

Rights, Respect, Responsibility

A K-12 SEX EDUCATION CURRICULUM

**Teacher's Guide Supplement for
Students with Disabilities**

Ashira Greenberg, MPH, CHES

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About the Author

Ashira Greenberg (she/her/hers) graduated with her Master of Public Health from Columbia University's Mailman School of Public Health and received her CHES certification. Ashira is passionate about child, youth and family health with an interest in improving healthcare and educational experiences for all young people. Ashira is especially committed to advocacy and health promotion on behalf of youth with physical disabilities, chronic illness and complex health needs. Ashira has been involved in a variety of advocacy-related efforts as part of her local disability community for over 10 years.

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Introduction

In 2016, Advocates for Youth released the Rights, Respect, Responsibility curriculum (3Rs) to fully align with the [National Sex Education Standards](#). This supplement is designed to provide lesson adaptation guidance to teachers to support students with disabilities.

Advocates for Youth has partnered with several school districts and nonprofits to create adapted versions of lessons that are explicitly inclusive of students with disabilities:

- **Portland Public Schools:** These twelve 3Rs lessons were adapted by Portland Public Schools in consultation with the [Centre for Sexuality](#) in Calgary, Canada. They are designed to support the needs of students with intellectual and developmental disabilities (IDD).
- **Colorado Department of Education:** The adapted version of 3Rs lessons for Colorado were specifically reviewed and edited for intentional inclusion of students with disabilities.

People with disabilities make up the world’s largest minority. According to the World Health Organization, around 15 percent of the world’s population lives with disabilitiesⁱ. Of the 62 million children in the United States who are under age 15, nearly 10 percent have a disability. More than 1 in 20 children in this age group have a significant disabilityⁱⁱ. Despite the prevalence of disability, students with disabilities are less likely to receive sex education than students who do not have disabilities. Among students with disabilities who do receive formal sex education at school, many may not receive appropriate accommodationsⁱⁱⁱ. The goal of this supplement is to guide teachers to better meet the needs of students with physical disabilities when using the 3Rs curriculum for sex education, although many of the suggestions included here could be used with any sex education curriculum. While we recognize that disability comes in many forms, this Teacher’s Guide supplement will focus on supporting students with physical disabilities who may face different access barriers than students with other types of disabilities. For resources on a range of other disabilities and sex education, please visit the [National Council on Independent Living’s page on Sex Ed for Individuals with IDD](#).

Background

Context on Disabilities

According to the Centers for Disease Control and Prevention (CDC), “disability is any condition of the body or mind (impairment) that makes it more difficult for the person with the condition to do certain activities (activity limitation) and interact with the world around them (participation restrictions).”

Disability can impact^{iv}:

- Vision
- Hearing
- Movement
- Thinking
- Remembering
- Learning
- Communicating
- Mental health
- Social relationships

Although “people with disabilities” sometimes refers to a single population, “people with disabilities” are a diverse group of people with a wide range of needs. Two people with the same type of disability can be affected in very different ways. Some disabilities may be easy to see, while other disabilities may be invisible. Regardless of visibility, disabilities can be easily managed or complex, and a person’s experience with disability can also change over time for many different reasons.

Ableism is a system of oppression, like racism or sexism. Ableism benefits people who do not have disabilities at the expense of people who have disabilities^v. Unfortunately, despite the prevalence of disability in society, disability tends to leave people vulnerable to violence and marginalization. According to a 2018 publication from the Office of Victims of Crime, people with disabilities are 2-3 times more likely to experience violent victimization, which includes sexual assault and rape^{vi}. While many factors may contribute to vulnerability and marginalization in an individual’s experience with disability, ableism fosters beliefs and structures that harm people with disabilities because systems cannot adequately accommodate different needs.

People with disabilities must also contend with a long history of asexualization that reflects a misplaced belief that people with disabilities are not sexual. This is often expressed as the idea that people with disabilities do not have sexual feelings or interest in romantic relationships. This belief could stem from general ableism as well as the medicalization of disability that sees disability as something to fix rather than simply a part of a person’s lived experience. Ableism can also be reflected in the idea that people with disabilities may be considered child-like, so people with disabilities are excluded from sexual health rights^{vii}. Despite myths that people with disabilities are inherently asexual, disability does not automatically take away from a person’s sexuality, and people with disabilities can identify with any sexual orientation. Data shows that roughly one-third of the LGBTQ+ community identify as having a disability^{viii}.

Sex education is an important part of a young person’s development, however people with disabilities are often not represented or accommodated within school curricula. This exclusion contributes to the increased risks and harmful beliefs that impact the disability community. Sex education that does not reflect the experience of students with disabilities contributes to the assumption that everyone has the same abilities and marginalizes students who identify as part of the disability community. Everyone is likely to become disabled, temporarily or permanently, at some point in life. Youth deserve sex education that embraces all aspects of identity to live lives that are safe, healthy and happy in the fullest sense^{ix}.

