavior/response is to agree to pay attention and be quiet.



2. Now you are at home and the situation is one where you have asked your family member several times to do something and s/he did not do it. Now you are angry. You appropriately express your anger to your family member, and then go over the correct response - your family member agreeing to be responsible and do what was asked.
3. In this last situation your family member is with a group of friends when one of the friends says something hurtful to another friend. This friend who is hurt gets angry with the person who said the hurtful thing. The offending person denies saying it. You must discuss with your family member who heard the hurtful thing how to respond to both the friend who said the hurtful statement - for example, "I'm sorry, John, but I heard you say it and feel you owe Mary an apology" and "I heard what John said, Mary. That must have hurt a lot. I know it isn't true."

Affection

The exercises below can be used for all age groups, depending on ability.

All humans, no matter their abilities or disabilities, need to give and receive affection and love. Denying a person the ability to give and receive affection or love is to deny him or her one of the most basic facets that make up a person's sense of self-worth. As parents or caregivers you need to nurture your family member's natural exploration of feelings of love and affection, and guide him or her toward expressing and receiving these feelings in appropriate ways.



The skills taught in the exercise emphasize helping the individual recognize the different types of affection one would have in relationships such as: familial, romantic, platonic, casual, or stranger. Your family member who is entering puberty, or who has already entered puberty, may be focusing on the romantic type of relationship, even if s/he cannot put a name to it. Modeling examples of a variety of relationships will help your family member to see that affection can be expressed in a lot of different ways.

Exercise 8

Using the following steps, role play with your family member the appropriate way to show affection toward you, a very good friend who your family member has not seen in a while (i.e. greet with a hug), another adult extended family member, a favorite teacher at school (taking a small gift in to show positive feelings toward the teacher). During these exercises it is also important to emphasize inappropriate behavior from and toward your family member. You will need to include discussion on personal space and respect. For instance, it would be inappropriate for your family member to always go up and hug his/her teacher or another classmate (especially if s/he has a crush on this person). It is also important to stress inappropriate touch toward your family member by an adult or classmate.

1. Choose one type of feeling of affection. Or, maybe your family member has mentioned s/he "likes" another classmate. This would be a good opportunity to discuss appropriate affection in a situation that is real to your family member.
2. Discuss whether or not it is appropriate for your family member to tell the other person how s/he is feeling. In the case of someone expressing feelings toward your family member, discuss whether or not those feelings are appropriate. If the other person is expressing feelings appropriately, discuss



with your family member how s/he feels about the other person's feelings toward him or her. This is a good time to emphasize concepts of rejection (this includes understanding that the person for whom your family member is directing certain feelings may not reciprocate those feelings), and assertiveness for one's own right to say "I don't feel the same way".

3. Discuss the best way to tell or show the person how you feel.
4. Practice expressing those feelings using whatever communication method your family member uses.
5. Practice good listening skills and let the other person respond.

Fear

Fear is something that everyone feels every day. It may be a small fear that we will not get to the store before it closes, or it may be a big fear like a hurricane. In some instances fear keeps us safe, as a fear of fire teaches us to be cautious with it. In other instances an unrealistic fear, such as being afraid to go outside of the house, can prevent us from fully participating in life. Being able to recognize the feeling of fear and deciding how to deal with it are very important social skills to learn. The exercise below will give you and your family member the opportunity to learn ways of figuring out what your family member may be afraid of and then how to best deal with those fears.

It is often hard for people to express their fears. This may be because they do not understand what they are feeling, or because they are afraid that someone will just say "Oh don't be silly! That's nothing to be afraid of." When working with your family member it is important to remember that, to you, the fear may seem silly, but to your family member it is real and should be recognized as such. We fear that which we do not understand or know about. Affirming your family member's fear is important. Helping him or her to understand fear will build trust, enabling him or her to express these fears. Feeling safe to express fear will also help protect them from abusive situations, or to report if someone has abused them in any way.

Exercise 9

Using role playing, discuss various fears that you already know that your family member has. Starting with the known will build a trust and understanding to help your child recognize and express those fears that you may not know about.

1. Choose a situation that you want to role play. Perhaps it is a fear of thunderstorms. Help your family member to recognize that what s/he is feeling is fear. You can use Exercise 5 to help your child recognize this feeling.
2. If s/he is not sure what it is s/he is afraid of, run down a list of possible fears until your child acknowledges that "Yes, that is it." You could also make a picture board of things that people are often afraid of and point to various ones until your child say yes to one of them. Do not give up! There are so many things out there that people can be afraid of, and remember, it may be something really small like a spider in the bedroom. Remember that, as you go down lists of potential fears, you may not "hit" on the major fear, but each time you address a fear with your family member, you will build the child's confidence to talk to you about fears being experienced later on.
3. Discuss whether or not the fear is an actual threat to your family member or if it is just something s/he needs more information about to better understand it and then not be afraid of it anymore.

An example might be going from elementary school to middle school. To a child that can cause a great deal of fear. It is a BIG unknown. Another example may be moving into a different house or apartment with a new bedroom, new shadows on the walls, and new sounds to get used to. Another common example is a fear caused from watching something on television that s/he did not understand.

4. Talk through the fear, discussing as much information about it as you can. You may find that the fear is something you do not know enough about. In this case you may need to go ask someone else for information, or have your family member see a professional such as a psychologist who is trained to help people work through major fears.

Use the exercise above every chance you can to help your family member deal with fear. The more you use it the better prepared your family member will be to cope with fear.

Self-control

Self-control crosses all aspects of a person's life. It can be something as simple as not eating that third cookie, or as complicated as controlling one's anger or not acting on sexual impulses inappropriately. Everyone struggles on one level or another with self-control. Recognizing how we act and feel (physically and emotionally), can help us learn to have better self-control. Lessons on self-control are not something we learn and then, voila, we have self-control. Rather, they are lessons we have to revisit almost everyday of our lives. As a parent or caregiver of a child with a developmental disability, teaching self-control can have added complications. You may have to revisit the lessons many times a day. Once you learn how to best teach your child the concepts of self-control, make sure you share your methods with everyone your child comes in contact with (teachers, neighbors, and extended family members). The more people reinforcing positive self-control, the more chances your family member will have to grasp the concept.

Exercise 10

This exercise is best done one on one with a student who has experienced a loss of self-control recently. However, it may be adapted to a small group setting with students of similar cognitive and maturity levels.

1. Using role playing, discuss something that recently happened at home such as: your family member hit a sibling.
2. Ask your family member what was happening when the incident occurred.
3. Ask your family member to explain what s/he was thinking or feeling when s/he hit his/her sibling (angry, frustrated, etc.). Use the picture board if appropriate.
4. Discuss ways in which your family member can learn to recognize these feelings.
5. Discuss ways in which your family member can control his or her behavior when these feelings arise, for example, counting to 10, going to his/her room, coming to talk to you or another adult.

These steps can also be used in helping an adolescent deal with sexual urges. You will need to teach that touching oneself when feeling these urges is a VERY private thing and should only be done in his/her bedroom or bathroom while alone. If you have tried everything and your family member still lacks self-



control, particularly sexually, then you may need to seek professional advice from your family doctor or a specialist. Don't ever be afraid to ask for help. The important thing is to help your family member have quality of life in an environment that offers choice and safety.

Rights of self and others

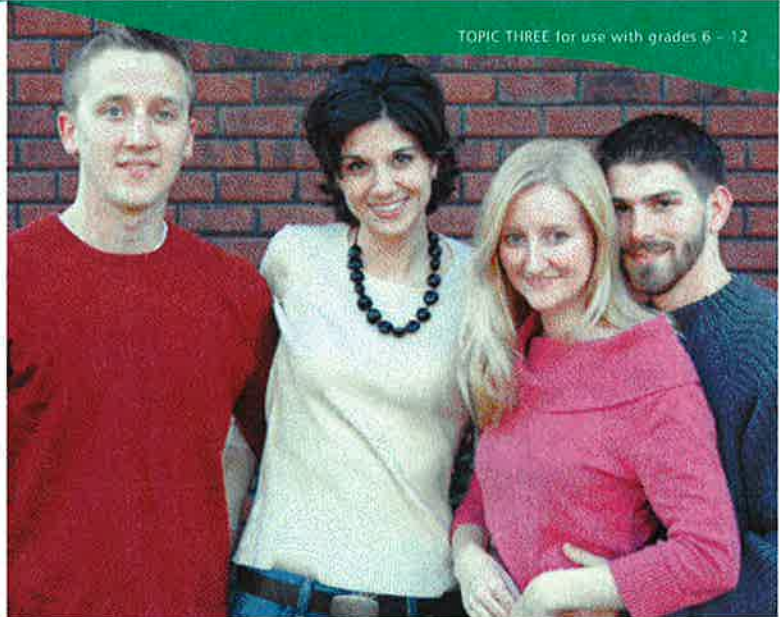
Relationships are about having respect for oneself and for others. Respect includes understanding that everyone has rights such as: a right to dignity, a right to participate in community, a right to express oneself, and a right to say no in a situation that may harmful. Helping your family member learn to recognize his or her own, as well as others' rights will further enable him or her to participate safely in a variety of situations. All of the other skills learned so far are integral in understanding the rights of self and others, and knowing how to assert oneself appropriately. When going through the exercise below, do not be surprised if you find that you and your family member need a refresher on a few of the other skills.

Exercise 11

For this exercise, use a variety of situations. Some of these situations may already have happened, and others might be possible scenarios. Some examples include getting into trouble for something he or she did not do; being teased by peers at school; wanting to have people knock on the bedroom door before entering (need for privacy); being pressured by someone to do something they know is wrong (pressure to engage in a sexual activity, drink, use drugs, or smoke, for example); seeing someone do something wrong to another person, or finding that your family member violated another person's rights. Once you decide on a topic, use role playing to run through the scenario using the following steps.

1. Discuss the situation you are going to role play, having your family member focus on the event.
2. If it is a situation that already occurred, have your family member think about what s/he was feeling physically while the event was happening. Ask your child or adolescent to try to identify the feeling (use the picture board if necessary). If the event hasn't occurred yet, discuss some ways that s/he might feel physically in this scenario. This may help your family member recognize physically how s/he might feel should s/he find him or herself in this situation at a future time.
3. Go over various ways in which s/he might assert his/her rights or help another whose rights were violated.
4. Have your family member practice asserting him or herself. You will likely need to do this over and over again. Assertiveness is not easy for anyone, especially in situations where peer pressure and the desire to be accepted are also being felt.

Note: It is easy for parents and caregivers of children and adolescents with developmental disabilities to think that "typical" peer pressure activities such as smoking, drinking and using drugs will not be faced by their family members, but this is not true! Children with and without disabilities face these pressures at school, in their neighborhoods, and perhaps in their own extended families. It is important to include these types of situations in your discussions to prepare your family member to face these situations with an ability to protect his or her rights.



Links to the Resource Guide

Below are corresponding references to the accompanying Resource Guide. The selections were chosen to help you find additional information that can help you and your child through this learning process.

Grades K-12

Social Skills Activities for Special Children, page 20

Social Skills Stories: Functional Picture Stories for Readers and Nonreaders, page 20

More Social Skills Stories: Very Personal Picture Stories for Readers and Nonreaders, page 20

Grades 6-8

Connecting with Others: Lessons for Teaching Social and Emotional Competence, page 21

Grades 9-12

Connecting with Others: Lessons for Teaching Social and Emotional Competence, page 22.

DATING

Activities and Discussion Points

Dating Dating is a word that your family member has already heard, and may even understand what it involves; however, s/he may have misconceptions about dating or even his or her own unique understanding of what dating means. Your role as parent or caregiver is to guide your child through the process, instilling family and society values regarding dating. Remember, everyone needs to give and receive love. To want to date and to have a boyfriend or girlfriend is all part of growing up. Talking about dating will help to open the communication doors between you and your family member. Do not forget to take into account the very real emotions your family member may be feeling toward another. Think back on your first crush. Did you have your heart broken? You may only have been 14 but your feelings were very real, weren't they? Sharing your experiences will help your family member understand dating better.



Some of you may feel that your family member does not have the ability to appropriately participate in dating. In this situation help your family member form relationships that you feel are appropriate. Keep in mind that dating to your family member may be something as easy as talking to the person on the phone, going with this person to the movies as part of a larger group, or even getting to sit next to the person at lunch in school. The key is to help your family member experience as many opportunities as possible to form appropriate relationships.

Look to the community for activities of interest that your family member may participate in. For instance, let us say your family member has a keen interest in the volunteer fire company. Many fire companies are more than willing to have non-firefighting volunteers help out around the fire hall. The important thing is for you to guide your family member toward appropriate relationships and meaningful roles in the community.

It is in our nature to seek out relationships with others. Left on our own we may find ourselves in potentially unsafe situations. Often a person is attracted to someone who does not reciprocate our interest. This can result in feelings of rejection, which if not dealt with proactively, can lead to injured self-esteem. This is why discussing dating with your family member is so important.

On the following page you will find some guidelines on how to go about discussing dating.

Note: Multiple learning activities may need to be used to meet the needs, interests, and cognitive and maturity levels of children.



How we “grow” into dating

in elementary school we start forming friendships, either through neighborhood connections or school activities. By the time we are in the 5th grade we will have found ourselves a “best friend.” These friends are usually the same sex as us. Then by the time we hit puberty we start noticing the other sex. In the case of homosexuality however, the attraction is toward the same sex. It is during the puberty years that we learn the foundations for our self-esteem, identities, and values. By the time we reach age 14 or so, we are on our way to being attracted in a sexual way to others. Making your expectations and rules about dating known from early on will help when your family member does reach the appropriate age.



Dating

1. It is important that you have a clear working definition of what dating means in your household. If your family member has siblings who do not have a disability and s/he sees them dating, then you need to be prepared to explain why there is a difference in policy. Your policy may include no phone calls after 8:00, only going to the movies or other social event on weekends, or that there must be a group of people going with at least one adult as chaperone.
2. Discuss what is allowed and is not allowed to happen on a date in terms of intimacy, i.e. kissing, holding hands, but nothing more.
3. Talk about abstinence, and then talk about it some more. Be sure you go over lessons on saying no, found in later pages of this manual.
4. Go over the social skills exercises on listening, conversing, and respecting the rights of others.
5. Include other siblings in the conversations. Share dating stories, good and bad. This will help reaffirm what is appropriate behavior on a date. (Talk with the siblings beforehand to be sure they understand the purpose and nature of the exercise.)
6. Talk about what to do in case of an emergency.
7. Arrange for your family member to have social “dating” interactions through community service projects, after-school programs, a faith community, clubs, or sporting events.
8. Remember to talk with your child’s teachers at school. Share your “house rules” on dating and your strategies for teaching dating and providing safe dating experiences for your son or daughter. Your child is likely to discuss dating at school, and the more information your family member’s teachers have, the more able they will be to reinforce your efforts and promote consistency across settings.

Alternative Lifestyles

In today’s world your family member will, sooner or later, be introduced to alternative lifestyles, such as homosexuality. Homosexuality is when a person is attracted to someone of his/her own sex. When children are going through puberty it is actually common for them to be attracted to someone of the same sex. As puberty progresses these feelings change to an attraction for the opposite sex.



