

Cautionary Vignettes

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EXECUTIVE SUMMARY

Many parents have questions and concerns regarding teaching sexuality education to their children or young adults who have autism spectrum disorders. Dr. Bobby Newman has addressed these concerns with families, teachers, and people with autism spectrum disorders for 30 years. In this chapter, Dr. Newman explores the myths regarding sexuality education for people with autism spectrum disorder, the resulting problematic behavior that is a direct result of these myths and lack of education, and his clinical expertise in addressing sexuality education for people with autism spectrum disorder.

INTRODUCTION

I was asked to provide some anecdotes for this volume, based upon talks I have given in the area of sexuality and developmental disabilities. What follows are some of those anecdotes, with the clinical lesson the experiences highlight for us. Before I begin this effort, however, I wish to emphasize the basic humanity of the individuals with Autism Spectrum Disorder. It is a common mistake, for example, for people to say something to me like “Oh, he has autism. He doesn’t think about that.” In my younger, more impulsive days, before my internal censor had the opportunity to respond, I might reply, “He is 21. He does not think about anything *but* that.” I also don’t want to reduce this discussion simply to a physical level. We are not dealing merely on a level of physical pleasure or release. We are discussing very basic issues of an individual’s sexuality, a very real piece of who they are and how they experience themselves and the world.

METHODOLOGY

I come to this area from what is probably a unique perspective. Early in my clinical career, I worked counseling crime victims in New York City. In this capacity, I worked closely with local precincts both in counseling crime victims, including people who had been sexual assaulted, and also in crime prevention, providing trainings on avoiding common crimes (ranging from con artistry through burglaries through pick-pocketing, etc.). As my career progressed, I maintained my contacts within law enforcement, but began to specialize more in working with people with developmental disabilities. As a result, I became someone police and families would come to when legal matters began to appear for an individual diagnosed with a developmental disability, either as a victim or as someone who had often inadvertently gotten into trouble.

I argue that while we, sadly, often avoid sex education for individuals with developmental disabilities, this is a huge mistake. In fact, I often refer to this as a “set up.” We know the individual is born with the same hormones and desires as everyone else. Yet, we carefully avoid teaching what to do in the sexuality and adult relationship areas. Given the language and social delays that are commonly observed in individuals with developmental disabilities, we then have the nerve to be surprised when inappropriate behavior occurs. That, my friends, is a set up.

I will be addressing several common areas that have been prevalent in my clinical career of about 30 years. Situations requiring my consultation have included:

1. A person with a developmental disability being sexually assaulted
2. A person with a developmental disability was accused of inappropriate sexual behavior
3. A person with a developmental disability was engaging in behavior that was considered sexual and inappropriate in public
4. Incest, including one where a previously undiagnosed older individual (but diagnosed during the investigative process) did not resist the advances of a more impaired younger sibling
5. A person with a developmental disability was in danger of being arrested due to behavior that was considered stalking

This is far from an exhaustive list, and I will not describe all the above in detail, but I will highlight some of the most common areas where I think we often fail to provide what is needed. I will provide examples from the sexuality and relationship realms but will also mix in some other clinical information to highlight that this is all simply symptomatic of a misguided attempt to avoid certain realities that we

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