Chapter 82

Sexuality, Sexual Abuse, Marriage, Partner Violence, and Parenting Skills Among Persons With Intellectual Disability

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ABSTRACT

Sexuality begins from the moment of birth and has an active role in the development, evolution, emotional balance, and affective stability of the individual. It has a significant role in interpersonal and couple's relationships. The sexuality of people with intellectual disability is important from the view of medical, pedagogical, psychological, and ethical aspects. As intellectually disabled person approach puberty their control of behavior and expression of sexuality may manifest in unacceptable ways. They are also at increased risk for physical, sexual, and emotional abuse. The chapter focused on the sexuality, the risk of sexual abuse, marriage, partner violence among people with intellectual disability. The requirement of sex education and components of sex education for various age ranges were also explained and effectiveness of such programs were also discussed. The chapter also discussed the parenting and challenges involved in parenting among intellectually disabled individuals.

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OVERVIEW

Sexuality is one of the most important aspects of human life that relates to sex, one's identification, sexual role, sexual preferences, eroticism, pleasure and intimacy. It fulfils such functions as procreative, hedonistic and relationship-building as well as constitutes an integral part of human's personality. Sexuality begins from the moment of birth and has an active role in the development, evolution, emotional balance and affective stability of the individual. The primary objective of sexuality is pleasure hence human beings tend to focus their minds on obtaining and giving pleasure and relate to one another. This could be found in persons with intellectual disability also. The sexuality of people with intellectual disability is a special case - both from medical, pedagogical, psychological and ethical point of view. Little available research shows that it may become a significant factor that modifies their psychological and sexual functioning (Kijak, 2013; Clarke &O'toole, 2007).

Individuals with disabilities are commonly viewed as asexual due to a predominant heteronormative idea of sex and what is considered natural. A lack of information and education on sexuality and disability was felt to be a major contributing factors towards the stigma attached to disability and sexuality. Stigma can lead individuals to internalise concepts of asexuality and may negatively impact confidence, desire and ability to find a partner while distorting one's overall sexual self-concept. Societal attitudes and perceptions are driven by education and knowledge, if there is no exposure to sexuality and disability, it follows suit that society would have a narrow understanding of these issues (Esmail, Darry, Walter & Knupp, 2010).

People with intellectual disability have the same sexual needs as those without any disability, yet their sexuality is often restricted by reluctant attitudes and/or fears based on irrational beliefs. In a study on sexuality among adults with mild or moderate intellectual disability, Gil-Llario, Morell-Mengual, Ballester-Arnal & Díaz-Rodríguez (2018) reported that 84.2% have had sexual relationships with another person, this percentage being higher in females and in people aged between 38 and 55 years old. A study in England reported that most young people with mild/moderate intellectual disabilities have had sexual intercourse by age 19/20, although young women were less likely to have sex prior to 16 than their peers and both men and women with intellectual disabilities were more likely to have unsafe sex 50% or more of the time than their peers. Women with intellectual disabilities were likely to have been pregnant and more likely to be a mother. (Baines, Emerson, Robertson, & Hatton, 2018).

Examining literature that tells us what people with intellectual disability (PWID) think and feel about their sexual lives may enable families and professionals to offer a more person-centered approach to education and support. In a metasynthesis of people with intellectual disability speaking about sex and relationships, participants across studies desired friendships and close interpersonal relationships, yet were restricted from developing these relationships by policies, program staff, and family members (Black & Kammes, 2019). It is s been reported that mothers of young people with intellectual disability held more cautious attitudes about contraception, readiness to learn about sex, and decisions about intimate relationships. Mothers expressed concerns about their children with intellectual disability and sexual vulnerability and speak about fewer sexual topics with their children and began these discussions when their children were older (Pownall, Jahoda, & Hastings, 2012). Given the complexity of intellectual disability, the development of socially appropriate sexual attitudes and behaviours in intellectually disabled persons is challenging and depends on the participation of parents, teachers and society as a whole. This is important to get adequately integrated into society as it would help them to interact appropriately in social, work and family domains (Rademakers, Mouthaan&deNeef, 2005).

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