The subject of homosexuality is not something that can be avoided, nor should it. Homosexuality is portrayed on prime time TV, in the news, and even as part of politics now. Your child may see homosexual relationships at school. The sooner you discuss it with your son or daughter, the greater his or her ability to understand the concept will be. Just as there is the myth that persons with I/DD are asexual, so too is there the myth that they will never be attracted to someone of the same sex.



Your role will be to discuss the subject of alternative lifestyles with your son or daughter. During these discussions, you can interject family values and religious beliefs (if any) regarding the subject. There are a number of ways you may know that you need to address this subject. Your family member may ask questions or bring up situations s/he is seeing. You may notice that your family member seems to be watching a TV show depicting two people of the same sex in a loving relationship with strong interest. Another important role for you will be to find out what his or her questions really are. Perhaps s/he is simply curious about others of the same sex. Perhaps your child has experienced more nurturing from people of the same gender, or was raised in a single parent household and feels more comfortable emotionally with others of the same sex. This does not mean your family member is expressing homosexual feelings; s/he may be expressing friendship or familial affection in ways that are perceived as more “sexual” as the person grows older. In these types of cases, you may not be teaching about homosexuality but about appropriate expressions of affection in different types of relationships.

The important thing is to not approach the subject with an attitude of condemnation. Use your best judgment to determine if you need to talk about this topic with your child. It is very complicated, especially in today’s society, so be sure he or she is ready. Do not assume that your child’s school will or will not teach about homosexuality, either. Many schools’ policies prohibit any discussion about same-sex relationships. Likewise, many schools may include this in sex or health education.

With this topic, as with all others relating to sexuality and social skills, talk with your school. Know what is being taught. Advocate for what is best for your child. Partner with your family member’s teachers so that, for example, should you need to advocate for a certain topic to be taught in a way that does not violate your faith or cultural beliefs, you will have a relationship with the teachers to work out alternative ways to get needed information provided for your child.

SEXUAL OR PHYSICAL ABUSE

Activities and Discussion Points

Myths

- People with intellectual/developmental disabilities are not sexual beings.
- People with I/DD are not attractive to others.
- Sexual or physical assault on persons with I/DD is usually by strangers.
- People with I/DD don't suffer Post Traumatic Stress following an attack.
- People with I/DD don't have a right to the same protection as everyone else.



Realities

People with disabilities of any type are sexual beings and have the same curiosities as everyone else. Sometimes these curiosities can put them in harm's way. Having sexual urges and having the capacity to understand the consequences of acting upon them are two different things. Those individuals able to grasp the concepts presented earlier in this manual will be better prepared to avoid situations where they may be sexually abused.

Rape has nothing to do with whether or not a person is attractive. It has everything to do with one person violently enforcing control and power over another individual. Compounding the issue is the fact that 97 - 99% of abusers are known and trusted by the person with an intellectual or developmental disability (Reynolds, 2005). Reports on abuse cases show that 32% of abuses were committed by family members or friends, and another 44% came from professionals working with individuals, such as care staff or transportation providers (Reynolds, 2005). These figures are staggering and imply that more needs to be done with people with I/DD to help them better protect themselves.

Many individuals with I/DD who have been assaulted, sexually or physically, are not given the means for processing what happened to them. They have the same rights as anyone to file police reports, press charges, participate in prosecutions of abusers, and - most importantly - seek counseling for traumas that they have experienced. As a parent/caregiver, if your family member experiences abuse, you would need to look for the right person to provide counseling. You want someone familiar with working with individuals with I/DD, willing to learn to communicate with your family member in a way most appropriate for him/her, and who is knowledgeable in both sexual and physical abuse. You will likely need someone to help you deal with your emotions, as well, for you too may be very traumatized by the event.

The following pages will discuss what to look for and how to implement strategies for helping your family member avoid harmful situations, or what to do should s/he find him or herself in a potentially abusive situation.

Reynolds, L.A. (2005). People with mental retardation and sexual abuse. Retrieved on October 3, 2005, from www.wsl.org/behavior/guidelines/sexualabuse.htm



Child abuse

Physical

What to look for on the body

- * Bruises
- * Welts
- * Burns
- * Fractures
- * Lacerations/cuts

What behavior/s to look for

- * Extremes in moods, overly happy or sad
- * Frightened of you or other family or friends
- * Does not want to be touched
- * Gets upset when another child cries
- * Tells you someone hit him/her

Neglect - Although this area may not be of a concern to those of you reading this workbook, it is still important that you recognize the signs of neglect. You may find that your family member has friends who exhibit these signs.

What to look for physically

- * Dirty or hungry
- * Reports being left alone a lot
- * Tired and listless
- * Untreated physical problems
- * Lack of routine medical care
- * Overworked, exploited
- * Abandoned

What behavior/s to look for

- * Starts getting into fights, is argumentative
- * Is constantly looking for food (if not part of their normal behavior pattern)

Sexual

What to look for physically

- * Torn, stained, bloody undergarments
- * Pain or genital itching
- * Bruises, bleeding or swelling of genitals
- * Has acquired a sexually transmitted disease (see appendix for types)
- * Has semen on mouth or genitals
- * Is pregnant

What behavior/s to look for

- * Withdraws or engages in infantile behavior
- * Poor peer relationships
- * Does not want to do any physical activity
- * Does not want to go to school
- * Trying to tell you something but does not

Emotional

What to look for physically

- * No interest in how s/he is dressing
- * No interest in personal hygiene

What behavior/s to look for

- * Quiet, not expressing self
- * Unusual outbursts
- * Crying all the time

Note: While this list can be an invaluable tool to begin gathering information about whether abuse could be occurring, identification of any of the above symptoms in your family member does not necessarily mean that abuse is occurring. You must ask a lot of questions to rule out any other alternative explanations. For example, many of the symptoms of emotional abuse can also be signs of depression.

Strategies for you and your family member

The best strategy is to start teaching your family member as young as possible about the types of abuse. Stress "good touch - bad touch." Television, magazines, and movies are full of opportunities to teach about abuse. For example, your family member is watching a children's movie where the hero is imprisoned by the villain. The villain overpowers the hero using force. This would be a good time to talk about why using force is wrong. Use everyday examples of real life events to teach. These will have the greatest impact on your family member.

Talk, talk, talk. As stated earlier, the more conversations you have with your family member, the more in tune you will be to subtle changes in expressions or behavior. If a person does not know what abuse is, how is s/he going to know when it happens and when to report it? Talking to your family member about abuse is so vital in reducing the risk of abuse!

Teach your family member how to question when something does not seem right. Often children with I/DD are taught to be compliant to authority figures, or they go out of their way to try to please authority figures by saying or doing what they think others want. This leads them to think that they should not question the behaviors of those in authority positions. Teach your child that no question is a wrong or bad question. Reinforce that statements such as: "If you tell anyone about this you will get in trouble," are warning signals and that s/he must come and tell you or another trusted adult about it. Assure your family member that s/he will NOT get in trouble for talking about it. Be sure that you communicate this message to your child's teachers and others who provide care.

If your family member is able, have him/her take a self-defense class. There are many self-defense programs around now that specialize in helping people with disabilities learn self-defense. Call around to your local self-defense businesses. If they do not specialize, ask if they would be willing to learn. Perhaps your child's school can help by contracting with a self-defense program to offer programs for all their children with disabilities.

The next few pages discuss ways to help your family member protect him or herself from sexual assault or rape. Using the role playing techniques you used for social skills activities, model the topics that you feel your family member will be able to understand.

Note: Multiple learning activities may need to be used to meet the needs, interests, and cognitive and maturity levels of children.



GOOD TOUCH - BAD TOUCH examples for discussion

Teaching good touch - bad touch can be difficult when working with children or adolescents with severe cognitive disabilities. Showing pictures of an adult hugging a child as a bad touch can give the wrong message regarding situations where a hug is appropriate, such as when a parent hugs a child. The main concept to get across is this: whether touching is good or bad depends on who is doing the touching and how s/he is touching the other person. Anyone who is touching another person on the breasts, penis, or pelvic area, or who tries to kiss another person **without that person's consent** is performing a BAD touch.



Consent is a difficult concept to teach, but it basically means that if a person says NO then s/he is not giving his or her consent. If someone continues to touch the other person despite the NO, it is a BAD touch. It is important as parents to be alert to changes in your child's behaviors or demeanor as it can be a signal that s/he is being physically or sexually abused. Also look for physical signs such as bruising in the genital areas, complaints of genital discomfort, torn or missing clothing, or sexually transmitted diseases. As you are the one who knows your child the best it is important that you keep in touch with school personnel or anyone else your child has contact with. Teach them about your child's personality traits so that they will be more alert to changes as well.

How to teach good touch - bad touch

1. Use television shows the person may watch to teach the difference between good and bad touch. News broadcasts offer great opportunities for discussion and example.
2. Use real life events that have happened or may happen, such as the following: Your female family member is on the school bus. An older boy starts tugging on her hair and coaxes her to the back of the bus. He then starts to tug on her skirt just like he did with her hair, playfully. Then he tugs her skirt up and touches the top of her leg. This is bad touch and is no longer being playful.
3. You also need to get a circle of people that your family member is familiar with so s/he knows who to go to if someone touches him or her in a bad way. Unfortunately, you also have to try to help your child understand what to do if the person who is doing the bad touch turns out to be one of the "trusted" individuals.
4. Teach your family member how to say NO! Even if your family member is non-verbal, s/he manages to get his or her preferences across to you. S/he already has taught you how s/he expresses NO. Be sure to share your child's ways of communicating distress, discomfort, saying yes and no with all other care providers and trusted adults. If your child uses an assistive communication device, be sure it is programmed so that your child can communicate distress, NO, stop, and other ways to stop a potentially abusive situation. The following worksheets give some examples on how to ways to teach your family member to say NO.

What part of NO don't you understand!?

Making the right decision can be very easy. The hard part is to act upon that decision. For instance: You see some chocolate chip cookies on the kitchen counter and know that you should not eat one as it will ruin your appetite for dinner. So you made the right decision - eating the cookie will ruin your appetite. Now the hard part is walking away from the cookies, as chocolate chip are your favorite! The same goes for saying no to someone and then actually getting away from the situation. Peer pressure and wanting to be liked make following through with NO very hard to do. Learning how to say no in everyday situations will help build the skills necessary to say no to someone who may try to be sexually or physically abusive. Work with your family member using the following discussions.

Exercise 1

Your family member walks home with some neighborhood kids every day. They all know they are supposed to come straight home. However, this time the kids find out at the last minute that there is an after school event that they decide they are going to stay for. They tell your family member to come with them, that it will only make them late getting home by one hour.

Ask your family member what s/he should do. One example of a correct response would be that your family member says no and goes to find a phone to call home, or goes to the school office to ask for help. If you are reliant on informal situations such as the one just described, be sure your family member knows his/her alternative ways to get home safely.

Exercise 2

Your family member wants to make some friends. S/he asks to go to the school dance. While at the dance some of the kids sneak outside and your family member goes with them. The kids start smoking and offer the cigarette to your family member. What should s/he do?

There are two things happening here. The first one is leaving the dance and sneaking outside because of a desire to be liked by the other kids. The second is saying no to the cigarette and not being pressured by name calling such as "sissy" or "baby.". Your discussion should include knowing how to choose the right kind of friends, as well as ways to walk away from situations where your family member may be offered cigarettes, alcohol, or even drugs.

Exercise 3

This exercise involves your son or daughter going to the movie with some friends. First, we will address a potential scenario involving a son, then a daughter. Your son likes one of the girls that is there. They sit next to each other in the movie. Your son is sexually attracted to this girl. He tries to touch her breasts during the movie. She tells him to stop, but he does not want to. In this situation you need to teach three things. First is that the movie is not the appropriate place for any kind of sexual touching. Second is that the girl said NO and is therefore not consenting to being sexually touched. Finally, you need to teach him how to deal with his sexual urges in a public setting such as a movie theater in a healthy and safe manner.

Now the same scenario, but this time it is your daughter at the movie. She likes one of the boys there. They sit next to each other. He starts to touch her pubic area. She knows it isn't right and tells him to stop. He does not. What should she do?



The answer here is, at the least, she should get up and move to another seat and then when she gets home tell you about it. If he moves next to her again, then she should find a phone to call home. If she is unable to physically change seats, she should raise her hand or somehow signal to a friend that she needs assistance in moving or getting out of the situation.



While you will obviously talk with your daughter about ways to remove herself from the unwanted touching, it is also important to talk about the mixed emotions that may be involved. Your daughter may be feeling guilty because she "likes" this boy who touched her inappropriately. This is not abnormal. It is so important to teach your children that, just because they like someone, that does not mean they have to allow bad touches without their consent. It is ok to say no to people they like.

Some more activities on saying NO!

The following are things that your family members' peers or other adults might say to them while trying to get them to do something inappropriate. Tell them the statement and then discuss how they should respond.

1. Come on, everyone is going. You have to come if you want the other kids to like you.
2. If you love me you'll do what I want.
3. Come on, try it just this once. You won't get in trouble, I promise!
4. It's ok to come with me. I already talked to your Mom/Dad and they said it is OK.
5. All the other kids are doing it. You want to do what everyone else is doing, don't you?
6. If you do it this time I'll never ask you to do it again.

**Good Touch - Bad Touch Activities
For More Concrete Learning**

Discussion points for parents or caregivers:

Good touch and bad touch both give us feelings. The difference is that one is not harmful to the person and the other one is. The following exercises are to help individuals who may have a hard time with abstract concepts, learn about good touch/bad touch. Learning about good touch/bad touch is important in order to protect oneself from abusive situations.

Exercise 1

Have individual choose from the pictures given below each question.

When you are sad what does your face look like?



When you are angry what does your face look like?



When you are happy what does your face look like?



Exercise 2

What are types of good touches? (Help the individual communicate hug, kiss, holding hands, etc.).

Below are pictures of good touch. Discuss why the touching in these pictures is good touch.



Boyfriend and Girlfriend



Doctor



Husband and Wife



Sister and Brother



Friends



Mother and Son

Exercise 3

What are types of bad touches? (Help your individual communicate hitting, pinching, slapping, etc.)

Discussion for bad touch:

We all like to get hugs and kisses from our parents and others we know and trust. These are good touches.

Hugs and kisses from people we do not know or do not like are bad touches. It is very important to know who it is OK to get hugs and kisses from. (Discuss some personal examples with your child.)

When we get good touches such as hugs and kisses from our parents it makes us feel happy. When people we do not know hug and kiss us it should make us feel sad or unhappy. This is how you know it is a bad touch.

What about when someone tickles us. Is that fun? Does it make us laugh? Are we happy? If you like to be tickled then it is good touch. But if you don't like to be tickled it is bad touch. Sometimes a person may tickle us and at first it is fun. But if they don't stop it can become bad touch. It becomes bad touch when you tell them to stop and they don't. It becomes bad touch when they tickle you so much that you can't breathe or you start to cry.

If a person touches you in a way that makes it hard for you to breath or that makes you cry this is bad touch. (Parents need to explain the difference between disciplining and this type of bad touch. This is a very hard concept for some children to comprehend.)

