

# Navigating Puberty, Sex, & Sexuality



**A Guide for Supporting Autistic Teens and Adults**



# The Importance of Teaching Sexuality

Learning about sex and sexuality is an important part of development. Autistic people go through puberty, desire relationships (both friendships and romantic relationships), and experience sexual feelings. Autistic people, like all people, have inherent sexual rights. These rights and needs must be acknowledged, defended, and respected. Autistic people have the same right to sexual education as their peers. Learning about sex and sexuality allows people to make informed and safe decisions. However, modifications to programming may be needed so the person you are supporting is able to learn the material in a meaningful way.

This resource is designed to provide basic information about how to support autistic people learning about puberty, sex, and sexuality. However, many of the strategies described in this toolkit are appropriate for people with other disabilities across a range of ability levels. Although this resource may not provide instruction on every topic you may encounter, the strategies discussed in this toolkit can be applied and adapted to address other sexual topics.

The following Vanderbilt Kennedy Center resources can be used alongside this booklet. Resources are free, but some require registration.

» ***Navigating Puberty, Sex, & Sexuality Course***

A more detailed review of this material and additional resources can be found in the online course, which can be accessed by registering for a free account at [triad.vkclearning.org](http://triad.vkclearning.org) and accessing the information in the Caregiver folder.

» ***Healthy Bodies Toolkit***

This toolkit provides information and visual strategies for teaching about topics related to puberty. A version is available for boys and girls. Access the information at: [vkc.vumc.org/healthybodies](http://vkc.vumc.org/healthybodies)

» ***Puberty, Sex, and Sexuality Course***

This course was created for autistic teens and adults who can either review the information on their own or can work through the resources with a trusted adult who can provide support if needed. Register for a free account at [triad.vkclearning.org](http://triad.vkclearning.org) and access the information in the Caregiver folder.

» ***Puberty, Sex, and Sexuality Toolkit***

This printable PDF file can be used alongside the course. Access the information at: [triad.vumc.org/puberty-sex](http://triad.vumc.org/puberty-sex)

**Additional resources  
online at:  
[triad.vkclearning.org](http://triad.vkclearning.org)**



# How to Approach Teaching

## When to start the conversation

Sexual health discussions often begin prior to puberty to help children learn and prepare for these biological changes. Lessons should be age-appropriate and may evolve and build over time. It is also important to consider that autistic children may require more time to learn and prepare for the physical, social, and emotional changes that occur during puberty, so it may be necessary to begin these discussions earlier. Being proactive in these discussions can decrease the likelihood of inappropriate sexual expression, increase safety, and allow sexuality to be presented more positively.

## Who has these conversations?

Collaboration between caregivers and other providers increases support and helps ensure consistency in teaching across environments. Providers and caregivers should work together to develop appropriate goals and identify a plan of delivery applicable to the person they are supporting. Depending on your role and the plan, who takes the lead can differ. It is important for caregivers, educators, and other providers to collaborate to determine the plan and who is going to take the lead with teaching. When collaborating, it is important to ensure the supported person's cultural beliefs and values are respected.

## How to have these conversations:



### RESPECT

All people deserve respect. You may not agree with or share the same values as the person you are supporting, but you can respect their decisions or actions based on their attitudes and values. Speak to or direct them in a way that is respectful.



### PRIVACY

It is important to have these conversations privately, so the supported person is not embarrassed. This also models that conversations related to sexuality should take place in private with people the person trusts.