A Team Based Approach to Support Self-Advocacy in Sex Ed

Self-advocacy is the skill of recognizing and effectively communicating your needs. It is an important skill in sexuality education that supports social-emotional development and holistic identity. Self-advocacy is important for all young people in learning how to:

- Speak up for themselves
- Make their own decisions about their lives
- Gain access to information so that they can explore their interests
- Find out who will support them
- Know their rights and responsibilities
- Reach out to others when they need help and to assist with problem solving.

Young people need to be given the opportunity to acquire essential life skills and develop positive attitudes and values around bodies, relationships, sex and health. Prioritizing self-advocacy as a component of sex education can offer students the chance to practice some of the communication and relationship skills that allow for the expression and respectful navigation of personal needs or preferences, as well as those of others.

Self-advocacy can be especially important for young people with disabilities who may face unique challenges because of personal support needs (i.e., movement support, learning modifications or assistance, support while eating, etc.) as well as societal attitudes around disability. When possible, create opportunities for students with disabilities to practice self-advocacy in the classroom. Invite students with disabilities to express needs or share experiences related to disability, but never pressure students to share personal information with you or the class. Many sexuality education classes provide ways for students to communicate privately or anonymously to share thoughts with the instructor or fellow peers. If possible, consider ways to address disability-related communication challenges in the sex education classroom such as creating options for students to share their opinions in addition to verbal contributions.

Please be aware that some students with disabilities may have a support person, such as an aide or an interpreter, attend class with them. While the support person helps to facilitate access, the presence of a support person is not an indication that a student cannot engage in self-advocacy.

If self-advocacy is not appropriate for a student because of the student's age, comfort, or another factor, adults who are familiar with the student's individual needs and/or general supports available for students with disabilities may be able to help. If extra support is needed you may wish to consider connecting with a school counselor, access a specialist for the district, or a student's parent/guardian to ensure a successful experience in sex education. **A "Note on Talking to Parents of Students with Disabilities" is included on Page 18.**

If seeking support from adults who are familiar with a student's individual needs, consider ways to continue to include and respect the student in the process. Normalize the need for a supportive team approach and encourage the student to participate, as appropriate, in working with the support team to meet their needs. Like self-advocacy, working with a support team can be an opportunity to build communication and relationship skills. If appropriate, try to brainstorm with the student to identify the people who could be the best supplementary advocates to help ensure a successful experience in sex education. Ensure that privacy will be maintained as much as possible and/or in accordance with class standards. Communication with people who can provide extra support for accessibility should focus on creating an inclusive environment and should not affect confidentiality or sex education content.

Please note that many students with disabilities may have an Individualized Education Plan (IEP) or 504 Plan to outline the accommodations that a student is entitled to receive because of a disability. The IEP and 504 Plan are structured a bit differently and relate to different parts of United States law, but schools are required by law to provide accommodations outlined in both the IEP and 504 Plan. If a student has an IEP or 504 Plan, compliance is critical. For any questions related to a student's IEP or 504 Plan, please consult with the appropriate school staff. For more information about these accommodations and their legal requirements, please visit:

- [The Individuals with Disabilities Act \(IDEA\) government webpage](#)
- [Understood.org: The difference between IEPs and 504 Plans](#)

Establishing Disability Inclusive Classrooms

Creating a physically inclusive facilitation space is an essential way to support students with disabilities, and is required by law. However, establishing a physical learning environment that is easier to access for students with disabilities creates a space in which all students feel welcome and are able to be successful. This section introduces general best practices for establishing a disability-inclusive classroom. For specific adaptation guidance, refer to the **3Rs Disability Inclusion Adaptations Table on page 21**.

When setting up a facilitation space, make sure the following are present in general for all students, and ensure compliance with any student's IEP or 504 accommodations:

- Create easy access to all parts of the room as well as personal belongings and materials.
- Make space for accessible furniture, adaptive devices, aides and service animals to ensure that a person with a disability can engage but also enter/exit the space as needed and as comfortably as possible.
- Avoid asking students to place bags together at the front or back of a room, which can block an entrance/exit as well as make personal belongings less accessible if a student needs access.
- If you know a student will use an assistive technology device that requires an electrical outlet or extra tabletop space, ensure those items can be easily accessible.
- Place participants who are likely to use alternative multisensory materials in areas convenient to the materials and away from unnecessary distractions.
- Consider whether students are sensitive to lights, sounds or smells and make accommodations as needed.
- Plan and prepare for a participant's possible need to get up and move with minimal distraction to others.
- Be mindful of noise levels and the physical position of students in the room during speech-based activities to increase accessibility for students with hearing impairments.
- Plan for how to support students with disabilities who may have special movement, nutrition, hydration or restroom needs and require accommodations, such as taking a break during instruction.