No one other than your parents, a doctor or nurse who is trying to make you better when you are sick, or another trusted individual who is helping you in some way should ever touch you on your penis, breasts, vagina, or bottom. (Use the pictures from earlier lessons to reinforce the body parts.)

If someone you do not know or trust touches you in a bad way you need to tell someone right away! Tell your parents, teacher, school nurse or other trusted person. (Parents/caregivers need to go over this list with their children. Create a picture board with pictures of trusted people as a reminder for the child.) If the first person you go to doesn't listen or believe you go to someone else. Keep trying until someone listens to you.

Good touch - bad touch
Appropriate social distance



Everyone maintains a personal space. A good distance would be at least 2 feet.



Closer than 2 feet may be uncomfortable for many people. If it is with close friends the closeness portrayed here may be OK. If it is with strangers or people you have just met it may be inappropriate.



Hugging between two friends or family members when consensual is appropriate.



Clearly this hug is not consensual. The person receiving the hug is not comfortable.



This is appropriate distance for shaking someone's hand.



Being this close to someone when shaking hands is not appropriate. Maintain a 2 foot distance when meeting or greeting.



Coming up behind someone and putting your hands on his or her shoulders or hugging is not appropriate without the person's permission. From the look on this person's face it is clear she is uncomfortable with what the person behind her is doing.



A "high five" is an appropriate way of greeting someone. It is accepted like a handshake with some people. There may be other special handshakes in the school that may be appropriate greetings, too.

CONTENTS

Glossary of terms

An overview of sexually transmitted diseases

Sample picture board on growing up for girls

Sample picture board on growing up for boys

Sample picture board on feelings



Note: Multiple learning activities may need to be used to meet the needs and interests of children.



GLOSSARY OF TERMS

Acne Lesions

Usually start at the onset of puberty, most common on the face, but can also occur on the neck, chest, back, shoulders, scalp, and upper arms and legs.

Amenorrhea

Absence of menstrual periods.

Anus

The outlet of the rectum (the lower part of the large intestine), through which solid waste leaves the body.

Areola

The darker pigmented area surrounding the nipple.

Bacterial Vaginosis Infection

A vaginal infection that causes a burning sensation and a gray, malodorous discharge.

Birth Canal

Another term for vagina; the passage a fetus travels through during birth.

Blackhead

An open, non-inflammatory acne lesion.

Bladder

The organ that holds urine, liquid body waste.

Bloating

Swollen beyond normal size due to retaining of fluid.

Breast Buds

The first stage of breast development during puberty; small swellings directly underneath the nipple.

Candidiasis Infection (Yeast)

An infection that may be uncomfortable and itchy.

Cervix

The opening between the uterus and the vagina that has a small opening (about the size of a

pencil point), through which menstrual fluid escapes.

Chlamydia

A sexually transmitted disease.

Chromosome

A structure in the nucleus of a cell that transmits genetic information.

Circumcision

Surgical removal of all or part of the foreskin of the penis.

Clitoris

A small sensitive organ of erectile tissue located above the opening to the vagina which responds to stimulation; the female counterpart of the penis.

Contraceptive, Oral (The Pill)

A medication that prevents ovulation and pregnancy. May be used to control the symptoms and development of endometriosis.

Delayed Puberty

A condition in which the youngster fails to complete puberty and develop secondary sex characteristics by sixteen years of age. Puberty may be stimulated with hormonal replacement therapy. Some will outgrow the condition without treatment.

Dysmenorrhea

Painful menstruation; cramps. This may be a sign of endometriosis.

Ejaculate

The semen and sperm expelled during ejaculation.

Ejaculation

Forceful sending out of seminal fluid from the penis.

Embryo

A name given to a fertilized ovum, from the second through the eighth week of development.

Endocrine Gland

An organ that manufactures hormones and sends them out into the bloodstream.

Endometrium

The mucous membrane lining the inner surface of the uterus, which grows and sheds in response to estrogen and progesterone stimulation.

Epididymis

A coiled tube through which sperm exit the testes.

Erectile Tissue

Spongy tissue containing many blood vessels; it becomes rigid and erect when filled with blood.

Erection

Hardening of the penis.

Estrogen

Female sex hormone produced by the ovaries.

Fallopian Tubes

Tubes that convey the female sex cell (egg, or ovum) from the ovary to the uterus.

Fertilization

Union of the ovum (female egg) with the sperm (male sex cell).

Fetus

An infant developing in the uterus, from the third month to birth.

Flaccid

The relaxed state of the penis.

Follicle Stimulating Hormone

The pituitary hormone that stimulates development of ovarian follicles.

Follicle

A sphere-shaped structure in the ovary, made up of an immature egg and surrounding layer of cells.

Foreskin

Loose skin covering the end of the penis.

Genitals

The external sex organs, also called genitalia.

Genital Herpes

A sexually transmitted disease.

Glans

The end, or head, of the penis.

Growth Spurt

A rapid increase in height and weight, which typically occurs during puberty.

HIV/AIDS

A sexually transmitted disease.

Hormones

Chemical substances produced by the body that, depending on the hormone, govern many body processes. Certain hormones cause physical maturation during puberty.

Hymen

A fold of flexible membrane that partially covers the vaginal opening.

Hypothalamus

A part of the brain that, among other functions, secretes chemicals that controls the activity of the pituitary gland.

Impotence

The inability of the man to have an erection and to ejaculate.

Infertility

The inability to conceive after a year of unprotected intercourse or the inability to carry a pregnancy to term.

Labia (majora and minora)

Two folds of fatty tissue that lie on either side of, and partially cover, the vaginal opening.

Leukorrhea

A thick whitish vaginal discharge.

Masturbation

Manual stimulation of the genitalia leading to orgasm.

Menopause

The stage at which menstrual activity ends.

Menstrual Cycle

The period of time measured from the beginning of menstruation (a period), through the series of regularly occurring changes in the ovaries and uterus, until the beginning of the next menstrual period.

Menstruation

The cyclical shedding of the uterine lining in response to stimulation from estrogen and progesterone.

Nocturnal Emission

The passing of semen from the urethra during sleep; a wet dream.

Orgasm

The psychological and physical thrill that accompanies sexual climax.

Ovary

One of a pair of female reproductive glands which hold and develop eggs and produce estrogen and progesterone.

Ovulation

The periodic release of a mature egg from an ovary.

Ovum

A female sex cell, or egg. (Plural Ova)

Penis

The male reproductive organ involved in sexual intercourse and elimination of urine.

Pituitary Gland

An endocrine gland attached to the base of the brain; the gland is stimulated by the hypothalamus and controls all hormonal functions.

Pregnancy

The condition of carrying a developing embryo in the uterus.

Premature Ejaculation

A condition in which the man becomes so sexually excited that most of the time he ejaculates prior to penetrating the woman's vagina.

Premenstrual Syndrome

Symptoms such as tension, anxiety, breast tenderness, and bloating which begin several days prior to the onset of menstruation and subside when menstruation begins.

Progesterone

A hormone that is involved with the menstrual cycle and pregnancy.

Prostaglandins

A group of chemicals produced in the uterus which tend to stimulate contractions and may cause cramps.

Prostate Gland

A gland near the male bladder and urethra which secretes a thin fluid that is part of semen.

Puberty

The period of life during which an individual becomes capable of reproduction.

Pubic Hair

Hair over the pubic bone which appears at the onset of sexual maturity.

Reproduction

The process of conceiving and bearing children.

Scrotum

The pouch of skin behind the penis that holds the testes.

Secretion

The process by which glands release certain materials into the bloodstream.

Semen

A thick fluid, containing a mixture of glandular secretions and sperm cells, that is discharged from the penis during ejaculation.

Seminal Vesicle

One of two glands located behind the male bladder which secrete a fluid that forms part of semen.

Sexual Intercourse

The erect penis of the male entering the vagina of the female.

Sperm

Mature male sex cell.

Staphylococcus Aureus Bacteria

The type of germ believed to cause Toxic Shock Syndrome (TSS).

Syphilis

A sexually transmitted disease.

Testis (Testicle)

One of two male reproductive glands which produce sperm and the hormone testosterone. (Plural testes)

Testosterone

A male sex hormone which causes the development of secondary sexual characteristics.

Toxic Shock Syndrome (TSS)

A rare, but potentially serious disease that has been associated with tampon use.

Umbilical Cord

The attachment connecting the fetus with the placenta.

Urethra

A canal that carries urine from the bladder to the urinary opening. In males, the urethra is also the passageway for semen.

Urination

The act of eliminating urine, liquid waste, from the body.

Uterus

The small, hollow muscular female organ where the embryo and fetus is held and nourished from the time the egg is implanted until the birth of the fetus.

Vagina

The canal that forms the passageway from the uterus to the outside of the body.

Vaginal Discharge

A normal white or yellowish fluid (leukorrhea) from the cervical canal or vagina.

Virgin

A person who has not had sexual intercourse.

Vulva

The external female genitalia, including the labia, clitoris, and vaginal opening.

Whitehead

A closed acne lesion.

Yeast Infection (Candidiasis)

An infection that may be uncomfortable and itchy.

Zygote

A cell produced by the union of a sperm and egg.

From: Parenting Teens. <http://parentingteens.about.com/library/ta/blpubglostz.htm>. 2005.

Overview of Sexually Transmitted Diseases (STD's)

Sexually transmitted diseases (STD's) are infections of a person's reproductive organs. STD's are extremely serious. They can make you extremely sick, and can leave you unable to have babies. Both girls and boys can get STD's, and both boys and girls can be "carriers" of STD's, meaning that they may not show symptoms of an STD, but still have the disease and can spread it to others they come into intimate contact with.

It will be important to talk to your family member about the dangers of STD's, including HIV/AIDS, especially if s/he is likely to be engaged in a sexually intimate relationship with another consenting individual. This is a complicated subject, and you will need to use your best judgment as to what information your child can handle. By now, you will have an excellent sense on how best to teach your family member about difficult subjects relating to sexuality.

Here are some topics to discuss with your family member, using the role modeling techniques you have practiced throughout this manual.

1. Safe sex practices, including abstinence
2. Saying no
3. The importance of good hygiene
4. Avoidance of touching other people's blood-contaminated products, such as used tampons or pads, or blood on a public toilet seat
5. Ways to avoid and get away from dangerous situations where sexual abuse may occur
6. The dangers of sharing needles and other drug paraphernalia (implicated in the transmission of HIV/AIDS)
7. Ways to avoid date rape drugs
8. The roles of alcohol and drug use in unwanted and/or unprotected sexual activity
9. Talking with your family member's doctor about whether or not s/he would benefit from receiving the Hepatitis B vaccine.

The next few pages contain information on types of STD's, how they are typically acquired, and the hazards of not being treated. Treatments for STD's are getting better all the time. It is imperative that, if you see signs that your family member may have an STD, you immediately take him or her to see a doctor for diagnosis and proper treatment! Some of these diseases are highly treatable, but if not treated, are highly contagious and may ultimately lead to serious life-long physical impairments and even death.

The following are excellent web sites to learn more about STD's:

- Baylor College of Medicine's Center for Research on Women with Disabilities: <http://www.bcm.edu/crowd/?pmid=1471>
- Down Syndrome Information Network: <http://www.down-syndrome.info/library/periodicals/dsrp/03/2/065/DSRP-03-2-065-EN-GB.htm>

STD	What to watch for	How do you get this STD?	What happens if you don't get treated?
Chlamydia or NGU	<ul style="list-style-type: none"> • Symptoms show up 7-21 days after having sex. • Most women and some men have no symptoms. 	<ul style="list-style-type: none"> • Spread during vaginal, anal and oral sex with someone who has chlamydia or NGU. 	<ul style="list-style-type: none"> • You can give chlamydia or NGU to your sexual partner(s). • Can lead to more serious infection. • Reproductive organs can be damaged. • Both men and women may no longer be able to have children. • A mother with chlamydia can give it to her baby during childbirth.
Genital Warts	<ul style="list-style-type: none"> • Small bumpy warts on the sexual organs and anus. • Itching or burning around sex organs. • After warts go away, the virus stays in the body. The warts can come back. • Symptoms show up to 1-8 months after contact with HIV, the virus that causes genital warts. 	<ul style="list-style-type: none"> • Spread during vaginal, anal, oral sex with someone who has genital warts. 	<ul style="list-style-type: none"> • Warts may go away on their own, remain unchanged, grow or spread. • A mother with warts can give them to her baby at childbirth.
Gonorrhea	<ul style="list-style-type: none"> • Symptoms show up 2-21 days after having sex with someone who has gonorrhea. • Most women and some men have no symptoms. • Thick yellow or white discharge from the vagina. • Burning or pain when you urinate (pee) or have bowel movements. • Need to urinate (pee) more often. 	<ul style="list-style-type: none"> • Spread during vaginal, anal, oral sex with someone who has gonorrhea. 	<ul style="list-style-type: none"> • You can give gonorrhea to your sexual partner(s). • Can lead to more serious infection. Reproductive organs can be damaged. • A mother with gonorrhea can give it to her baby at childbirth. • Can cause heart trouble, skin disease, arthritis and blindness.

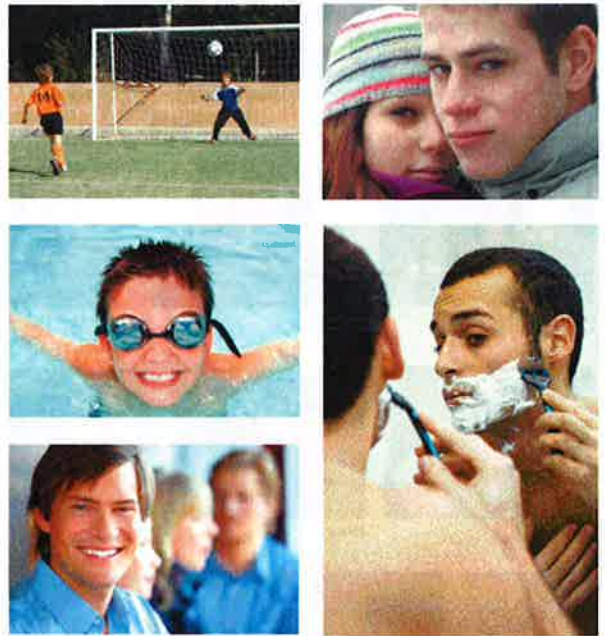
STD	What to watch for	How do you get this STD?	What happens if you don't get treated?
Hepatitis B	<ul style="list-style-type: none"> • Symptoms show up 1-9 months after contact with someone who has hepatitis B virus. • Many people have no or mild symptoms. • Flu-like feelings that don't go away. • Tiredness. • Jaundice (yellowish skin). • Dark urine, light colored bowel movements. 	<ul style="list-style-type: none"> • Spread by sharing needles to inject drugs or for any other reason. • Spread by contact with infected blood. • Spread during vaginal, anal and oral sex with someone who has hepatitis B. 	<ul style="list-style-type: none"> • Symptoms go away, but they can still give hepatitis B to others. • A mother with hepatitis B can give it to her baby during childbirth. • Can cause permanent liver damage. • Some people recover completely. • You can give hepatitis B to your sexual partner(s) or someone you share a needle.
Herpes	<ul style="list-style-type: none"> • Symptoms show up to 130 days after having sex. • Some people have no symptoms. • Flu-like feelings. • Small, painful blister on the sex organs or mouth. • Blisters last 1-3 weeks. • Itching or burning before the blisters appear. • Blisters go away, but you still have herpes. 	<ul style="list-style-type: none"> • Spread during vaginal, anal, oral sex with someone who has herpes. 	<ul style="list-style-type: none"> • You can give herpes to your sexual partner(s) • Herpes can not be cured.
HIV / AIDS	<ul style="list-style-type: none"> • Can be present for many years with no symptoms. • Diarrhea. • Unexplained weight loss or tiredness. • White spots in mouth. • Symptoms show up several months to several years after contact with HIV, the virus that causes AIDS. • Flu-like feelings that don't go away. • In women, yeast infections that do not go away. 	<ul style="list-style-type: none"> • Spread by sharing needles to inject drugs, or for any reason. • Spread during vaginal, anal and oral sex with someone who has HIV. • Spread by contact with infected blood. 	<ul style="list-style-type: none"> • You can give HIV to your sexual partner(s) or someone you share a needle with. • HIV cannot be cured. Most people die from the disease. • A mother with HIV can give her baby the disease in the womb, during birth or while breastfeeding.