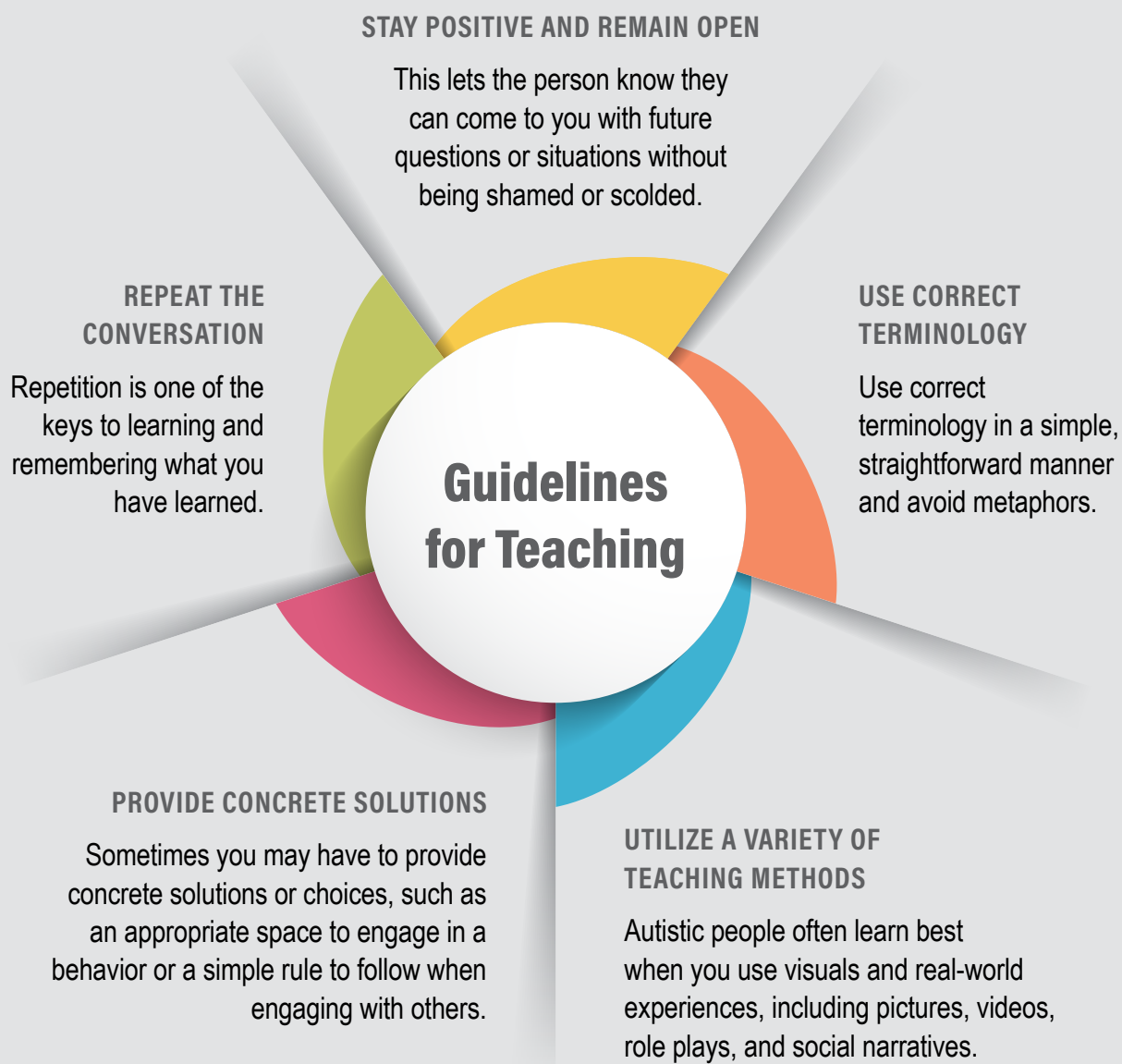


### TONE

No one should be made to feel ashamed of their sexual feelings and behaviors. You may be the first person who has discussed sexual health with them.



Regardless of communication style or level of independence, the person you are supporting can and should be provided an opportunity to learn about sexuality. When teaching about sexuality, it is important to use these guidelines for teaching and tailor the specific use of them to each person's learning abilities.





Considerations when creating and modifying teaching supports:	Tips for Finding Appropriate Visuals:
③ <b>AGE</b> What behaviors are appropriate and expected for this person's age?	③ The visual should be developed for teaching purposes.
③ <b>COMMUNICATION/LEARNING STYLE</b> How does this person learn best?	③ Ensure the visual uses language appropriate to the person's communication/learning style.
③ <b>DAILY LIVING SKILLS</b> How much support does this person need with activities of daily living?	③ Lessons should provide simple, concrete steps.
	③ Try to avoid abstract, ambiguous, or cartoonish illustrations.

## What is Puberty?

Children enter puberty at different ages (usually from ages 9-15), but some may begin earlier. Keep in mind that it is important to begin teaching about bodily changes and puberty prior to the changes occurring.

### Additional Resources

The *Healthy Bodies* toolkit provides visual supports, including simple anatomy pictures, visual schedules for showering and brushing teeth, social stories for good hygiene, and feelings picture cards. *Healthy Bodies for Girls* also has social narratives teaching about periods, changing pads, and explaining a female exam.