If a student has a support person in class, you may need to make some additional accommodations. One example is determining the best place for the support person to sit and support the student with a disability, which ensures that access can be facilitated properly for all students. For guidance on the specific accommodations that may be relevant to the presence of a support person in your classroom, please consult with the appropriate school staff to determine the best approach to each individual situation.

Universal Design for Learning and Differentiated Instruction

There are two frameworks that can be helpful in guiding lesson and material adaptations: Universal Design for Learning (UDL) and Differentiated Instruction (DI). Universal Design for Learning is a set of principles that is designed to make learning accessible for everyone, regardless of ability, disability, age, gender, or cultural and linguistic background. UDL is an approach to designing goals, methods, materials, and assessments to reach all students, including those with diverse needs. Differentiated Instruction is a teaching strategy that recognizes that not all students learn the same way and allows teachers to actively plan for students' learning differences.

All students (with and without disabilities) have different needs. Universal Design for Learning can help teachers make lessons more accessible to all students while Differentiated Instruction can help teachers focus on how to make lessons more accessible to a particular student by considering that student's specific needs. Frameworks and strategies such as Universal Design for Learning and Differentiated Instruction focus on different approaches to support student's ability to learn effectively (collective vs. individual), but each one has a role in supporting a diverse group of students. As you consider adaptations, communication with students about which options can best support their needs can help make the classroom more inclusive for all students. The following are some tips to help you adapt lesson structures or activities when needed to ensure accessibility:

- **Provide opportunities for youth to demonstrate knowledge and skills.** For every topic you cover, offer a variety of choices for youth to demonstrate knowledge and skills. Allow a variety of response

options whenever possible, such as verbal responses, typed responses (using a cell phone or tablet), visual responses (i.e. raising a finger, a sign or drawing a picture) or charade/role-play responses among other options. Try to allow varied lengths of answers to support students with language or mobility difficulties who may feel more comfortable with short answers that do not require extensive speech or writing/typing. Diverse methods for teaching and allowing youth to demonstrate knowledge and skills can help enhance learning for all students.

- **Make adapted activities available for all students.** Although a specific alternative learning modality may be incorporated for a student with disabilities, the alternative modality may also appeal to youth without disabilities. For example, slowing down the speed of video playback or adding closed captioning to support processing is an adaptation that can benefit all students.
- **Incorporate words, pictures, and colors on handouts or activity materials.** This adaptation supports students with a wide range of visual and language abilities to ensure they have access to the information. Although each student may have different needs, use a font type, font size, colors and graphics on written and visual content to increase clarity and accessibility for all students.
- **Give all instructions and take questions before starting independent or group work.** This adaptation groups the instructions into small parts so that all students are able to process independently and ask clarifying questions. It also limits distractions as well as the need to multitask in a way that could be difficult for some students. For example, students who use sign language may need to look up from a worksheet to watch an interpreter give instructions, therefore, giving instructions before distributing worksheets minimizes the chance that students may miss key instructions.

For more information about UDL and its implementation in the classroom, please visit the [Universal Design Guidelines](#) from the Center for Applied Special Technology (CAST).

Best Practices for Including Students with Disabilities When Teaching 3Rs

To enhance the effectiveness of the legally required accommodations for students with disabilities, teachers should also use best practices for teaching sexual health

education lessons. These practices create safe, affirming and accessible learning environments for all students:

- **Give students a clear idea of the material and activities that you plan to cover before each session, so students can be comfortably prepared.** Just the same way any person might like to know the weather forecast before leaving the house, a student with a disability may want to know what a lesson will involve to be properly prepared for class. Students with disabilities may have multiple adaptive devices for different scenarios. For example, a student may choose to wear or remove an assistive aid if a lesson involves a lot of movement, or a student may use an augmentative and alternative communication (AAC) device that can be programmed with words and/or pictures to help the student engage more fully in a lesson.
- **Follow the principles of trauma-informed sex education.** Clear communication on what to expect in each lesson and following principles of trauma-informed sex education can help support students who have a history of trauma or abuse, which can be common among youth with disabilities. Each day, provide a general overview of what type of content is coming next, and if content is particularly sensitive, such as relationship abuse, offer a content warning at the start of class. If a student has a support person in class, breaks and communication can help facilitate the right environment for the support person to be as effective as possible. Provide students an opportunity to take breaks or leave a lesson as needed, when their trauma response may become activated. Resources to learn more information about trauma informed approaches to sex education include:
 - Substance Abuse and Mental Health Services Administration (SAMHSA)'s Concept of Trauma and Guidance for a Trauma Informed Approach: https://ncsacw.samhsa.gov/userfiles/files/SAMHSA_Trauma.pdf
 - Cardea's Guide to Trauma Informed Services: <https://cardeaservices.org/resource/guide-to-trauma-informed-sex-education/>
 - Advocates for Youth overview of Trauma Informed Approaches to Sex Education: <https://www.advocatesforyouth.org/virtualpd/trauma-informed-sex-ed-ms-and-hs/>

- **Establish “access for everyone” as part of the classroom’s ground rules.** When establishing ground rules at the start of 3Rs facilitation, name “access for everyone” as a group rule for your classroom. This will set the expectation for students that you are committed to providing an equally accessible experience for everyone and that you expect classmates to support their peers when modifications need to be made. Invite students to share with you the ways they could make worksheets or other lesson materials more accessible for them to best process the information and feel successful. Consider asking questions like, “How might we support students with vision and auditory needs in our classroom?”