STD	What to watch for	How do you get this STD?	What happens if you don't get treated?
Syphilis	<p>1ST STAGE</p> <ul style="list-style-type: none"> • Symptoms show up 3-12 weeks after having sex. • A painless, reddish-brown sore or sores on the mouth, sex organs, breasts or fingers. • Sore lasts 1-5 weeks. • Sore goes away, but you still have syphilis. <p>2ND STAGE</p> <ul style="list-style-type: none"> • Symptoms go away, but you still have syphilis. • A rash anywhere on the body. • Flu-like feelings. • Rash and flu-like feelings go away, but you still have syphilis. 	<ul style="list-style-type: none"> • Spread during vaginal, anal and oral sex with someone who has syphilis. 	<ul style="list-style-type: none"> • You can give syphilis to your sexual partner(s). • A mother with syphilis can give it to her baby during pregnancy or have a miscarriage. • Can cause heart disease, brain damage, blindness or death.
Vaginitis	<ul style="list-style-type: none"> • Some women have no symptoms. • Itching, burning or pain in the vagina. • Discharge smells and/or looks different. • Jaundice (yellow skin). • Dark urine, light-colored bowel movements. 	<ul style="list-style-type: none"> • Can be spread during vaginal, anal, oral sex. • Men carry vaginitis infections without symptoms. 	<ul style="list-style-type: none"> • You can give vaginitis to your sexual partner(s) • Uncomfortable symptoms will continue. • Men can get infections in the penis, prostate gland or urethra.

SAMPLE PICTURE BOARD TO USE FOR SHOWING
"GROWING UP" FOR GIRLS



SAMPLE PICTURE BOARD TO USE FOR SHOWING
"GROWING UP" FOR BOYS



FEELINGS WORKSHEET



Sad



Shocked



Affection



Depressed



Joyful



Puzzled



Angry



Upset



Happy



Lonely



Insulted



Worried



Hurt

An Annotated Resource List:



**LIFESPAN HOLISTIC
SEXUALITY EDUCATION**
for Children & Adolescents with
Developmental Disabilities

by: Jeanne Matich-Maroney
DiAnn L. Baxley, editor

First Edition 2005

Sponsored by the United States Department of Health and Human Services, Administration on
Developmental Disabilities and the Florida Developmental Disabilities Council, Inc.

FORWARD

While most of the resources included in this list have been developed to meet the unique learning needs of children and adolescents with developmental disabilities, the reader will note the inclusion of many resources (particularly books, videos, and games) developed for children without disabilities. For the most part, adaptations have been made by recommending these items for use at higher grade levels for children with developmental disabilities (e.g., a book with a pre-school designation for children without disabilities may be located on the resource list at a K-2 grade-level).

To provide general guidance and direction to Resource List users, grade-level designations have been assigned. However, it bears noting that such designations are not likely to reflect the unique learning styles/capacities of all children with developmental disabilities. If a resource suggested for your child's/student's grade-level does not seem well suited to his/her developmental age or learning style, parents/caregivers and sexuality educators are encouraged to explore resources from other grade levels in order to best tailor their instruction.

Neither exhaustive, nor static, it is the author's hope that this Resource List will serve as a springboard for the comprehensive sexuality education of children and adolescents with developmental disabilities. Feel free to add to the list as you discover new and innovative materials, or create distinctive ones that work especially well for the children of your families and communities.

Jeanne Match-Maroney, PhD, LCSW-R
Assistant Professor

Iona College
Department of Social Work
715 North Avenue
New Rochelle, New York 10801
(914) 633-2471
(914) 637-7743 FAX
email: jmatch-maroney@iona.edu



This document is designed to serve as a sexuality education resource for parents/caregivers and educators of children with developmental disabilities.

Comprised of 88 entries, it is a compilation of books, videos, curricula, and other tools that facilitate the provision of a holistic, life-span approach to sexuality education for children (K-12) with developmental disabilities.

In order to promote ease of use, the Annotated Resource List has been organized into the following categories:

Background/Overview Materials

Resources for Parents/Caregivers
Resources for Educators

Policy Development Materials

Items included in this category are designed to provide support to the process of policy development.

Diversity Inclusion in Sexuality Education

These items are designed to support the development of culturally competent curricula. It is important to note that the scope of available materials is somewhat limited in this category as broad representation of ethnic, cultural, religious, disability and sexual orientations has yet to be established in this portion of literature.

Train-the-Trainer Materials

Materials included in this section are designed to address the preparation of educators, parents and caregivers.

Instructional Resources

(For the provision of sexuality education to children and adolescents with developmental disabilities)

- General Sexuality Education Curricula
- Materials to Support General Sexuality Education
- Materials to Support Teaching about Feelings/Emotions
- Materials to Support Teaching about Self-Esteem
- Materials to Support the Teaching of Social Skills
- Materials to Support the Teaching of Gender-Specific Issues
- Materials to Support Relationship Skill Training
- Abuse Prevention Curricula
- Materials to Support Abuse Prevention Training
- HIV/AIDS Prevention Curricula

*Entry excerpted from SIECUS (2002) Annotated Bibliography on Culturally Competent Sexuality Education Resources. Available at: <http://www.siecus.org/pubs/biblio/bibs0003.html>

**Entry excerpted from SIECUS (2001). Annotated Bibliography on Sexuality and Disability. Available at: <http://www.siecus.org/pubs/biblio/bibs0009>

***Entry excerpted from SIECUS (2000) Annotated Bibliography on Sexual Abuse. Available at: <http://www.siecus.org/pubs/biblio/bibs0002.html>

Background / Overview Materials

RESOURCES FOR PARENTS/CAREGIVERS

Sexuality: Your Sons and Daughters with Intellectual Disabilities
Karin Melberg Schwier and Dave Hingsburger, M.Ed. (2000)

This book provides information to parents and caregivers on interacting with their children (regardless of age or ability), in a way that increases their self esteem, encourages appropriate behavior, empowers them to recognize and respond to abuse, and enables them to develop lifelong relationships. Throughout the book, parents share the joys and challenges of raising a child with an intellectual disability as they offer advice and practical strategies, while individuals with disabilities share information about what is important to them.

\$24.95; ISBN: 1557664285; Brookes Publishing, Customer Service, P.O. Box 10624, Baltimore, MD 21285-0624; Phone: (800)638-3775; Fax: (410)337-8539

Website: www.brookespublishing.com

Caution: Do Not Open Until Puberty! An Introduction to Sexuality for Young Adults with Disabilities

Rick Enright, B.A., M.S.W. ; Illustrated by Sara L. Van Hamme (1995)

This book is intended to serve as an icebreaker for an open discussion of sexuality between adolescents with disabilities and their families. Using illustrations and clear, informative text, it addresses decision making, anatomy, sexual response, physical disability and sexual functioning, as well as suggestions for further learning.

\$9.95; ISBN: 0-9680415-0-7; Devinjer House, P.O. Box 130, Sparta, Ontario, Canada, N0L 2H0; Phone: (519) 685-8703; Fax: (519) 685-8699

Website: www.tvcc.on.ca

I am a Beautiful Person...Sexuality and Me: A Video for Parents of Teens with Disabilities

Cecil Shapland and Kris Scholler (Producers) (1996)

This video demonstrates how all people can live their lives as healthy sexual beings. Designed for viewing by parents and caregivers, it includes interviews with people of varying ages and abilities.

\$35.00; Pacer Center, 4826 Chicago Ave. South, Minneapolis, MN, 55417; Phone: (612) 827 2966; Fax: (952) 838-0199

Website: www.pacer.org

Sexuality Education for Children and Youth with Disabilities (#ND17)
National Information Center for Children & Youth with Disabilities (NICHCY) (1992)

This News Digest addresses the concerns that parents and professionals face in guiding children and young adults with disabilities in their social sexual development and in preparing them to make healthy, responsible decisions about adult relationships. Many books and videos on human sexuality are listed, to assist parents and professionals in obtaining

materials necessary to support the sexuality education of children with disabilities. It is available online in both English and Spanish and formatted as HTML or PDF documents. Available at: <http://mirror.cs.cmu.edu.cn/Mirror/accesserjic/www.nichcy.org/pubs/newsdir/nd17.htm>

10 Tips: Talking about Sexuality with your Child with Developmental Disabilities *SexTalk.org*

Excerpted from curriculum materials developed by Lisa Maurer, M.S., CFLE, for Family Information Services in Minneapolis (1997), Planned Parenthood of Tompkins County (New York) has posted this as one of three "talking tips" sheets on their website. Succinct and direct, it offers parents ideas about enhancing this discussion with their son or daughter who has a developmental disability.

Planned Parenthood of Tompkins County, 314 West State Street, Ithaca, NY 14850; Phone (Education Department) (607) 273-1526
Website: www.sextalk.org

Sexuality and Your Child: A Resource for Parents of Children with a Disability

Sunny Hill Education Centre at the Sunny Hill Health Centre for Children (2004)
This pamphlet provides information for parents to help their children with disabilities understand and deal with their sexuality.

Sunny Hill Education Resource Centre, Room S225, 3644 Slocan Street, Sunny Hill Health Centre for Children, Vancouver, BC, V5M 3E8; Phone: (800)331-1533 ext.1; (604) 453-8335 ext. 1; Fax: (604)875-3455

(Pamphlet available for downloading at www.bc.ca/library/pdf/pamphlets/SH30.pdf)
Website: www.bc.ca/sunnyhill/shrl

Sexuality? Where Do I Begin?

Sunny Hill Education Resource Centre at the Sunny Hill Health Centre for Children (2003)

Available at: www.bc.ca/sunnyhill/SHRI/education/parents.htm

This online guide offers useful direction and practical suggestions to parents of children and adolescents with developmental disabilities. It highlights the fact that healthy sexuality is more than just "sex," and illuminates important topical areas (public/private; bodies and emotions; social distance; appropriate/inappropriate touch; safety plans; consequences for inappropriate touch). The guide provides a set of tips for facilitating the discussion, a list of frequently asked questions and strategies for managing the coverage of sexuality as a broad topic.

Sunny Hill Education Resource Centre, Room S225, 3644 Slocan Street, Sunny Hill Health Centre for Children, Vancouver, BC, V5M 3E8; Phone: (800)331-1533 ext.1; (604) 453-8335 ext. 1; Fax: (604)875-3455
Website: www.bc.ca/sunnyhill/SHRI/education/parents.htm

RESOURCES FOR EDUCATORS

An Annotated Bibliography on Sexuality and Disability *Sex Information and Education Council of the United States (SIECUS)* *Amy Levine & Darlene Torres (2001)*

This Annotated Bibliography offers a cross-section of available sexuality related materials on physical and mental disabilities as well as chronic illness. The SIECUS position statement on sexuality and disabilities is included. The authors note the relative absence of more recent resources.

Free; SIECUS; 130 West 42nd Street, Suite 350, New York, NY 10036-7802; Phone: (212) 819-9770; Fax: (212) 819-9776

Website: www.siecus.org

(Available online at: www.siecus.org/pubs/biblio/bib0009.html)

Child Abuse and Neglect Disability Outreach Project *Can Do! Website*

This online resource is administered by ARC of Riverside CA. The project is currently pursuing objectives to identify and disseminate best practices in abuse prevention and treatment for people with developmental disabilities. The project also sponsors an Annual National Conference on The Abuse of Children and Adults with Disabilities. Now offering an online (via video streaming) Professional Training Conference on Abuse and Disabilities through August 2005.

Available online at: www.disabilityabuse.com

Providing Sexuality Education for Children & Young People with Disabilities

Sunny Hill Education Resource Center at the Sunny Hill Health Centre for Children
Available online at: www.bc.ca/sunnyhill/SHRI/education/professionals.htm

This online guide parallels the parent guide referenced in the previous section. It identifies the qualities of an effective sexuality educator, summarizes healthy sexuality, identifies age-appropriate topic areas, provides tips for facilitating discussion about sexuality and describes strategies for modifying sexuality topics to meet the unique needs of students with disabilities.

Sunny Hill Education Resource Centre, Room S225, 3644 Slocan Street, Sunny Hill Health Centre for Children, Vancouver, BC, V5M 3E8; Phone: (800)331-1533 ext.1; (604) 453-8335 ext. 1; Fax: (604)875-3455

Website: www.bc.ca/sunnyhill/SHRI/education/professionals.htm

Topics and Resources for Sexuality Education for Children & Young People with Developmental Disabilities

Sunny Hill Education Resource Center at the Sunny Hill Health Centre for Children (2003)

Available online at: www.bc.ca/sunnyhill/SHRI/education/professionals.htm

This online guide provides a succinct rationale for the sexuality education of

children and youth with developmental disabilities. Additionally, it offers a detailed chart of useful resources organized by sexuality education topic/objective AND age group.

Sunny Hill Education Resource Centre, Room S225,3644 Slocan Street, Sunny Hill Health Centre for Children, Vancouver, BC, V5M 3E8; Phone: (800)331-1533 ext.1; (604) 453-8335 ext. 1; Fax: (604)875-3455

Website: www.cw.bc.ca/sunnyhill/SHRL/education/professionals.htm

Policy Development Materials

Guidelines for Comprehensive Sexuality Education: Kindergarten – 12th Grade, 2nd Edition

Sex Information Education Council of the United States National Guidelines Task Force (1996)

This set of guidelines is designed to provide direction to the task of developing curricula appropriately tailored to the unique characteristics of local communities.

SIECUS Publications Department, 130 West 42nd Street, Suite 350, New York, NY 10036-7802; Phone: (212) 819-9770; Fax: (212) 819-9776

Website: www.siecus.org

(Available online at: <http://63.73.227.69/pubs/fact/fact0003.html>)

But Does it Work?: Improving Evaluations of Sexuality Education

Sex Information & Education Council of the United States (SIECUS) (1997)

A fundamental aspect of constructing any sexuality education program is determining how its effectiveness is to be evaluated. This article provides the professional with important information about efforts to evaluate sexuality education, issues encountered and recommendations for evolving effective approaches to evaluating new sexuality education programs as they are developed.