The *Puberty, Sex, and Sexuality* toolkit provides terms and definitions related to puberty, including definitions for erection, ejaculation, and menstruation.

### Learning Activity Examples

- » Social narratives and visuals of body changes and hygiene
- » Visual schedules for hygiene tasks
- » Role play changing a pad or buying a bra
- » Role play and social narratives for doctor visits



## Masturbation, Erections, and Private Behaviors

Exploring one's private body parts is a normal part of development. It is important to teach when and where sexual behavior is allowed. Punishing, shaming, or giving the behavior a lot of negative attention may actually make it happen more, can create negative attitudes around a natural behavior, and may decrease the likelihood the person will seek accurate information related to sexual behaviors in the future.

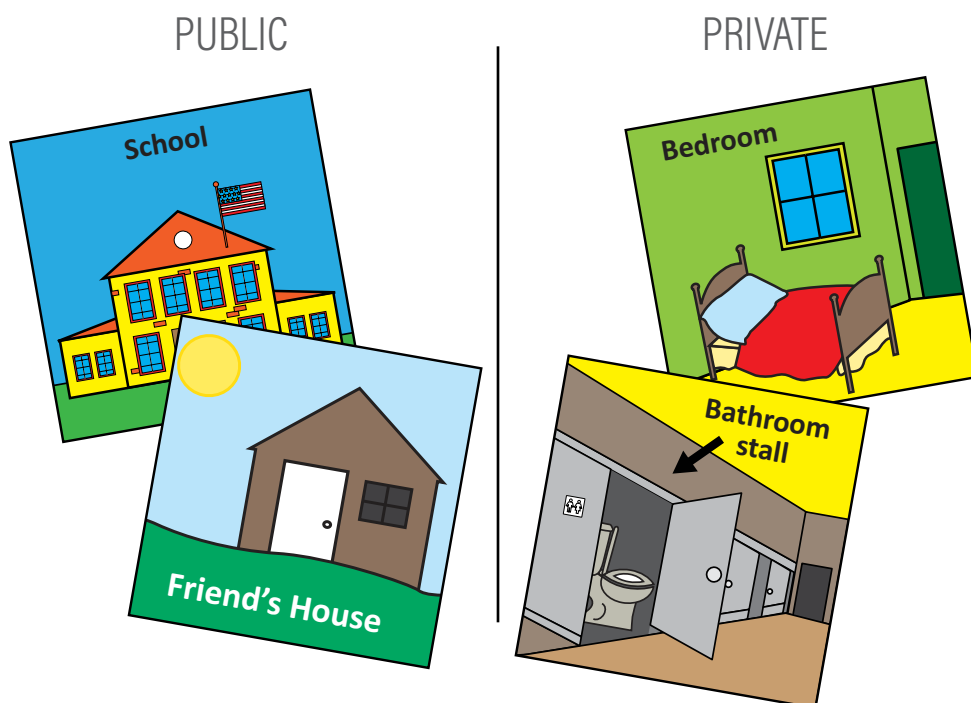
### Additional Resources

The *Healthy Bodies* and *Puberty, Sex, and Sexuality* toolkits provides several teaching tools related to masturbation, erections, and the concept of private vs. public, including social narratives, visuals, and sorting activities.

### Learning Activity Examples

- » Social narratives can be adapted to include information about when and where the person can engage in the behavior
- » Redirect the person to an appropriate behavior when engaging in inappropriate sexual behaviors (e.g., labeling items in the store, finding items of certain color, pushing the cart)
- » Placing visuals on the door of the bedroom provides a cue that this is a safe, private space
- » Identifying the function of the behavior can help with developing targeted interventions (e.g., developing activities to reduce boredom, scheduling private time to reduce frequency)

### EXAMPLE OF HOW A PUBLIC/PRIVATE SORT BOARD CAN BE ADAPTED





# Reproduction and Pregnancy

Teaching about reproduction, pregnancy, and childbirth helps the supported person have a better understanding of this process if they desire to have sex and/or start a family. Regardless of whether or not you feel that the person desires or is able to care for a child, most people are inquisitive about reproduction. If teaching abstinence, the person needs to understand what they are abstaining from.