Disability Inclusive Content

Representation matters. People with disabilities can feel a sense of affirmation and belonging from seeing themselves in sex education content. Affirming visuals and scenarios normalize the experiences of people with disabilities in sex education. The best practices below provide suggestions for incorporating the experiences of people with disabilities into sex education content.

- **Emphasize inclusive messages about the diversity of ways people experience sexuality.** This includes giving messages such as “sex can mean different things to different people,” “there are lots of different ways to have sex”, and “attraction is very individual to each person, there are many ways people feel attracted to others.” The focus on sex can be changed to “relationships/friendships” to better match the needs of younger students. In addition, expand messages about safety and respect to include the needs of students with disabilities. For example, when talking about people’s personal boundaries, include personal disability-related supports such as a wheelchair, special technology, or service animals.
- **Modify materials and prompts to incorporate characters with a variety of disabilities in different scenarios.** Many prompts, images, and examples can be adjusted or added to the lessons to help teachers incorporate disability throughout lessons.
- **In role-plays, consider ways to incorporate disability-related concerns (i.e. pain, scars, fatigue, sensory sensitivity or insensitivity).** Role-plays can also be used to help students with disabilities

develop strategies to self-advocate when reaching out to a clinic.

- **Provide guidance on self-advocacy when seeking healthcare.** The 3Rs curriculum builds skills in accessing information and services, especially youth-friendly sexual healthcare. However, people with disabilities may struggle to find accessible sexual health services. To adapt lessons for students with disabilities, offer strategies to support their ability to self-advocate when reaching out to a clinic. This could include a list of questions to ask when making an appointment and suggestions for how to communicate their sexual healthcare needs regarding their disability. Just like someone who speaks multiple languages may wish to ask if services can be provided in a specific language, someone with a disability may wish to ask if a site has elevator access or if staff can assist with positioning during an exam. A list of questions that might be helpful when calling a sexual health care provider may include:

- How will I be able to access the building given the personal mobility devices I use?
- In what ways will the provider communicate with me that supports my ability to understand using my assistive device?
- Will my support person be welcome during the appointment?

You can find more information to support people with disabilities seeking healthcare in the Resources section, on Page 15.

Modality-Specific Considerations for 3Rs Sexuality Education Lessons

Many adaptations to support people living with disabilities vary based on learning modality, for example, whether a teacher is using videos, discussions, or worksheets to introduce or practice content. By knowing how to adapt a particular learning modality in the classroom, teachers can replicate their modifications again and again so that all students have an equitable opportunity to learn. This section introduces potential adaptation considerations for common learning modalities in the classroom.

For specific adaptation guidance, refer to the 3Rs Disability Inclusion Adaptations Table on page 21.

Make the Use of Videos Accessible for All Students

Videos can be helpful learning tools in many educational lessons, but be mindful of students who have visual or hearing impairments. Do your best to provide image descriptions and have captions available. Captions are almost always available via video platforms such as YouTube, they just may need to be checked for accuracy. In addition, consider reducing the playback speed to .75, which allows additional time for students to process the video content.

Find ways to highlight the following AMAZE.org videos that normalize and specifically highlight people with disabilities, perhaps during a lesson on puberty, relationships, or creating safe and welcoming spaces for all people at school: [Disability and Sexuality](#) and [Teasing: Not Just Harmless Fun](#)

Using popular culture visuals and examples that reflect the experiences of people with disabilities is another way you can enhance disability inclusion in 3Rs facilitation. Keep in mind that a video does not need to be tagged for disability to show disability as a normal part of human diversity.

Make Reading Activities More Accessible for All Students

Reading can pose a variety of challenges for many youth, especially those with a learning disability such as dyslexia, as well as students with visual, speech or

hearing disabilities. Never assign a youth to read aloud; always ask for volunteers to ensure that no one is caught off guard and embarrassed. Consider enlarging font size and/or list content items on separate index cards to enable all youth to participate in reading aloud. Colored markers, index cards or paper can be useful tools to emphasize particular concepts, keep participants engaged, and provide a visual way for participants to demonstrate knowledge. In addition to colors, you may wish to apply shapes and/or textures to concepts to help students differentiate between healthy versus unhealthy or different risk levels.