SIECUS, 130 West 42nd Street, Suite 350, New York, NY 10036-7802; Phone: (212) 819-9770; Fax: (212) 819-9776

Website: www.siecus.org

(Available online at: www.siecus.org/pubs/evals/eval0000.html)

Sexuality Education of Children and Adolescents with Developmental Disabilities

American Academy of Pediatrics' Policy Statement (1996)

This frequently referenced policy statement was printed in Pediatrics in February 1996. While its guidance on the issue of sexuality education is geared to pediatricians, it clearly identifies the profession's stance as to the primary objectives of sexuality education. As such, it can be useful to those engaged in policy and curriculum development as well.

(Available online at: www.aappolicy.aappublications.org/csd/repnrl/pediatrics-97/2/275.pdf)

Creating Policy and Guidelines within Service Organizations on Sexual Health Issues for Children and Young People with Disabilities

Sunny Hill Education Resource Center at the Sunny Hill Health Centre for Children (2003)

This online resource provides a basic framework for developing guidelines and policies on sexual health issues related to children and young people with disabilities.

Sunny Hill Education Resource Centre, Room S225,3644 Slocan Street, Sunny Hill Health Centre for Children, Vancouver, BC, V5M 3E8; Phone: (800)331-1533 ext.1; (604) 453-8335 ext. 1; Fax: (604)875-3455

Website: www.cw.bc.ca/sunnyhill/shrl/education/professionals.htm

(Available online at: www.cw.bc.ca/sunnyhill/SHRL/education/professionals.htm)

Diversity Inclusion in Sexuality Education

Educating Everybody's Children: Diverse Teaching Strategies for Diverse Learners*

Robert W. Cole, Editor (1995)

Though not specifically focused on sexuality education, this book serves as a practical guide to developing a variety of school programs that can improve the performance of students from diverse cultural, ethnic, linguistic, and socioeconomic backgrounds. While some of the instruction is designed to increase student achievement in reading, writing, mathematics, and oral communication skills, other strategies may be applied to sexuality education as well.

\$25.95; ISBN: 0871202379; Association for Supervision and Curriculum Development 1703 N. Beauregard Street, Alexandria, VA 22311, Phone: (800)933-2723

Fax: (703)575-5400

Website: www.ascd.org

(Also available at Amazon.com).

Guidelines for Comprehensive Sexuality Education for Hispanic/Latino Youth Kindergarten-12th Grade *

Sex Information and Education Council of the United States (SIECUS) (1995)

This booklet is an adaptation of SIECUS' Guidelines for Comprehensive Sexuality Education K-12 specifically designed for use with Hispanic/Latino youth. It provides a framework for comprehensive sexuality education including key concepts and developmental messages for early childhood, pre-adolescence, early adolescence, and adolescence. The text, in both Spanish and English, includes a resource section on materials for Hispanic/Latino youth.

\$8; SIECUS Publications Department, 130 West 42nd Street, Suite 350, New York, NY 10036-7802; Phone: (212) 819-9770; Fax: (212) 819-9776

Website: www.siecus.org

Sexuality Education Across Cultures: Working with Differences*

Janice M. Irvine (1995)

Using social constructionist theory as a tool for understanding cultural diversity and sexuality, this book describes how culture shapes the ways that individuals may differ in their sexual thoughts, feelings, and behaviors. The author acknowledges that there is usually no single blueprint for developing effective multicultural sexuality education. The book provides insight into research and examples of problems sexuality educators may face as they develop culturally competent programs to meet their specific needs.

\$40.00; ISBN: 0787901547; Jossey-Bass Attention: Order Department, 10475 Cross Point Boulevard, Indianapolis, IN 46256;

Phone: (800) 956-7739; Fax: (800) 605-2665

Website: www.josseybass.com

(Also available at Amazon.com).

Sexuality, Poverty, and the Inner City*

Elijah Anderson, Ph.D. (1994)

This report from the seminar series, "Sexuality and American Social Policy," focuses on the effects poverty has had on the sexual behavior and gender roles of urban youth. It also compares the sexual attitudes and experiences of poor white teenagers with those of minority youth.

Free; ISBN 0944525199; Kaiser Family Foundation, 2400 Sand Hill Road, Menlo Park, CA 94025; Phone: (800) 656-4533; Fax: (650) 854-4800

Website: www.kff.org

Train-The-Trainer Materials

All of Us Talking Together: Sex Education for People with Developmental Disabilities

Program Development Associates (1999)

In this 38-minute video, parents, their young adult sons and daughters with developmental disabilities, and educators highlight the critical need for sex education for this population and demonstrate practical models for delivering this service. A detailed sex education segment covers reproductive anatomy, pregnancy, contraception, and disease prevention. Social skill development and the desires for friendship, companionship and romance are all considered. Public vs. private behaviors are explored and steps for reporting sexual abuse are included.

\$99.95; Program Development Associates, P.O. Box 2038 Syracuse, NY 13220-2038

Phone: (800)543-2119; Fax: (315)452-0710

Website: www.pdassoc.com

No More Victims: Manual for Families/Friends; Manual for Counselors/Social Workers

Roehrer Institute (1992)

These are two of the four manuals (the others are for law enforcement and the legal system) that explore factors contributing to increased risk for sexual abuse in this population; describe signs and symptoms of potential sexual abuse and outline appropriate/effective responses and preventive measures. Considered an essential resource for groups concerned with the sexual abuse of individuals with developmental disabilities.

\$10.00; Roehrer Institute, Kinsmen Building, York University, 4700 Keele Street, Toronto, Ontario M3J 1P3; Phone (416) 661-9611;

(800) 856-2207; Fax (416) 661-570

Website: www.roehrer.ca

Socialization and Sexuality: A Comprehensive Training Guide for Professionals Helping People with Disabilities that Hinder Learning
Winifred Kempton (1998)

Written by one of the pioneers of sexuality education for people with developmental disabilities, this encyclopedia of information on socialization and sexuality is considered an invaluable resource for sexuality educators as well as parents. Aimed at increasing the social satisfaction and sexual safety of individuals with developmental disabilities, it covers such topics as: Sexuality Education and Guidelines for Curriculum Design; Coping with Inappropriate Sexual Behavior; Sexual Abuse; Informed Consent; and Working with Parents.

\$59.95; *Program Development Associate, P.O. Box 2038 Syracuse, NY 13220-2038*
Phone: (800)543-2119; Fax: (315)452-0710

Website: www.ndassoc.com

Speaking of Sex & Sex Education for Persons with Disabilities that Hinder Learning

James Stanfield Publishing Co.

Utilizing an interview with sexuality educator pioneer, Winifred Kempton, this video program assists in training the trainer to present sexuality education to students with developmental disabilities. The video is accompanied by a 200-page book with materials for new instructors and tips for more seasoned sexuality educators.

\$99; *James Stanfield Publishing Co., P.O. Box 41058, Santa Barbara, CA 93140;*
Phone: (800) 421-6534; Fax: (805) 897-1187

Website: www.stanfield.com

Talking Sex! Practical Approaches and Strategies for Working with People who have Developmental Disabilities When the Topic is Sex

Lisa Maurer (1999)

This guidebook provides direction for preparing staff to enter the role of sexuality educator. It includes information, activities and overheads to facilitate educators' ability to make sexuality education more accessible to individuals with developmental disabilities. Chapters include: How Do I Start? Why Do I Do This? Who Is My Audience? What Might Slow Me Down? How Do We Learn What We Know? Why is S/He Doing That? What Do I Say? How Do I Say It? An appendix offers an overview of the history of societal attitudes towards the sexuality of people with developmental disabilities and a list of resources.

\$40; *Planned Parenthood of Tompkins County, 314 West State Street, Ithaca, NY 14850; Phone (Education Department) (607) 273-1526*

Website: www.sexstalk.org

Teaching Persons with Mental Retardation about Sexuality and Relationships: An Instructional Guide*

June Kogut and Susan Vilarde, Authors; Jane Bernstein, Editor (1993)

This manual offers educators of persons with mental retardation guidance in the development and implementation of sexuality education programs.

\$49.95; *Planned Parenthood of Connecticut, 129 Whitney Avenue, New Haven, CT 06510; Phone: (203) 865-5158; Fax: (203) 624-133*

Website: www.opci.org

Instructional Resources

GENERAL SEXUALITY EDUCATION CURRICULA

GRADE-LEVEL: 4-9

Changes in You: An Introduction to Sexuality Education through an Understanding of Puberty**

Peggy C. Siegel, M.S. (1991)

This family life education program for young people with cognitive disabilities is intended to help students in grades 4-9 develop strong, positive feelings about themselves as they make the transition into puberty. The complete program includes 73 laminated illustrations, Changes in You book for Boys, Changes in You book for Girls, and a teacher's guide.

\$299; *James Stanfield Publishing Co., P.O. Box 41058, Santa Barbara, CA 93140;*
Phone: (800) 421-6534; Fax: (805) 897-1187

Website: www.stanfield.com

GRADE-LEVEL: 7-12

Learn about Life: Sexuality & Social Skills Set

Program Development Associates (1996)

This spiral-bound book, with six laminated picture books, is targeted to special education students (grades 7+). Covers puberty, dating, pregnancy, relationships and STD's, with realistic graphics, simple text and "cover-up" edit stickers. It includes a resource file with instructor's guide and reproducible masters.

\$99.95; *Program Development Associates, P.O. Box 2038 Syracuse, NY 13220-2038*
Phone: (800)543-2119; Fax: (315)452-0710

Website: www.ndassoc.com

LIFEFACTS: Essential Information about Life for Persons with Special Needs
*James Stanfield Company (1990, 1992)***

Of the seven programs available, three address sexuality: AIDS, Sexuality, and Sexual Abuse Prevention. They are designed to provide health education professionals with essential materials and information to teach adolescents and adults with mild to moderate developmental disabilities.

1990, AIDS; 1992, Sexuality; 1990, Sexual Abuse Prevention; \$199/each; \$174 each/any two programs, \$165.67 each/any three programs; James Stanfield Publishing Co., P.O. Box 41058, Santa Barbara, CA 93140;
Phone: (800) 421-6534; Fax: (805) 897-1187

Website: www.stanfield.com

Life Horizons I: The Physiological and Emotional Aspects of Being Male & Female

Life Horizons II: The Moral, Social and Legal Aspects of Sexuality**
Winifred Kempton, M.S.W. (1999)

These two curricula are for people with mild to moderate developmental disabilities. Life Horizons I consists of five programs: Parts of the Body, Sexual Life Cycle, Human Reproduction, Birth Control or Regulation of Fertility, and Sexually Transmitted Diseases & AIDS. It includes over 500 slides, a teacher's guide and script, and video. Life Horizons II consists of seven programs: Building Self-Esteem & Establishing Relationships, Moral, Legal & Social Aspects of Sexual Behavior—Male, Dating Skills & Learning to Love, Marriage & Other Adult Lifestyles, Parenting, Preventing or Coping With Sexual Abuse. It includes over 600 slides, a teacher's guide and script.

\$399 each, \$699 for both; James Stanfield Publishing Co., P.O. Box 41058, Santa Barbara, CA 93140; Phone: (800) 421-6534; Fax: (805) 897-1187

Website: www.stanfield.com

Sexuality Education For Persons With Severe Developmental Disabilities Revised Edition

Beverly Brekke, Ed.D. (1988)

This curriculum is for people with severe developmental disabilities. It includes over 300 slides that use "right" and "wrong" icons to nonverbally cue appropriate and inappropriate social/sexual behaviors. The slide presentations address anatomy, appropriate social behavior, menstruation, and medical examinations. This curriculum can also be used to supplement to Life Horizons I and II. It comes accompanied by a comprehensive Teacher's Guide.

\$399; James Stanfield Publishing Co., P.O. Box 41058, Santa Barbara, CA 93140; Phone: (800) 421-6534; Fax: (805) 897-1187

Website: www.stanfield.com

Special Education: Secondary F.L.A.S.H. (Family Life and Sexual Health): A Curriculum for Grades 7- 12

Jane Stangle, M.Ed. (1991)

This comprehensive program is designed for adolescents in special education programs. It addresses the physical, emotional, and safety aspects of sexuality education; encourages

parent and family involvement; and includes a section on preparing community-based sexuality education programs. Lesson plans cover relationships, communication, avoiding exploitation, anatomy, reproduction, sexually transmitted diseases, and AIDS. The curriculum includes resource lists, guidelines for answering students' questions, recommended audiovisuals, teacher preparation suggestions, and masters for all transparencies and student handouts.

\$40; Family Planning Publications, Seattle-King County Department of Public Health, 400 Yesler Way, 3rd Floor, Seattle, WA 98104; Phone: (206) 296-4902; Fax: (206) 205-5281

Lesson plans available for download at www.metrokc.gov/health/famplan/flash/index.htm

MATERIALS TO SUPPORT GENERAL SEXUALITY EDUCATION

GRADE-LEVEL: K-12

Teach-A-Bodies Anatomically Correct Dolls

Teach-A-Bodies, LLC

These high quality anatomically correct and detailed dolls have an established record of use in sexuality education (as well as in investigative and therapy work around sexual abuse). Custom-ordered life-size dolls (Birth: a Baby with uterus, placenta and umbilical cord), adults (5'3") and children (3') are available and all dolls can be custom-enhanced to meet specific needs (e.g. representative of specific ethnic groups).

\$370.00 Family of Four + "Teach-A-Bodies: An Effective Resource" + Carrying Bag; Teach-A-Bodies, P.O. Box 416, Grapevine, TX 76099-0416;

Phone: Toll-free (888) 228-1314 or (817) 416-9138; Fax: (817) 416-9139

Website: www.teach-a-bodies.com

GRADE-LEVEL: K-2

Bare Naked Book

Kathy Stinson & Heather Collins (1986)

This book provides young children with an introduction to the parts of the body. In a light and entertaining manner, it facilitates the proper naming of all body parts from head to toe. It is particularly sensitive to diversity portraying a wide array of people, some of different races/ethnicities, some in wheelchairs etc.

\$5.95; ISBN: 0920303536; Annick Press; Firefly Books Ltd, 15 Patricia Avenue Toronto, ON M2M 1H9; Phone (800) 387-5085 or (416) 499-8412; Fax (800) 565-6034 or (416) 499-8313

Website: www.annickpress.com

(Also available at Amazon.com).

Bellybuttons are Navels

Mark Schoen & M.J. Quay (1990)

This preschool book offers young children the opportunity to compare the physiological differences between boys and girls. It facilitates the proper naming of ALL body parts.

\$20.00; ISBN: 0879755857; Prometheus Publishers, 59 John Glenn Drive, Amherst, New York 14228-2197; Phone: (800) 421-0351; Fax: (716) 691-0137

Website: www.prometheusbk.com

(Also available at Amazon.com - \$13.60)

GRADE LEVEL: 3-5

A Kid's First Book About Sex

Joani Blank and Marcia Quackenbush (1989)

This is a book about sex for children who haven't yet reached puberty.

It discusses facts and feelings associated with many aspects of sex, including some, like pleasurable touch that kids may already have experienced.

The book has appealing illustrations and large print.