## Additional Resources

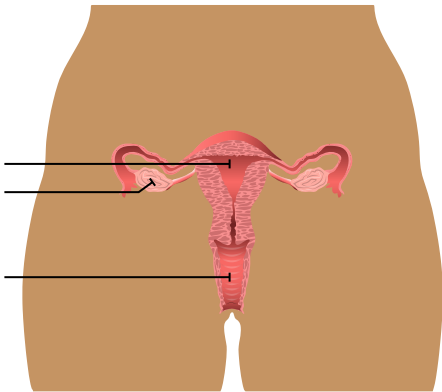
Lesson 3 in the *Puberty, Sex, and Sexuality* course provides a labeled diagram of a man and woman's reproductive organs. Virtual flashcards of reproduction health terms are also available. These terms may need to be simplified.

## Learning Activity Examples

- » Breaking teaching videos into shorter, teachable segments
- » Matching terms with definitions and visual representations
- » Developing sequencing activities cards where the supported person places steps of reproduction (along with appropriate visuals) in the correct order
- » Ask follow-up questions related to reproduction and have the person answer by pointing to simplified picture choices

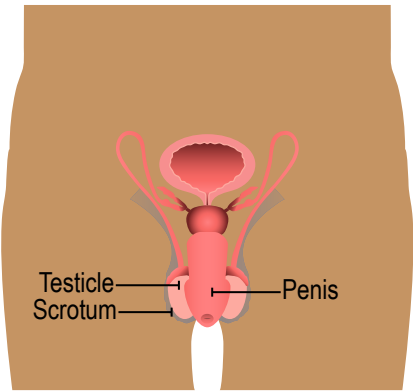
EXAMPLE OF HOW TEACHING THE REPRODUCTIVE SYSTEM CAN BE ADAPTED

FEMALE



Label the following:  
Uterus  
Ovary  
Vagina

MALE



Testicle  
Scrotum  
Penis

IMAGES ISTOCK.COM/PABLOFDEZR



# Relationships

Developing relationships outside of the family can be challenging for autistic people due to difficulties with social skills and limited opportunities for social interactions. Relationships can be challenging for everyone due to the complexity of interpreting social cues. Developing relationships is important for school, dating, jobs, and other community involvement. Improving social skills can help an individual feel more confident in social situations and lead to more positive social interactions.

## Nonverbal Communication

The person you are supporting may benefit from practicing interpreting others' nonverbal social cues. Activities may include: using social scripts, video modeling, and other visual strategies to concretely explain what different nonverbal cues (e.g., eye contact, body language, active listening) might be communicating.

## Initiating and Maintaining Interactions

Learning to compliment others, asking about others' interests, and identifying conversation topics can increase confidence with initiating interactions. Practicing back-and-forth conversation through role plays and using timers and cue cards can help improve sharing the conversation.

### Teaching About Relationships

#### ⑤ PRACTICE AND PREPARE

While some autistic people may not be interested in dating or romantic relationships, many are. However, differences in social skills and poor experiences in the past may make these types of relationships anxiety-provoking. Video modeling and role plays allow the person the opportunity to practice these skills in a safe and predictable environment. This can increase confidence in real-life experiences.