Adapt Movement-Based Activities to Include All Students

Movement-based activities can be a challenge for students with mobility disabilities. To make movement activities accessible for all students, create a class set of signs for each student to hold up to indicate their responses, for example, agree vs. disagree, yes vs. no or true vs. false etc., so that students can indicate choices without the need to move to different positions in the room to participate in an activity. If technology is available, you can also consider the use of an online platform (such as Poll Everywhere) that students can use in real-time to complete the activity.

Adapt Games and Activities to Include All Students

Games or media development activities can be a great way to engage student interest and/or provide choices to students for how they prefer to demonstrate what they have learned. Provide instructions for each activity, or choice, as clearly as possible through multiple methods (i.e., both verbal and text formats, and consider using images when possible). Use font type, font size, colors and graphics on all written or visual content to maximize clarity and accessibility for all students. Game pieces or other hands-on elements should be selected with consideration for aspects of weight, shape, size and texture that can impact accessibility. Lights and sounds that are part of a game (i.e., buzzers or lights flashing on and off) may be a challenge for students with disabilities,

so consider adjusting the volume and/or background special effects. If the classroom becomes very loud during a game, accommodate students who may need support, by allowing them to take breaks when needed, or set a maximum volume for the classroom and actively monitor the sound level. When assigning students to work in small groups, incorporate different roles that utilize different skills (i.e. one person is a speaker, one person is a scribe) to allow students with disabilities to adopt the role that best suits their personal strengths. Avoid games that involve strict time limits and may be less accessible to students with disabilities who can require extra time to process or express responses.

Use Technology in Ways that Include People with Disabilities

Technology plays a considerable role in many young people's lives and classroom experiences. While technology can aid in reducing access barriers, it can also introduce new barriers. When technology is used in class it is important that it is also used in ways that are inclusive of those with disabilities. With regard to the practical aspects of technology, please see the concerns related to sounds, visuals and timing in the segment above: "Adapt Games and Activities to Include All Students." Technology may also require the use of multiple screens which can be a challenge for students with disabilities. Compatibility with **accessibility-related software** (speech-to-text, text-to-speech, screen readers, etc.) may be worth consideration before use. Specifically, use a word processor to check documents and PowerPoints for accessibility to ensure they are compatible with adaptive technology.

Modify the Condom Demonstrations for Students with Disabilities

When using a visual aid, consider ways to incorporate tactile elements to support students with visual disabilities. Take, for example, the use of condoms, many of which are made from latex. Latex allergy can be serious, so be careful to have non-latex supplies available and clearly separated from any latex materials. If possible, you may wish to allow students to work on their demonstration in pairs or triads, so that a student with a disability has someone to ask for support if needed but does not feel uncomfortable in front of a larger group of peers. It may help to offer extra practice condoms and extra time to students with a disability who may take longer to apply the condom correctly.

Questions from Students about Disability and Sexuality

Students with and without disabilities may have comments or questions related to disability. The Teacher’s Guide for the 3Rs curriculum has a section on “Answering Students’ Questions” that is a helpful general resource for responding to [difficult questions](#).

Often, people with disabilities don’t have many resources focused on their particular needs, and therefore students with disabilities may have many questions. While you may not have an answer for every question (which is okay whether the question is related to disability or not!), you should respond in a way that is affirmative, supportive, and normalizes disability. For example, a student with a disability who asks, “is everyone able to have sex?” may be looking for validation/affirmation regarding any of the following:

- Can I find someone who will like me and/or want to be my boyfriend/girlfriend?
- Is sex safe for me?
- How do I navigate my equipment, devices, medication to have sex?
- Can I satisfy a partner?

While younger students are less likely to ask questions about navigating sex or sexual/romantic relationships, younger students with disabilities may still have questions about how a disability may impact body boundaries, friendships or gender roles. They may ask questions such as:

- Is it okay for my (OT, PT, aide, etc.) to touch me?
- Can I show my friends my scar(s)?
- Do I have to explain how I got my scar(s) if I do not want to share?
- Do all parents carry their babies? (ambiguous meaning to “carry” → “carry” can mean “hold baby” or “be pregnant”)?

Parents and healthcare providers can be very helpful resources for young people, but a referral to a parent or medical provider can be highly stressful for youth with disabilities. Many people with disabilities are uniquely dependent on parents and may be looking for another

support outlet as the desire for independence grows in puberty. Additionally, parents and/or caregivers may not be supportive of a young person’s sexual development, which can make raising certain topics with parents and/or providers feel unsafe for youth with disabilities.

Try to help young people with disabilities develop strategies to navigate potentially difficult conversations with parents/caregivers, and find other safe resources, if needed. Consider ways to incorporate disability-related concerns (i.e. pain, scars, sensory sensitivity or insensitivity) in role play prompts. Use prompts to ask students to practice talking about disability-related and access-related concerns. If relevant, offer possible questions to ask and ways to self-advocate when reaching out to a clinic (for example, asking about the accessibility of the building or specific treatment areas, and find out what kind of support can be provided to people with different disability-related needs).