\$6.00; ISBN: 094020805; Yes Press (Down There Press), 938 Howard Street, Suite 101, San Francisco, CA 94103; Phone: (800) 289-8423 or (415) 974-8990; Fax: (415) 974-8989

Website: www.goodvibes.com

(Also available at Amazon.com)

Where Did I Come From?

Peter Mayle (2000)

The classic book originally published in 1973 was reprinted in 2000. Through the use of light-hearted illustrations, the reproductive process from intercourse to birth is described.

\$8.96; ISBN: 0818402639; Citadel Trade

(Available at Amazon.com)

GRADE LEVEL: 6-8

Changes in You: A Clearly Illustrated, Simply Worded Explanation of the Changes of Puberty for Boys

Changes in You: A Clearly Illustrated, Simply Worded Explanation of the Changes of Puberty for Girls

Peggy C. Siegel (1991)

Printed for the fourth time in 1997, these books are written in a simple, positive manner. They explain the changes that boys and girls experience during puberty. Topics addressed in each book include physical development, anatomy, masturbation, health, doctor's visits,

public and private behaviors, and how to deal with unwanted touch. In addition, the boy's book addresses wet dreams and the girl's book addresses menstruation. Parents' guides are also available for sons and daughters with special needs.

\$8.95/each; Family Life Education Associates, P. O. Box 7466, Richmond, VA 23221; Phone: (804) 262-0531

Website: www.changesinyou.homestead.com

MATERIALS TO SUPPORT TEACHING ABOUT FEELINGS/EMOTIONS

GRADE-LEVEL: K-2

The Way I Feel Boardbook

Janan Cain (2004)

This boardbook is designed to serve as an introduction to feelings. With whimsical characters throughout, children learn about the range of human emotions and begin to recognize that feelings are a part of everyday life.

\$7.95; Parenting Press, Inc. P.O. Box 75267, Seattle, WA 98175-0267;

Phone (sales department): (800) 992-6657; Fax: (206) 364-0702

Website: www.parentingpress.com

GRADE-LEVEL: 3-5

The Way I Feel

Janan Cain (2000)

This full-color picture book helps kids to describe their emotions and understand that feelings are a normal part of life. With whimsical characters throughout, children learn about the range of human emotions (both their own and others) and begin to develop a vocabulary for expressing emotions in words.

\$16.95; ISBN: 1884734715; Parenting Press, Inc. P.O. Box 75267,

Seattle, WA 98175-0267; Phone (sales department): (800) 992-6657;

Fax: (206) 364-0702

Website: www.parentingpress.com

What is a Feeling?

David W. Krueger, Illustrated by Jean Whitney (1993)

This book utilizes familiar situations to help children put their feelings into words. It encourages children to value and respect their feelings. The book includes a game circle for Fun with Feelings.

\$6.95; ISBN: 0943990750; Parenting Press, Inc. P.O. Box 75267, Seattle, WA

98175-0267; Phone (sales department): (800) 992-6657; Fax: (206) 364-0702

Website: www.parentingpress.com

MATERIALS TO SUPPORT TEACHING ABOUT SELF-ESTEEM

GRADE-LEVEL: K-2

Happy to Be Me: Self-Esteem
Jim Boulden and Joan Boulden (1999)

This animated video program can be used to introduce or reinforce the concept of self-respect. Luis is suffering from low self-esteem. His counselor helps him discover his own special gifts. As they watch Luis' personal transition, children develop an awareness of what promotes and self-respect and what tears it down. The program is available with an activity book with reproducible pages.

\$39.95 Video Kit; ISBN: 000000489; Boulden Publishing, P.O. Box 1186, Weaverville, CA 96093; Phone: (800) 238-8433; Fax: (530) 623-5525

Website: www.bouldenpublishing.com

GRADE-LEVEL: K-5

Just Because I Am: A Child's Book of Affirmation
Lauren Murphy Payne & Claudia Rohling (1994)

Brightly illustrated with child-friendly pictures, this book is designed to strengthen and support a child's self-esteem. It teaches children to respect their bodies and to acknowledge their needs and feelings as important. Conveys the message that the child is important not because of what he/she does, but just because he/she is.

\$14.95; ISBN: 0915793601; Free Spirit Publishing, 217 5th Ave N, Suite 200, Minneapolis, MN 55401-1299; Phone: (612) 338-2068; Fax: (612) 337-5050

Website: www.freespirit.com

GRADE-LEVEL: 6-12

SEALS + Plus: Self-Esteem and Life Skills: Reproducible Activity-Based Handouts Created for Teachers and Counselors

Kathy L. Korb-Khalsa, Stacey D. Azoh, & Estelle A. Leutenberg (1992)

This book offers a selection of 80 activity handouts taken from Life Management Skills Books I & II, which look at the social, personal and self growth of young people. It is designed for use with middle and high school students.

\$59.95; ISBN: 0962202231; Wellness Reproductions & Publishing, LLC; 135 Dupont Street, P.O. Box 760, Plainville, NY 11803-0760;

Phone: (800) 669-9208; Fax: (800) 501-8120

Website: www.wellness-resources.com

MATERIALS TO SUPPORT THE TEACHING OF SOCIAL SKILLS

GRADE-LEVEL K-5

How to Be a Friend
Laurie Krasny Brown, Illustrated by Marc Brown (1998)

These comical but honest dinosaur kids teach human children how to find out if someone will make a good friend, how to show someone that you would like to be friends, how to settle an argument with a friend, and much more. This is a great way to talk about the importance of learning new social skills. Not expressly written for children with disabilities but parents of children with Asperger's Syndrome and autism have rated the book highly.

\$6.99; ISBN: 0316109134; Little, Brown Publishers; New York, NY; (Available at Amazon.com)

GRADE-LEVEL K-12

Circle of Friends Game
Cindy Hamilton (1999)

This is a cooperative game that teaches and reinforces behaviors that help people build lasting friendships with others. As they play the game, players learn they must make choices about their behavior and that these choices will influence their success in making and keeping friends.

\$52.00; ISBN: 188273291x; Childwork/Childplay, 135 Dupont Street, P.O. Box 760, Plainville, NY 11803-0760; Phone: 800/962-1141; Fax: 800/262-1886

Website: www.childwork.com

Social Skills Activities for Special Children
Darlene Mannix, Illustrated by Tim Mannix (1993)

This book contains 142 ready-to-use lessons and reproducible master activity sheets to help children with developmental disabilities become aware of socially acceptable behavior and to work toward the acquisition of basic social skills.

\$18.87; ISBN: 0876288689; Center for Applied Research in Education, West Nyack, NY (Available at Amazon.com)

Social Skills Stories: Functional Picture Stories for Readers and Nonreaders K-12

Anne Marie Johnson, B.Sc.Ed, M.Ed. & Jackie L. Susnik, M.A., CCC-SLP (1998)

The stories contained within this book are designed to help students improve their social interaction skills. Topics are presented in playfully illustrated stories. Each target skill has a story illustrating the skill being performed appropriately and inappropriately. Topics particularly relevant for sexuality education include social space, greetings and gift buying and giving. Corresponding activity sheets as well as carryover activities for the classroom, community and home are also included.

\$29.00; Mayer-Johnson, Inc., P.O. Box 1579, Solana Beach, CA 92075;

Phone: (800) 588-4548 or (858) 550-0084; Fax: (858) 550-044

Website: www.mayer-johnson.com

More Social Skills Stories: Very Personal Picture Stories for Readers and Nonreaders K-12

Anne Marie Johnson, B.S. Ed. (1999)

This book contains a series of short stories depicting the appropriate and inappropriate use of communication and social interaction skills. Issues such as grooming and appropriate self-touch hold particular relevance for sexuality education. Worksheets and suggestions for generalization activities are also included.

\$29.00; ISBN: 1884135218; Mayer-Johnson, Inc., P.O. Box 1579, Solana Beach, CA 92075; Phone: (800) 588-4548 or (858) 550-0084; Fax: (858) 550-044

Website: www.mayer-johnson.com

GRADE-LEVEL K-2

Connecting with Others: Lessons for Teaching Social and Emotional Competence Grades K-2

Rita Coombs-Richardson (1996)

This is the first in an enjoyable K-12 curriculum series designed to promote the development of self-advocacy, communication, interpersonal and problem-solving skills in young children. Instructional strategies include story-telling, relaxation, modeling, coaching, behavior rehearsal, reinforcement, creative expression, and self-instruction.

\$39.95; ISBN: 0878223622; Research Press Dept. 25W P.O. Box 9177 Champaign, IL 61826; Phone 217-352-3273, 800-519-2707, Fax 217-352-1221.

Website: www.researchpress.com

GRADE-LEVEL: 3-5

Connecting with Others: Lessons for Teaching Social and Emotional Competence Grades 3-5

Rita Coombs-Richardson (1996)

This is the second in an enjoyable K-12 curriculum series designed to promote the development of self-advocacy, communication, interpersonal and problem-solving skills in young children. Instructional strategies include story-telling, relaxation, modeling, coaching, behavior rehearsal, reinforcement, creative expression, and self-instruction.

\$39.95; ISBN: 0878223630; Research Press Dept. 25W P.O. Box 9177 Champaign, IL 61826; Phone: (217) 352-3273, (800) 519-2707; Fax: (217) 352-1221.

Website: www.researchpress.com

How to Lose All Your Friends

Nancy Carlson (1997)

This is a tongue-in-cheek, reverse etiquette book designed to help kids identify socially undesirable behaviors (e.g., whining, tattling, teasing etc). Originally written for children 3-8, it can be used as a read-aloud book interspersed with instructor-led discussion for children with disabilities.

\$5.99; ISBN: 0140558624; Puffin Books a Division of the Penguin Group 345 Hudson Street, New York, NY 10014

(Also available at Amazon.com)

GRADE-LEVEL: 6-8

Connecting with Others: Lessons for Teaching Social and Emotional Competence Grades 6-8

Rita Coombs-Richardson & Elizabeth T. Evans (1997)

This is the third in an enjoyable K-12 curriculum series designed to promote the development of self-advocacy, communication, interpersonal and problem-solving skills in elementary-school aged children. Instructional strategies include story-telling, relaxation, modeling, coaching, behavior rehearsal, reinforcement, creative expression, and self-instruction.

\$39.95; ISBN: 0878223649; Research Press Dept. 25W P.O. Box 9177 Champaign, IL 61826; Phone: (217) 352-3273, (800) 519-2707; Fax: (217) 352-1221.

Website: www.researchpress.com

GRADE-LEVEL: 7-12

Autism & PDD: Adolescent Social Skills Lessons: Health & Hygiene
Pam Britton Reese & Nena C. Chellenner (2001)

These story lessons can be used to teach important social skills related to health and hygiene. The instructional lessons teach what to say and do in social situations that can be overwhelming to the young person with autism or PDD. The behavioral lessons target those behaviors that pose health or social risks and need to be addressed (e.g. overeating). Chapters include: Healthy Habits; Health Care; Puberty and Basic Grooming Skills.

\$21.00; LinguSystems, Inc.; 3100 4th Avenue, East Moline, IL 61244; Phone: (800) 776-4332; Fax: 800-577-4555

Website: www.linguisticsystems.com

Connecting with Others: Lessons for Teaching Social and Emotional Competence Grades 9-12

Rita Coombs-Richardson & Charles Meisgeier (2001)

This is the final installment in an enjoyable K-12 curriculum series designed to promote the development of self-advocacy, communication, interpersonal and problem-solving skills in young people. Geared toward the adolescent, this volume offers 40 learning activities that consider cultural, ethnic and gender diversity and help to prepare adolescents for the transition to adulthood.

\$39.95; ISBN: 0878224645; Research Press Dept. 25W P.O. Box 9177 Champaign, IL 61826; Phone: (217) 352-3273, (800) 519-2707; Fax: (217) 352-1221.

Website: www.researchpress.com

MATERIALS TO SUPPORT THE TEACHING OF GENDER-SPECIFIC ISSUES

GRADE LEVEL: 6-8

Janet's Got Her Period

Judi Gray & Jitka Jitich (1990)

This comprehensive video program is specifically designed for use with girls and young women with moderate cognitive disabilities. The 17-minute video tells the story of a young girl who learns menstrual self-care from her mother and sister. It includes a detailed task analysis of behaviors required for using menstrual pads. The package is comprised of the video, an illustrated storybook, an extensive resource book for the educator, parents or caregiver(s), a computer pictograph wall chart outlining the steps for changing a sanitary napkin, and 24 laminated cards for student use.

\$399; James Stanfield Publishing Co., P.O. Box 41058, Santa Barbara, CA 93140; Phone: (800) 421-6534; Fax: (805) 897-1187

Website: www.stanfield.com

Period

JoAnn Gardner-Loulan & Bonnie Lopez, Illustrated by Marcia Quackenbush (1991)

This book was written for young girls going through the physical and emotional changes associated with puberty. Considered a comprehensive and friendly book that provides explicit information about menstruation, it also covers gynecological exams. A Parent Guide is included.

\$9.95; ISBN: 0802774784; Volcano Press P.O. Box 270, Volcano, CA 95669-0270; Phone: (800) 879-9636; Fax: (209) 296-4995

Website: www.volcanopress.com

(Also available at Amazon.com)

The Period Book: Everything You Don't Want to Ask (But Need to Know)

Karen Gravelle & Jennifer Gravelle (1996)

This user-friendly book published by an aunt and her 15-year-old niece provides facts about menstruation and puberty while also addressing some of the more difficult to ask questions/concerns. Cartoon illustrations help to keep a light-hearted tone about an important developmental milestone.

\$8.06; ISBN: 0-8027-7478-4; Walker & Company 104 Fifth Avenue New York, NY 10011; Phone (212) 727-8300; Fax (212) 727-0984 (Also available on Amazon.com). \$8.95; Braille version: National Braille Press, 88 St. Stephen Street, Boston, MA 02115;

Phone: (617) 266-6160, Toll Free: (888) 965-8965; Fax: (617) 437-0456.

Website: www.nbp.org

Ready, Set, Grow: A What's Happening to My Body? Book for Younger Girls

Lynda Madaras & Linda Davick (2003)

This playfully illustrated book is designed to provide thoughtful, down-to-earth information about puberty to girls prior to or as they are entering puberty. Geared to a 3rd-6th grade comprehension level, this book can be used with slightly older girls with developmental disabilities to help them understand the physical and emotional changes associated with puberty.

\$9.00; ISBN: 1557045658; Newmarket Press, A Division of Newmarket Publishing and Communications Company, 18 East 48th Street, New York, NY 10017; Phone: (212) 832-3575; Fax: (212) 832-3629

Website: www.newmarketpress.com

(Also available at Amazon.com)

"The Birds, the Bees and Me" for Girls

Tom McCaffrey (2003)

This highly acclaimed, award-winning educational video is designed for use with pre-teens and features a young adult talking about puberty and sex and childbirth. Good resource for introducing the topic and breaking the ice.

\$24.95; ASIN: 0972928413; The National Training Organization for Child Care Providers (NTOCCP LTD.), Phone: (303) 840-1997.

Website: www.birdsandbeesvideo.com

(Also available at Amazon.com)

"The Birds, the Bees and Me" for Boys

Tom McCaffrey (2003)

This highly acclaimed, award-winning educational video is designed for use with pre-teens and features a young adult talking about puberty and sex and childbirth. Good resource for introducing the topic and breaking the ice.