#### ⑤ DISCUSSING HEALTHY RELATIONSHIPS

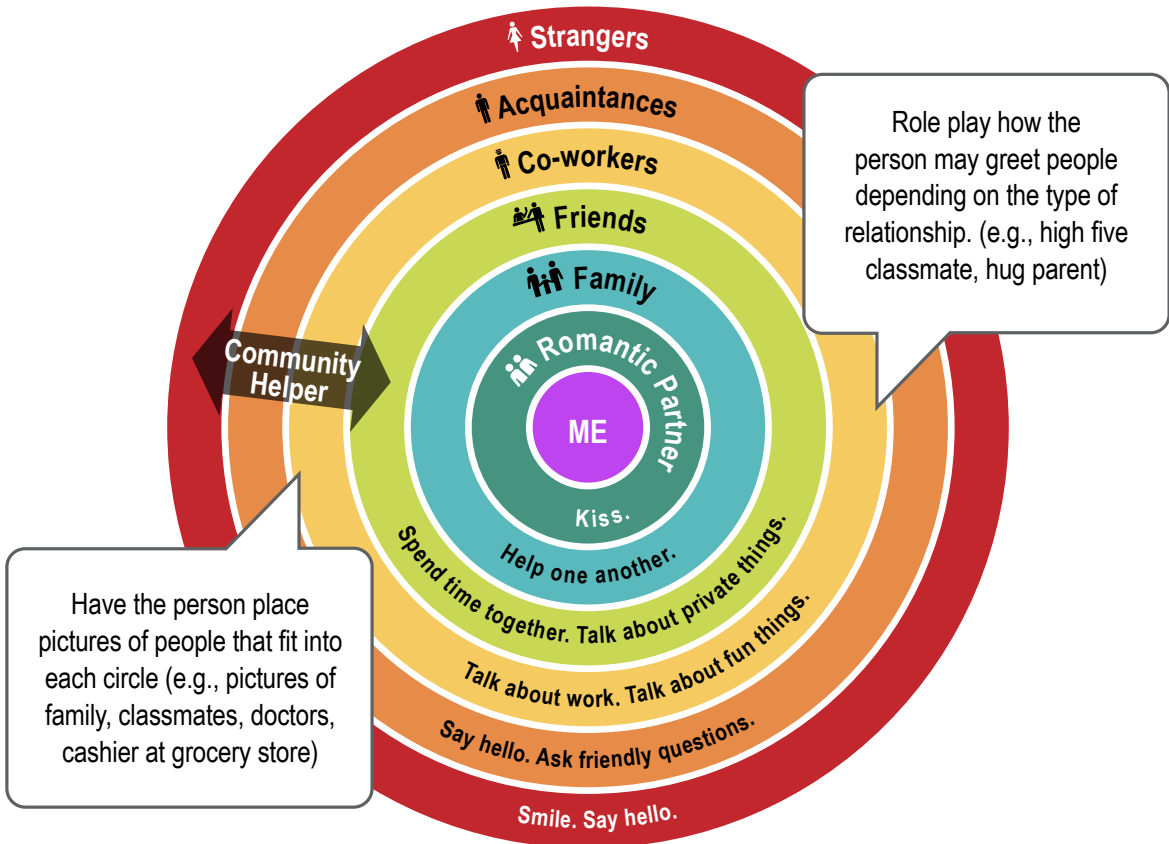
Help the person identify good vs. bad qualities in different types of relationships, through activities such as sorting or by using the relationships circle on the next page. Practice what the supported person should do if they do not feel they are in a healthy relationship. Together, identify someone the person you are supporting can talk to if they are unsure about their relationship or feel unsafe.

#### ⑤ FADING SUPPORTS

It may sometimes be appropriate to chaperone a date. Be sure you are respecting the rights and privacy of the person you are supporting. As the supported person gains skills and becomes more confident, the need for chaperoning (and your need to be there) should fade over time.



## EXAMPLE OF HOW THE “ALL ABOUT RELATIONSHIPS” TEACHING RESOURCES CAN BE ADAPTED



## Social Media and Connecting Virtually

Together, you and the person you are supporting can create safety guidelines for social media use.

### Possible Guidelines to Teach for Staying Safe on Social Media

- » Do not share your address or certain personal information on the internet.
- » If you post pictures, make sure they are pictures that you would be okay with anyone seeing, including children and your family.
- » Remember that even a conversation that seems private via messaging can be copied and shared with others.
- » When going on a date with someone you met on the internet:
  - Be sure someone else knows the details of the date.
  - Meet them at the location instead of riding with them.
  - Meet in a safe, public space you are familiar with.

Guidelines and rules for online dating, internet gaming, or texting can be adapted to the person you are supporting using these rules as an example. Ensure the rules are simple enough for the person to understand. Incorporate the person's learning style into a visual that the person can refer to quickly when making decisions regarding internet and texting decisions.



# Sex, Consent, and Safety

Providing accurate information about sex will help the person you are supporting to be prepared, make informed decisions, know what questions to ask, and stay safe. Presenting the information proactively (e.g., before inappropriate self-expression) within an open, informative, and positive interaction can increase the likelihood the person will seek out support from you in the future. Therefore, it is important to communicate that sexuality is a natural and healthy part of life.

When teaching about sex, consent, and safety it is important to consider several different topics that are listed below:
⌕ Why people have sex
⌕ Questions that help the supported person identify when they are ready for sex
⌕ What are sexual feelings
⌕ Where are the appropriate places to have sex
⌕ What are the different ways to have sex
⌕ What is pornography
⌕ What is consent
⌕ How do you identify consent

## Additional Resources

Lesson 7 in the *Puberty, Sex, and Sexuality* course provides scripts and activities that can be adapted to the person you are supporting. There is also a safety plan at the end of Lesson 10 that can be adapted to help the supported person identify safe people and places the person can go to during emergencies.