Note on Talking to Parents and Caregivers of Students with Disabilities

Adapted from Advocates for Youth “[Sexual Health Education for Young People with Disabilities: Parents/Guardians](#)”

Many parents may be uncomfortable talking about sexuality and relationships with their children, but parents of children with disabilities may experience additional layers of hesitation or discomfort. Some of the common concerns from parents or caregivers of students with disabilities include:

- Parents or caregivers may have the idea that sexuality and relationships are less relevant to young people with disabilities because of limitations or other priorities. As society tends to see people with disabilities as asexual, or not having the same rights or potential in relationships, a common stereotype is that sexuality education is less relevant for people with disabilities.
- Parents or caregivers may be in denial that their children are sexual beings who need sex education and may worry that education on body boundaries, autonomy and consent can create conflict or confusion if the young person requires assistance from a caregiver or other support person.
- Parents or caregivers may feel that sexuality education is not necessary because of the presence of caregivers or other support people who will protect and advocate for the young person.
- Parents of students with disabilities may be concerned that disability-related needs will not or cannot be supported in the classroom.

To address some of these concerns, make every effort to ensure that students with disabilities are present during sex education lessons, rather than pulled to receive alternative support such as therapy or tutoring. This provides students with disabilities the opportunity to learn and practice skills that will support healthy personal development. When communicating with parents, reassure them that you are prepared to do what you can to provide a safe and inclusive environment that supports all students’ experiences regardless of ability or disability. Be specific about the ways you are adapting lessons so that every child can access the content. The following talking points may be helpful to use to address family concerns:

- **Students with disabilities are sexual human beings.** Regardless of whether or not someone has a disability, humans are social and sexual beings. All people need affection, love, intimacy, acceptance and companionship. Appropriate sexual health education is necessary for all young people to learn about themselves, relationships, safety, and responsibility to engage safely in the world.
- **Learning about sexuality and health is a necessity for all students.** Many times needs are placed into two categories: fundamental (eating, sleeping and bathing) and secondary (sexual needs and desires, communication with others). While disability may place greater demands on fundamental needs, most people experience multiple needs at the same time and must learn how to balance all aspects of their lives, including those fundamental and secondary needs.
- **Students with disabilities have the right to make decisions about their body and their relationships.** While students with disabilities must often interact with caregivers, medical professionals and other adults, disability does not inherently negate a person’s right to make decisions about their body and their relationships. Comprehensive sex education is critical to empower young people to make choices about their bodies. According to the Rape, Abuse and Incest National Network (RAINN), best practices for prevention indicate that using anatomically correct terms for body parts, teaching young people about boundaries and creating a safe space for people to talk about concerns with trusted adults can help protect children from harm^x.
- **Students with disabilities have the right to make decisions about reproduction and reproductive health.** People with a uterus who also have a disability have the same rights to decide to have a child as a person who does not have a disability. People with a penis, with or without disabilities, have the right to make the decision to be a parent.

People with disabilities can be good parents and have the ability to be successful in raising a child. Both able and disabled people can have an equal chance of having a non-disabled or disabled child.

- **Comprehensive sex education is important for all students.** Sex education is about holistic wellness - not just sexual activity. Health and relationships encompass many aspects of humanity. Comprehensive sex education is important regardless of ability.
- **Gaps in sexual health knowledge can put people with disabilities at an increased risk for infection, violence or pregnancy.** Gaps in sexual health knowledge can put anyone at increased risk, but infection, abuse or pregnancy may be more difficult to detect in someone with a disability who may experience a less common clinical presentation and/or greater barriers to care. Healthcare concerns may not always be linked to sexual activity or relationships (i.e. cancer), but the knowledge and skills to talk about the body and wellness can help keep people as safe and healthy as possible.

3Rs Curriculum Disability Inclusion Adaptations Table

Learning Modality Adaptations: The adaptations below modify the learning modality, or type of activity, originally presented in the 3Rs lesson to better include students with disabilities.