\$24.95; ASIN: 0972928405; The National Training Organization for Child Care Providers (NTOCCP LTD.), Phone: (303) 840-1997.

Website: www.birdsandbeesvideo.com

(Also available at Amazon.com)

GRADE LEVEL: 9-12

The Gyn Exam

Maria Olivia Taylor (1991)

This video program was designed for use with girls and women with developmental disabilities. It illustrates the process of a gynecological visit including both a pelvic and breast exam. Viewers meet Gemma and follow her from the time of scheduling an appointment through the exam. The package is comprised of two video tapes and 44 8x10 photos illustrating the pelvic and breast exams. A comprehensive teacher's guide is also included.

\$299; James Stanfield Publishing Co., P.O. Box 41058, Santa Barbara, CA 93140; Phone: (800) 421-6534; Fax: (805) 897-1187.

Website: www.stanfield.com

MATERIALS TO SUPPORT RELATIONSHIP SKILL TRAINING

GRADE-LEVEL: 10-12

Making Connections (Video)

Mary Ann Carmody (Producer), Sally Bailey (Director), Brian Pascale (Director) (1995)

This is an informative, entertaining look at a fictitious dating service for persons with developmental disabilities. The video and accompanying guide address a major issue encountered by young people with disabilities...how to meet people and broaden their circle of friends. The cast is comprised primarily of individuals with developmental disabilities. Recipient of numerous prestigious film awards including an Honorable Mention by the National Council on Family Relations Media Awards Competition.

\$79.00; Special Needs Project; 324 State Street, Suite H, Santa Barbara, CA 9310; Phone: (800) 333-6867; Fax: (805) 962-5087.

Website: www.specialneeds.com

The Relationship Video Series #1: The Friendship Series

Young Adult Institute/National Institute for Persons with Disabilities (YAI/NIPD) (1997)

This series of three videos helps young people with developmental disabilities to distinguish between strangers, acquaintances, and friends. Tape #1 (The Differences Between Strangers, Acquaintances and Friends) focuses on defining the differences between strangers, acquaintances and friends, identifies the five most important qualities of a friend and explores the "do's" and "don'ts" of dealing with strangers, acquaintances and friends. Tape #2 (Becoming an Acquaintance or a Friend), focuses on tips for meeting people, defining new relationships and moving from being an acquaintance to a friend. Tape #3 (Being a Friend) is an interactive video that engages the viewer in exercises designed to assist them to sustain friendships, resolve difficulties and/or end a friendship if necessary.

\$350.00 Set of Three Tapes; \$95.00 Tape #1; \$135.00 Tape #2; \$155.00 Tape #3; Young Adult Institute/National Institute for Persons with Disabilities; 460 West 34th St. NY, NY 10001-2382; Phone: (212) 273-6517.

Website: www.yai.org

The Relationship Video Series #2: The Boyfriend/Girlfriend Series

Young Adult Institute/National Institute for Persons with Disabilities (YAI/NIPD) (1997)

This series of three videos helps young people with developmental disabilities to better understand the nature of a boyfriend/girlfriend relationship. Tape #1 (Starting a Special Relationship) explores the differences between a friend and a boyfriend/girlfriend. Viewers learn how to initiate, build and maintain a boyfriend/girlfriend relationship. Tape #2 (Building a Relationship Like) emphasizes the importance of each partner's need to make decisions for him/herself and the significance of communication within this type of

relationship. It covers four ways to say "No" in social/sexual situations and teaches the use of a 3-step method for resolving conflicts. Tape #3 (Having a Good Relationship) centers on five ways to help maintain a fulfilling boyfriend/girlfriend relationship.

\$375.00 Set of Three Tapes; \$125.00 Tape #1; \$135.00 Tape #2; \$155.00 Tape #3; Young Adult Institute/National Institute for Persons with Disabilities; 460 West 34th St. NY, NY 10001-2382; Phone: (212) 273-6517.

Website: www.yai.org

ABUSE PREVENTION CURRICULA

GRADE-LEVEL: K-5

Child Sexual Abuse: A Solution

Karen Adams & Jennifer Fey (1985)

This popular sexual abuse prevention program was designed for use with a non-disabled population but it is readily adaptable for use with children with disabilities. A video program, it introduces Chester the Cat, who, through a gentle approach, teaches children self-protection skills. A six-part video program, it has been designed to teach children, address the concerns of parents and to facilitate teachers' abilities to cover this important topic.

\$249; James Stanfield Publishing Co., P.O. Box 41058, Santa Barbara, CA 93140; Phone: (800) 421-6534; Fax: (805) 897-1187.

Website: www.stanfield.com

Child Sexual Abuse Curriculum for the Developmentally Disabled

Sol R. Rappaport, Ph.D., Sandra A. Burkhardt, Ph.D., & Anthony F. Rotatori, Ph.D. (1997)

This book is divided into five segments: the first four are designed to help inform the abuse prevention educator as to important information about the sexual abuse of children with developmental disabilities. These include: Understanding Child Sexual Abuse of the Developmentally Disabled, The Treatment of Sexually Abused Children, Sexual Abuse: The Emotional and Behavioral Sequelae, Factors That Mediate the Sequelae of Child Sexual Abuse. The last chapter constitutes the Rappaport Curriculum for the Prevention of Child Sexual Abuse in Children with Developmental Disabilities with 10 lessons on sexuality and sexual abuse prevention for children with mild mental retardation. An appendix is also included, which parents and caregivers can review with children.

\$34.95; ISBN: 0398067341; Charles C. Thomas Publishers, Ltd., 2600 South First Street Springfield, IL 62704; Phone: (217) 789-8980; Fax: (217) 789-9130.

Website: www.ccthoas.com

CIRCLES I: Intimacy & Relationships

Marklyn P. Champagne, R.N., M.S.W., & Leslie Walker-Hirsch, M. Ed. (1993)

This curriculum is for people with mild to moderate developmental disabilities. It consists of two parts. Part I: Social Distance is comprised of eleven videos designed to help students "see" social and sexual distance. It also explains relationship boundaries and relationship-specific behaviors. Part II: Relationship Building is comprised of six videos that demonstrate how intimacy levels change as relationships change. The program also includes 12 videos, a wall teaching graph, 50 large laminated graph icons, 50 student "personal" graphs and icons, and a teacher's guide.

\$599; James Stanfield Publishing Co., P.O. Box 41058, Santa Barbara, CA 93140; Phone: (800) 421-6534; Fax: (805) 897-1187.

Website: www.stanfield.com

"No-Go-Tell"

Elisabeth J. Krents, Ph.D., & Sheila A. Brenner, M.A. (1991)

This curriculum, designed to teach child protection to 3-7 year olds, was created by experts serving children with disabilities. It is a comprehensive package of materials that features two dolls and a set of large illustrated teaching panels (11"x17"). It teaches four primary prevention concepts: differentiating between family, friends, familiar people and strangers; identifying private body parts; defining "O.K." touches; defining "Not O.K." touches; and identifying who and how to tell about an abusive experience.

\$299/without dolls, \$399/with dolls; James Stanfield Publishing Co., P.O. Box 41058, Santa Barbara, CA 93140; Phone: (800) 421-6534; Fax: (805) 897-1187.

Website: www.stanfield.com

Preventing Sexual Abuse: Activities and Strategies for Those Working with Children and Adolescents Second Edition**

Carol A. Plummer (1997)

This sexual abuse-prevention curriculum is divided into two sections. The first is a three- or five-day presentation for grades K through six, which is also adaptable for children with developmental disabilities. The second is a one-, three-, or five-day presentation for grades seven through 12. The curriculum provides: guidelines for the instructor, an appendix, and information about involving parents to make the program work.

\$23.95; ISBN: 1556911149; Learning Publications, Inc., P.O. Box 1338, Holmes Beach, FL 34218-1338; Phone (800) 222-1525; Fax: (941) 778-6818.

Website: www.learningpublications.com

Red Flag Green Flag ABCs: Personal Safety for Pre-Kindergarten Age Children***

Rape and Abuse Crisis Center of Fargo-Moorehead (ND) (1997)

This curriculum uses the letters of the alphabet to teach children three to five years of age, about "OK" and "Not OK" touches as well as "permission," "stranger danger," "secret touches," and general safety rules. The curriculum also teaches children to recognize who can help them and to know where they can go for help when they feel threatened. Materials are also available in Spanish.

\$14.95, facilitator's guide, ISBN: 0914633317; \$3.25, coloring book, ISBN 0914633236; \$29.95, video and video guide; Red Flag Green Flag Resources, Rape and Abuse Crisis Center of Fargo-Moorehead, P.O. Box 2984, Fargo, ND 58108-2984; Phone: (800) 627-3675; Fax: (888) 237-5332.

Website: www.redflaggreenflag.com

Red Flag Green Flag People: A Personal Safety Program: Materials for Early Elementary Age Children***

Rape and Abuse Crisis Center of Fargo-Moorehead (ND) (1995)

This curriculum is designed to teach children five to eight years of age about different kinds of touch, how to recognize potentially harmful situations, and how to use assertive responses. Instructors can implement the curriculum in three one-hour periods. The workbook is also available in Spanish.

\$10.95, facilitator's guide, ISBN 0914633120; 1995, \$3.25, workbook, ISBN 0914633104; 1996, \$1, parent's guide, ISBN: 0914633244; 1996; \$4.95, pre-test and post-test; Red Flag Green Flag Resources, Rape and Abuse Crisis Center of Fargo-Moorehead, P.O. Box 2984, Fargo, ND 58108-2984; Phone: (800) 627-3675; Fax: (888) 237-5332.

Website: www.redflaggreenflag.com

T is for Touching: Abuse Prevention Program for Kindergarten Age Children***

Rape and Abuse Crisis Center of Fargo-Moorehead (ND) (1995)

This video is designed to teach abuse-prevention skills to groups of children five to six years of age. It consists of three six-minute vignettes entitled "T is for Touching," "H is for Helping," and "P is for Prevention." It teaches children to recognize appropriate and inappropriate touch; to say "no" to, and "get away" from abusive situations; and to identify and then "tell a helper." The video is accompanied by a facilitator's guide.

\$79.99; Red Flag Green Flag Resources, Rape and Abuse Crisis Center of Fargo-Moorehead, P.O. Box 2984, Fargo, ND 58108-2984; Phone: (800) 627-3675; Fax: (888) 237-5332.

Website: www.redflaggreenflag.com

Talking About Touching: Personal Safety for Preschoolers and Kindergartners***

Ruth Harms, Ed.D. (1996)

This curriculum, which is based on social learning theory, consists of 14 lessons that teach children about general safety. It specifically focuses on self-protection skills to reduce children's vulnerability to sexual abuse. The curriculum consists of a teacher's guide and lesson cards with photos to illustrate concepts. Also included are a book and audio cassette titled "Sam's Story," a poster that tells how Sam learned the "touching rule," a video titled "Willy Learns the Touching Rule" and a video for parents titled "What Do I Say Now? How to Help Protect Your Child from Sexual Abuse."

\$250; Committee for Children, 2203 Airport Way South, Suite 500, Seattle, WA 98134-2035; Phone: 800/634-4449; Fax: 206/343-1445.

Website: www.cfchildren.org

Talking About Touching: A Personal Safety Curriculum, Grades 1-3***

Ruth Harris, Ed.D., Diane Davis, M.A., & Andrea Mackey, Ed.M. (1996)

This curriculum, which is based on social-learning theory, consists of 14 lessons for first graders, 14 lessons for second graders, and 12 lessons for third graders. All units discuss personal safety, touching safety, and assertiveness and support. The curriculum consists of a teacher's guide and lesson cards with photos to illustrate concepts. Also included are a book and audio cassette titled "Sam's Story," a poster that tells how Sam learned the "touching rule," a video titled "Willy Learns the Touching Rule," and a video for parents titled "What Do I Say Now? How to Help Protect Your Child from Sexual Abuse."

\$195; Committee for Children, 2203 Airport Way South, Suite 500, Seattle, WA 98134-2035; Phone: 800/634-4449; Fax: 206/343-1445.

Website: www.cfchildren.org

GRADE-LEVEL: 6-12

CIRCLES II: Stop Abuse

Marklyn P. Champagne, R.N., B.S., & Leslie Walker-Hirsch, M.Ed. (1986)

This curriculum is for people with mild to moderate developmental disabilities. It teaches students how to avoid exploitative situations. Part I, titled "Recognizing and Reacting to Sexual Exploitation," encourages student assertiveness and teaches students how to recognize and react to sexual exploitation. Part II, titled "Learning Appropriate Protective Behaviors," discusses the potential for sexual abuse from acquaintances and strangers, and teaches students how to deal with unwanted advances. Three videos, a wall teaching graph, and a teacher's guide are included.

\$399; James Stanfield Publishing Co., P.O. Box 41058, Santa Barbara, CA 93140; Phone: (800) 421-6534; Fax: (805) 897-1118.

Website: www.stanfield.com

Red Flag Green Flag People II: A Sexual Abuse Prevention Program: Materials for Older Elementary Age Children***

Rape and Abuse Crisis Center of Fargo-Moorehead (ND) (1994)

This curriculum is designed to teach children 8 to 11 years of age how to recognize abusive situations involving people whom they know, and to tell a trusted adult who will listen. Instructors can implement the curriculum in two 45- to 60-minute sessions.

\$14.95, facilitator's guide; ISBN 091463321X; \$3.25, workbook; ISBN 0914633201; Red Flag Green Flag Resources, Rape and Abuse Crisis Center of Fargo-Moorehead, P.O. Box 2984, Fargo, ND 58108-2984; Phone: (800) 627-3675; Fax: (888) 237-5332.

Website: www.redflaggreengflag.com

Preventing Sexual Abuse: Activities and Strategies for Those Working with Children and Adolescents Second Edition**

Carol A. Plummer (1997)

This sexual abuse-prevention curriculum is divided into two sections. The first is a three- or five-day presentation for grades K through six, which is also adaptable for the developmentally disabled. The second is a one-, three-, or five-day presentation for grades seven through 12. The curriculum also provides information about involving parents and making

the program work. Also included are guidelines for instructors and an appendix.

\$23.95; ISBN 1556911149; Learning Publications, Inc., P.O. Box 1338, Holmes Beach, FL 34218-1338; Phone (800) 222-1525; Fax: (941) 778-6818.

Website: www.learningpublications.com

GRADE-LEVEL: 9-12

The Woodrow Project: A Sexual Abuse Prevention Curriculum for Persons With Developmental Disabilities***

Rape and Abuse Crisis Center of Fargo-Moorehead (ND) (1986)

This curriculum, which is intended for young adults 15 to 25 years of age with a mild to moderate cognitive impairment, includes eight 25- to 30-minute sessions on sexual abuse-prevention skills.

\$99.95; ISBN 0914633112; Red Flag Green Flag Resources, Rape and Abuse Crisis Center of Fargo-Moorehead, P.O. Box 2984, Fargo, ND 58108-2984; Phone: (800) 627-3675; Fax: (888) 237-5332.