## Learning Activity Examples

- » Provide scenarios about consent that allow the person to respond by choosing the correct picture
- » Role play asking and ensuring consent
- » Adapt Public vs. Private sorting activity to identify appropriate places to have sex
- » Have the person sequence pictures that describe getting consent and the act of having sex
- » Role play saying “no” when they do not consent to sexual activity or inappropriate touching

If you suspect the person you are supporting has been sexually abused, listen and offer support. Encourage the person to contact the local agencies and offer your assistance in helping with filing a report. For children and other vulnerable populations, report any concerns for sexual abuse to the appropriate authorities in your state.



## Contraception and STIs

Providing the supported person with information on how to protect themselves from the consequences of sex (e.g., pregnancy, STIs), can help them make safer decisions. Encourage the supported person to talk to a trusted adult or their doctor if they have any questions or concerns related to their sexual health.

### Additional Resources

Lesson 9 in the *Puberty, Sex, and Sexuality* course provides basic information about STIs and contraception that can be adapted to the person you are supporting.

### Learning Activity Examples

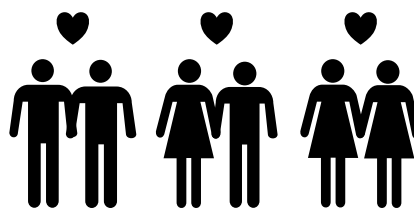
- » Role play (e.g., buying a condom, asking their partner if they have been tested for STIs, talking to doctor about their sexual health)
- » Incorporate visuals (e.g., use medically appropriate models and videos, matching pictures and terms, creating list of “red flags” for STIs)
- » Social scripts (e.g., what is a condom and how does it work, how to buy a condom, how to talk to trust adult or doctor about sexual health concerns)

Individuals abstaining from sexual activity or younger individuals that may not be sexually active still need to be taught the consequences and responsibilities of sex, so they can make informed and safe decisions in the future.

## Sex, Gender, & Sexual Orientation

Being educated on gender and sexual orientation allows the supported person to be more informed, whether they are exploring this information for themselves or they have

observed these differences in their classroom, family, or community. While it is important to respect the beliefs and values of the person you are supporting, it is also important to teach that we should treat one another with dignity and respect regardless of gender, sexual orientation, or sexual expression.



### Additional Resources

Lesson 5 in the *Puberty, Sex, and Sexuality* course provides videos and visuals that define and explain terms such as biological sex, gender, cisgendered, transgendered, heterosexual, bisexual, and asexual. There are other terms and definitions related to sexual identity and sexual orientation that you may need to teach depending on the person you are supporting.

### Learning Activity Examples

- » Be supportive. Listen to what they are saying. Use open-ended questions to ask how you can best support them.
- » Follow their lead. Who, when, and what they tell is up to them.
- » Be affirming. Use their identified pronouns and preferred name.
- » Educate yourself. Find appropriate information that explains the different terminology. Find support groups and ask for help from others when you need more information.



## Final Thoughts

The information and activities in this resource were developed to provide basic information and strategies to assist you with supporting individuals with autism and other developmental disabilities in learning about sex and sexuality.

Providing comprehensive sexual education helps the supported person to safely integrate in the community and appropriately express themselves sexually. While you may not be addressing all of these topics right at the moment, you may want to consider a plan for when, how, and who is teaching these topics.

This publication was authored by Autumn Truss, Psy.D., LEND (Leadership Education in Neurodevelopmental Disabilities) and TRIAD (Treatment and Research Institute for Autism Spectrum Disorders) fellow; Whitney Loring, PsyD, Associate Professor of Pediatrics and Psychiatry & Behavioral Sciences, TRIAD Director of Training; and Laura Corona, Ph.D., Licensed Clinical Psychologist, Assistant Professor of Pediatrics. We would like to acknowledge the contributions of the caregivers, educators, and advocates who also provided feedback.

This toolkit was edited and designed by the Communications staff of the Vanderbilt Kennedy Center for Excellence in Developmental Disabilities. This publication may be distributed in its original form at no cost. View more printable resources and materials online at [vkc.vumc.org](http://vkc.vumc.org).

---

*This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number T73MC30767, Vanderbilt Consortium LEND. This information or content and conclusions are those of the authors and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government. May 2021*