3Rs Lesson	Adaptation	Example/Recommendation
Seeking Help Grade 2, Step 6	Provide a variety of ways students can choose to participate in an activity or demonstrate knowledge.	Example from 3Rs: In Step 6, students are asked to “fill in each circle either by writing the name of a trusted adult they could tell or by drawing their face.”, which provides a choice for each learner to demonstrate how they will participate in the activity.
Being the Change you Want to See in the World Grade 7, Step 1	Adapt a movement-based “Yes/No” activity to an anonymous, digital voting activity to better include students with mobility limitations.	Suggested 3Rs Adaptation: The “Where Do You Stand” activity in Step 1 asks students to respond ‘yes or no’ by moving to a spot in the room. Alternatively, students can respond via an online survey through Mentimeter . While the online option may be used as an alternative modality to support a particular student, students without disabilities may prefer the anonymity of the online survey option.
We All Have Rights Grade 10, Worksheet	Adapt text-heavy worksheets or scenarios to make comprehension easier.	Suggested 3Rs Adaptation: Adapt the worksheet included in this lesson called “Do the Right Thing”, by writing each paragraph into a separate index card, PPT slide, or by putting students in groups to pause and discuss each paragraph after reading.
Being Smart, Staying Safe Online Grade 7, Step 5	Add colors to differentiate concepts, especially when categorizing information.	Example from 3Rs: The “Internet Traffic Safety Light” activity asks students to fill in behaviors that could be considered dangerous (red), cautious (yellow) or safe (green).
Teasing, Harassment, and Bullying Grade 3, Step 4	Remove the standing element of this lesson.	Suggested 3Rs Adaptation: Step 4 includes an activity in which each student stands in a line and gets a turn to respond when they’re at the front of the line. Instead, use an online technology such as Wheel of Names to randomly select students to increase student engagement without needing to stand in line.
Liking and Loving: Now and When I’m Older Grade 6, Step 2	Adapt games and activities so that students with physical disabilities are able to participate equitably. Offer several options since each physical limitation and subsequent adaptation is different.	Suggested 3Rs Adaptation: If a student in your class is physically challenged, adjust the timing to ensure that the student with a disability and the student on the other team begin at the same time. If the student prefers, have them tell another student their idea and that student will go twice. Or, the student can serve as the time keeper or sideline coach.
“Creating Condom Confidence” Grade 9, Step 3	Provide extra materials and time during condom demonstrations	Example from 3Rs: Start the instructions by saying: “I’m going to give every person three condoms. This way you have extras on hand in case you make a mistake while you practice. We’ll start with 10 minutes and I’ll check in then to determine if we need more time.”

3Rs Curriculum Disability Inclusion Adaptations Table

Representation in Content Adaptations: The adaptations below modify the lesson to include representation of people with disabilities or address specific content concerns of people with disabilities.

3Rs Lesson	Adaptation	Example/Recommendation
Different Kinds of Families Grade K	Intentionally include images and examples of people with disabilities in conversations related to families and friendships being different for each person.	Suggested 3Rs Adaptation: Discuss how friendships can look different for different people, including being friends with people who have disabilities.
Friendship Grade 1	Intentionally include images and examples of people with disabilities in conversations related to families and friendships being different for each person.	Suggested 3Rs Adaptation: Include people with disabilities as part of your conversation about the ways in which families are different from each other.
Lessons on bullying and personal safety, i.e.: Bullying is Never Okay Grade 2 Feeling SAFE! Grade 3	Include emphasis on respect for a person’s space and property including personal disability-related supports.	Suggested 3Rs Adaptation: As a part of the discussion, explain: “respect for a person’s disability-related supports means not touching or moving supports without permission, just like we do not touch or move a person’s body without permission. Disability-related supports can include devices to assist with movement, such as wheelchairs, technology devices that help with communication, and service animals etc.
LGBTQ Inclusion focused lessons i.e.: Creating a Safe School: Celebrating All Grade 8	Include people with disabilities as a marginalized group in discussions and examples.	Suggested 3Rs Adaptation: As a part of the discussion, explain: “LGBTQ people have many other identities, for example, they are members of all races and ethnicities, religions, body types, and abilities.”
Understanding Gender Grade 9, Teacher’s Note on page 1	Include people with disabilities in scenarios, and images to use during class activities.	Example from 3Rs: The Teacher’s Note included in this lesson specifically prompts teachers to find images to use in this lesson that represent a diversity of people, including those of different body types and abilities.
Being Smart, Staying Safe Online Grade 7 Using Technology Respectfully and Responsibly Grade 10	Integrate respect for personal boundaries related to sharing about a person’s disability.	Suggested 3Rs Adaptation: Tell the class, “when talking with someone online that you don’t know well, it wouldn’t be appropriate to ask them for pictures of their disability or details of their diagnosis.”

3Rs Curriculum Disability Inclusion Adaptations Table

Representation in Content Adaptations: The adaptations below modify the lesson to include representation of people with disabilities or address specific content concerns of people with disabilities.