Website: www.redflaggreengflag.com

MATERIALS TO SUPPORT ABUSE PREVENTION

GRADE-LEVEL: K-2

It's My Body

Lory Freeman; Illustrated by Carol Deach (1984)

This book was written to assist adults and preschool children talk about sexual abuse together in a way that emphasizes self-reliance and open communication. Free from specific references or stories about sexual abuse, it introduces two "touching codes," which children can use to protect themselves when they're uncomfortable. Also available in Spanish.

\$5.95; ISBN: 094399033; Parenting Press, Inc. P.O. Box 75267, Seattle, WA 98175-0267; Phone (sales department): (800) 992-6657; Fax: (206) 364-0702

Website: www.parentingpress.com

My Body Is Mine, My Feelings Are Mine: A Storybook About Body Safety for Young Children

Susan Hoke, ACSW (1995)

This storybook introduces the basic concept of body safety to children through the use of dialogue and illustrations. It includes a "Body Rules Safety Quiz" as well as an adult guidebook for parents, caretakers, counselors, relatives, clergy, and educators.

\$18.95; ISBN: 1882732243; Childwork/Childplay, 135 Dupont Street, P.O. Box 760, Plainview, NY 11803-0760; Phone: 800/962-1141; Fax: 800/262-1886.

Website: www.childwork.com

The Right Touch: A Read-Aloud Story to Help Prevent Child Sexual Abuse
Sandy Kleven, LCSW; Illustrated by Jody Bergsma (1997)

This book was developed as a gentle and thoughtful tool for teaching skills to help prevent child sexual abuse. It is informative without being alarming, and has soft reassuring illustrations.

\$15.95; ISBN: 0935699104; The SaferSociety Foundation Inc., P.O. 340, Brandon, Vermont 05733-0340; Phone (802) 247-3132; Fax (802) 247-4233.

Website: www.saferociety.org

Your Body Belongs to You

Cornelia Spelman, Teri Weidner & Cornelia Maude Spelman (2000)

This is a positive, assertive book that conveys the message that it is all right for kids to choose when and by whom they are to be touched. It provides the child with concrete strategies for what to say and do when touched in a way that makes him/her uncomfortable. Watercolor illustrations and basic vocabulary make this an accessible book for children with disabilities as well.

\$5.36; Albert Whitman & Company; 6340 Oakton Street, Morton Grove, Illinois 60053-2723; Phone: (800) 255-7675, (847) 581-0033; Fax: (847) 581-0039

(Available on Amazon.com)

GRADE-LEVEL: 1-4

Let's Prevent Abuse (Puppet Program)

Pacer Center (1984)

In response to growing awareness of the increased vulnerability of children with disabilities to all types of abuse, the Let's Prevent Abuse Program was established to help children and adults with disabilities gain information about physical and sexual abuse and develop personal safety skills. This puppet program features four endearing multi-racial, child-size puppets that portray children with and without disabilities. Used with over 80,000 individuals to date, the puppets have proven to be a comfortable medium through which to teach children about abuse prevention. The Pacer Center offers the puppets, materials and training in delivery of the program.

Pacer Center, 4826 Chicago Ave. South, Minneapolis, MN, 55417; Phone: (612) 827-2966; Fax: (952) 838-0199.

Website: www.pacer.org

GRADE-LEVEL: 3-5

A Very Touching Book...for Little People and for Big People
Jan Hindman & Tom Novak (1983)

This is an entertaining book with terrific illustrations that teach children about various types of touch; "good" touch, bad touch (e.g. being punched) and secret touching (sexual touch). In a very light manner, it helps kids to differentiate between the touches and offers direction as to what to do if faced with bad or secret touching. This is a very good resource for an abuse prevention module and may be useful for older children and adults with developmental disabilities.

\$8.96; Alexandria Associates; P.O. Box 87, Baker City, OR 97814;

Phone: (541) 523-4574; Fax: (541) 523-4578;

Website: [Available on Amazon.com](http://Available.on.Amazon.com).

My Body is Private

Linda Walvoord Girard & Rodney Pale (1992)

Sexual abuse prevention is taught through a gentle conversation between a mother and her daughter. It defines privacy and presents information about sexual abuse in a non-frightening yet serious manner. Abuse prevention strategies are integrated into the story. This is recommended for use with individuals with a developmental age of 6 or 7.

\$5.36; ISBN: 0807553190; Albert Whitman & Company 15 Hubbard Street, Ste 300, Chicago, IL 60610; Phone (312) 329-1960; Fax (312) 329-1963.

Website: www.whitmanco.com

(Also available at Amazon.com)

GRADE-LEVEL: 7-12

The Right to Control What Happens to Your Body:
A Straightforward Guide to Issues of Sexuality and Sexual Abuse
Roehrer Institute (1991)

Written for people with developmental disabilities, this booklet focuses on ways that individuals can protect themselves from sexual abuse and understand their individual rights to sexuality. It provides facts about sexuality, and sexual abuse including its potential effects and treatment. The booklet also includes legal information pertaining to the Canadian criminal justice system and thus, would need adaptation for use in the U.S. *\$7.00; ISBN: 1805070105; Roehrer Institute Kinsmen Building; York University, 4700 Keele Street, Toronto, Ontario M3J 1P3; Phone (416) 661-9611; (800) 856-2207; Fax (416) 661-5701.*

Website: www.roehrer.ca

HIV/AIDS PREVENTION CURRICULA

GRADE-LEVEL 7-12

CIRCLES III: AIDS: Safer Ways

Leslie Walker-Hirsch, M.Ed. & Marklyn Champagne, R.N., B.S. (1988)

This curriculum is for people with mild to moderate developmental disabilities. Part I, titled "Communicable Diseases and Casual Contact," illustrates casual contact and the steps that can be taken to decrease the chances of becoming infected with a communicable disease. Part II "STDs, AIDS and Intimate Contact," explains the difference between casual and intimate contact. It promotes positive decision making and addresses abstinence as the best way to avoid STDs and AIDS. Six videos, supplemental materials, and a teacher's guide are included.

\$399; James Stanfield Publishing Co., P.O. Box 41058, Santa Barbara, CA 93140;

Phone: (800) 421-6534; Fax: (805) 897-1187.

Website: www.stanfield.com

Take Control: How to Stay Healthy and Safe from HIV & AIDS

InfoUse, Berkeley, CA

Designed specifically for the learning needs of people with mental retardation, this is an engaging user-friendly program (CD-Rom) that educates viewers to avoid situations that may place them at risk for HIV infection. Content includes definitions of HIV and AIDS; how HIV and AIDS are contracted and spread; safe (abstinence) and safer (condom use) sex practices; choices about sexual relationships; avoiding compromising situations; inappropriate sexual advances; and how, why and where to get tested for HIV.

\$99.95; Program Development Associates P.O. Box 2038 Syracuse, NY 13220-2038

Phone: (800)543-2119; Fax: (315)452-0710.

Website: www.ndassoc.com



ADDENDUM TO LIFESPAN HOLISTIC SEXUALITY EDUCATION for children & adolescents with Developmental Disabilities

The following resources come directly from attendees of a series of workshops sponsored by the Florida Developmental Disabilities Council who also reviewed the Resource Guide. These titles have been included in this Addendum because parents, caregivers, and educators found them helpful in teaching children and adolescents with developmental disabilities about various aspects of sexuality. The Florida Developmental Disabilities Council wants to express its appreciation to workshop participants for sharing the resources that have helped them in learning about and teaching sexuality.

MATERIALS TO SUPPORT SEXUALITY EDUCATION

Finger Tips: A Guide for Teaching About Female Masturbation *Dave Hinsberger and Sandra Haar*

This book and video set describe privacy, pleasure, and the realities of sharing living space with others. The book discusses masturbation from the points of view of safety, health and pleasure. The video and book show the mechanics of masturbation for females. These are fairly graphic, so you may want to have the female with a developmental disability watch this with someone who can monitor reactions and answer any questions.

\$55.00 (US) Diversity Press, Inc. 13561 Leslie Street, Richmond Hill, Ontario, Canada. Phone (877) 246-5226.

Email: diverscitypress@bellnet.ca

Functional Living Skills and Behavioral Rules (CD)

Robin D. Allen (2003)

This CD-ROM contains over 1000 color pictures of children, adolescents, and adults engaging in a variety of functional activities, providing a wonderful learning tool for persons living with developmental disabilities. Activities include daily routines, personal hygiene, toileting, doing homework, leisure activities, simple meal preparation (healthy eating emphasized), community activities and behavioral rules. These photographs have been found to be immensely helpful in creating picture boards to use as teaching aids. The CD is compatible with Windows 95 and up or MAC OS 7.5 and up.

\$39.95. Available through The Autism Resource Network at www.autismshop.com

Also available through Silver Lining Media at (888) 777-0876.

Website: www.silverliningmm.com

Handmade Love: A Guide for Teaching About Male Masturbation *Dave Hinsberger*

This book and video set describe privacy, pleasure, and the realities of sharing living space with others. The book discusses masturbation from the point of view of safety, health and pleasure. The video and book show the mechanics of masturbation for males. The video is fairly graphic, so you may want to have the male with a developmental disability watch this with someone who can monitor reactions and answer any questions.

\$55.00 (US) Diversity Press, Inc. 13561 Leslie Street, Richmond Hill, Ontario, Canada. Phone (877) 246-5226.

E-mail: diverscitypress@bellnet.ca

It's Perfectly Normal: Changing Bodies, Growing Up, Sex, and Sexual Health

Written by Robie H. Harris and illustrated by Michael Emberley (1996)

This book was widely recommended for teachers and educators! It discusses the physical, emotional, and social changes that occur during puberty. It reinforces good self esteem. **Pictures depict various stages of puberty and growing up. Parents and educators may want to share portions of the book as appropriate for adolescents' maturity levels until adolescents are prepared to read the entire book.**

\$21.99 hardcover. \$19.99 paperback. Candlewick Press, Inc., 2067 Massachusetts Avenue, Cambridge, MA 02140.

Website: www.Amazon.com (for cheaper copies).

Personal Hygiene: What's That Got to Do with Me? *Pat and Noah Crissey (2004)*

This book teaches children about the importance of personal hygiene, both at the social and physical health levels. Personal Hygiene has many pictures to aid in understanding.

\$19.95 Jessica Kingsley Publishers. 116 Pentonville Road, London N1 9JB.

Email: post@jkp.com

The Ethics of Touch: Establishing and Maintaining Appropriate Boundaries in Service to People with Developmental Disabilities (VHS and DVD)

Dave Hinsberger and Mary Harber

This training package is produced for direct care staff and parents/caregivers who often must touch persons with developmental disabilities intimately during bathing, changing, toileting, and other daily functions. The delicate balance between providing these needed services, maintaining appropriate boundaries, and expressing affection to people with developmental disabilities is addressed thoughtfully. Much attention is paid to the rights and needs of people with developmental disabilities to experience affection.

\$110.00 (US) Diversity Press, Inc. 13561 Leslie Street, Richmond Hill, Ontario, Canada. Phone (877) 246-5226.

E-mail: diverscitypress@bellnet.ca

Thinking in Pictures and Other Reports from My Life with Autism *Temple Grandin (1996)*

Many parents and educators working with children and adolescents living with autism struggle with teaching the social aspects of sexuality. Many reviewers of the curriculum have strongly recommended this book for its insight into the world of autism and ways to reach people with autism on a social level. Temple Grandin is living with autism and has done an excellent job in capturing the way people with autism tend to think, feel, and process information. It is recommended that this book be read before beginning to teach about socio-sexuality with people who have autism.

\$13.95 Vintage Press Vintage/Anchor Publicity, 1745 Broadway, 20th Floor, New York, NY 10019.

Under Cover Dick: A Guide for Teaching About Condom Use Through Video and Understanding

Dave Hinsberger

This video and book set discusses STD and other disease prevention and demonstrates how to use a condom from the point of putting it on to the point of safely removing it. This set is fairly graphic, so you may want to have the person with a developmental disability watch this with someone who can monitor reactions and answer any questions.

\$55.00 (US) Diversity Press, Inc. 13561 Leslie Street, Richmond Hill, Ontario, Canada. Phone (877) 246-5226.

E-mail: diverscitypress@bellnet.ca

Understanding the Facts of Life

Susan Meredith (1997)

This book describes exactly what takes place in the body during puberty, how our bodies change, and the role of hormones in these changes. There are sections on bodily changes from the inside of our bodies to the outside, menstruation, sexual activity, contraception, the importance of being healthy, smoking, drinking, taking drugs, good hygiene, sexually transmitted diseases (including HIV/AIDS), pregnancy, and taking care of a baby. This book is fairly advanced and is best for someone with moderate to mild developmental disabilities. Portions are suitable for anyone, however, with guidance and support. Finally, there is an index at the end, so that readers can seek out a particular section to cover with the person with a developmental disability.

\$14.95. *Usborne Publishing Limited, London, England, UK*

Website: www.usbsh.com

MATERIALS TO TEACH ABOUT FEELINGS, EMOTIONS, AND RELATIONSHIP BUILDING

The Other Sister (video)

Starring Juliette Davis and Diane Keaton. Produced by Garry Marshall. (2000)

This is a story of romance, love, and the incredible capacity for many people with developmental disabilities to live independently, have meaningful relationships, and marry. \$14.99 (available on DVD or VHS). *Walt Disney Video or available at Amazon.com*

MATERIALS TO SUPPORT THE TEACHING ABOUT GENDER-SPECIFIC ISSUES

Table Manners and Beyond: The Gynecological Exam for Women with Developmental Disabilities and Other Functional Limitations

Katherine M. Simpson (ed.) (2001)

This manual provides information to parents/caregivers, other care providers, females with developmental disabilities, and gynecologists on preparing the girl/woman for a gynecological examination. Attention is paid to creative ways to reduce anxiety and modify the exam situation to meet the persons' needs (e.g. visually impaired, hearing impaired, and various physical limitations). Obtaining cooperation and informed consent is also addressed in detail. The examination is detailed in easy-to-understand terms with black and white pictures. Options in the case of the uncompleted examination are also discussed. Additional resources are provided on issues such as birth control, menstruation, and menopause.

Free.

Available on the Internet at: www.bhawd.org/sitefiles/Tb/Mrs/contents.html

RESOURCES TO AID IN SELF-EXPLORATION FOR INDIVIDUALS WITH PHYSICAL OR MOBILITY IMPAIRMENTS

Sexuality and Disability: Products for Individuals with Reduced Mobility or Dexterity

Sawhorse Enterprises, Inc. (2006)

This website contains many products to aid persons with developmental disabilities who cannot explore their own bodies due to mobility issues to purchase adaptive equipment to increase independence and mobility. There are also articles on adapting sexual activity to meet the needs of one or both partners with mobility issues. If you do not wish to visit the website (e.g. if you have a "net nanny" or other censor program operating on your computer), you can call to request a catalog.

Prices vary according to item purchased. (866) 697-1128.

Website: www.mvpleasure.com



For additional copies of *Sexuality Across The Lifespan*:



Florida Developmental Disabilities Council, Inc.

124 Marriott Drive, Suite 203, Tallahassee, FL 32301-2981

Phone (850) 488-4180 / Toll Free (800) 580-7801

www.fddc.org