3Rs Lesson	Adaptation	Example/Recommendation
Fantasy or Reality? How Sexually Explicit Media Affects How We See Relationships IRL Grade 10	Include people with disabilities in discussions about their representation in sexually explicit media and how it affects them.	Suggested 3Rs Adaptation: In Step 3, add a category to the “Sex in the Media: What Are the Impacts” worksheet for People with Disabilities
Rights, Respect, Responsibility: Don’t Have Sex Without Them Grade 12, Step 3	Prompt students to think about how aspects of different types of disabilities (scars, sensory in/sensitivity, neurodivergence, assistive equipment, i.e., a wheelchair, oxygen or feeding tube etc.) may affect the scenario.	Suggested 3Rs Adaptation: As a part of the discussion, address some of the following concepts: <ul style="list-style-type: none"> • Ways to handle disability disclosures as the person disclosing and as the person hearing the disclosure • Ways to ask and/or respond to questions or concerns related to disability • Communication and consent • Ableism/Internalized Ableism, including stereotypes about people with disabilities
STD Basics: Reducing Your Risks Grade 8, Step 5	Encourage students to think about clinic access and how to overcome barriers that may come up in trying to connect with a healthcare provider.	Suggested 3Rs Adaptation: Tell the class, “when you’re preparing to make a clinic appointment, jot down a list of questions you should ask. Some of them could be about how accessible the space is, or how the healthcare provider might respond if you have some additional questions.”
Great Expectations: Signs and Symptoms of Pregnancy Grade 7, Step 3	During discussions of pregnancy, acknowledge that some people are born with disabilities and clarify that it’s not the fault of the parent.	Suggested 3Rs Adaptation: Tell the class, “sometimes a fetus is born early, which is usually defined as before 36 weeks of pregnancy. Sometimes, being born early leads to disabilities because of a reduced amount of time to grow and develop in the uterus. Being born early is not the fault of the person who is pregnant, and represents the ways in which we’re all diverse, including having disabilities.”
Blue is for Boys, Pink is For Girls..Or Are They? Grade 7, Note to Teacher, Step 4	Specifically ask students to share their experiences as a person living with a disability, if they are open and willing.	Example from 3Rs: Note to the Teacher: If you have a student in class who is open about their disability, this could be a wonderful opportunity for that student to share first-hand experience of how they have been included (or not) in various activities. If you ask this student to speak to their experience, be sure to talk with them ahead of class, don’t put them on the spot without asking for their permission first.

Resources

It's important to review each resource in advance, and if you have concerns about its appropriateness for your school or community, make sure to get permission from a supervisor before sharing with students. Some of the resources recognize that people living with disabilities have romantic and sexual feelings, and have built lasting relationships with partners.

TED-style Talk

- Sexuality and Disability: Forging Identity in a World that Leaves You Out | Gaelynn Lea | TEDxYale: <https://www.youtube.com/watch?v=akGYugciSVw>

Web Resource

- List of Accommodations that May Be Useful in Accessing Medical Services (organized by disability type): <https://www.upmc.com/patients-visitors/patient-info/disabilities-resource-center/frequently-asked-questions>

A Selection of Disabled YouTubers

- A series of videos featuring an Interabled couple:
 - Cole and Charisma: <https://www.youtube.com/channel/UCA5Zfb-00m7eDHHa8iu9izQ>
- A YouTube personality that is a new parent living with multiple chronic conditions:
 - Jessica Kellgren-Fozard: <https://www.youtube.com/user/MissJessicaKH>
- A conversation between two people who identify as queer and deaf, Nyle DiMarco & Chella Man: <https://www.youtube.com/watch?v=Zm2ya9GdWN4>

Other Disability-Friendly Sex Education Curricula

- [Health Connected](#)
- [Our Whole Lives](#)
- [Sexuality for All Abilities](#)
- [Teaching Sexual Health](#)
- [ElevatUS Training](#)

Endnotes

- i Disability and health. (2020, December 1). <https://www.who.int/news-room/fact-sheets/detail/disability-and-health>
- ii Disabilities | Youth.gov. (n.d.). Retrieved October 5, 2021, from <https://youth.gov/youth-topics/disabilities>
- iii SIECUS, & Graham Holmes, L. (n.d.). Youth with Disabilities: Call to Action
- iv CDC. (2020, September 15). Disability and health overview | CDC. Centers for Disease Control and Prevention. <https://www.cdc.gov/ncbddd/disabilityandhealth/disability.html>
- v Challenging ableist language. (n.d.). GLSEN. Retrieved October 5, 2021, from <https://www.glsen.org/activity/challenging-ableist-language>
- vi Crimes against people with disabilities. (2018). NCVRW resource guide. Retrieved from https://ovc.ncjrs.gov/ncvrw2018/info_flyers/fact_sheets/2018NCVRW_VictimsWithDisabilities_508_QC.pdf
- vii Shah, S. (2017). "Disabled people are sexual citizens too": Supporting sexual identity, well-being, and safety for disabled young people. *Frontiers in Education*, 2, 46. <https://doi.org/10.3389/educ.2017.00046>
- viii Pauli, P. (2020, June 21). Lgbtq+ Pride Month 2020: Celebrating the nearly 5 million lgbtq+ people with disabilities. *Respect Ability*. <https://www.respectability.org/2020/06/pridemonth-2020/>
- ix Movement advancement project | lgbt people with disabilities. (n.d.). Retrieved October 5, 2021, from <https://www.lgbtmap.org/lgbt-people-disabilities>
- x How can i protect my child from sexual assault? | rainn. (n.d.). Retrieved October 5, 2021, from <https://www.rainn.org/articles/how-can-i-protect-my-child-sexual-assault>