



# Games for Improving Affectivity in Youngsters with Intellectual Disabilities

Work package 2 - Activity 2.4



**European Report** 



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#### 1. Introduction

GIAff4ID- Games for Improving Affectivity in Youngsters with Intellectual Disabilities aims at enlarging sensibility and awareness around sexuality and affectivity in Young People with Intellectual Disabilities (YPWID). It is inspired by the need to shift the discourse from negative to positive freedom, to positive actions that allow the enjoyment of Sexual and Reproductive Health and Rights. In fact, sexuality for YPWID is mostly discussed in terms of protection from abuse and violence, to which they are more vulnerable. It is certainly an important discussion to have, although it is as relevant to ensure that YPWID are equipped with the same sexual education as their peers, because it allows integration in society and independence over this part of their life.

GIAff4ID wants to break stereotypes around sexual education and affectivity of YPWID, demonstrating that disability is a union of a physical or mental impairment and a barrier. The project seeks to develop **game-based activities** while, at the same time, produce materials for youth workers on how to use them and adapt them to the context they work in. Training youth workers will contribute to building networks and increasing sharing of good practices among youth associations active in this field.

The workload is divided in the following 2 main Work Packages:

WP2 - Guidance Toolkit for youth workers and caregivers on teaching Sexual Education to Young Persons with Disabilities;

WP3 - Games' Compendium on Sexual Education for Young Persons with Disabilities and Instructional Materials for youth workers and caregivers

The results produced will be relevant for YPWID's needs and expectations, and will be suitable for different learning abilities. For WP2, the specific objective is to equip youth workers with materials and contents tailored to the necessities that emerged during a first Desk Research around the topics of sexuality and affectivity. While in Wp3 Game Based Learning Activities are going to be created suiting different backgrounds, contexts and abilities.

# 2. Methodology

In the context of Activity A2.2 "Desk research and Interviews with YPWID in relation to Sexual Education and Affectivity themes", Partners conduct desk research in order to investigate different aspects of sex education and to engage in a preliminary inquiry on the issues that has been further examined at a later stage; during interviews. In particular, the



desk research phase focuses on selecting and analyzing the most relevant themes on Sexual Education and affectivity for YPWID and on how to conduct youth work towards YPWID's independence and awareness of their own needs.

In order to explore these different topics and collect information, Partners rely on: online open resources, websites, e-books, national, European, and international projects connected to the issue, and studies and researches on Sexual Education and affectivity for YPWID.

#### The materials collected comes from:

- Existing training programs and courses;
- Projects' results or activities;
- Research papers or essays;
- Websites or online resources;
- Audiovisual contents;
- E-books;
- Any other item considered relevant for WP2's objective.

This preliminary desk research phase is followed by interviews, Partners identify and select (2) youth workers to conduct interviews to 6 YPWID in total. The objective of these interviews is to gather more detailed information on the level of knowledge on the topic of Sexuality and Affectivity by YPWID, including their needs, and expectations. The interview's results serve as support materials to develop other deliverables of the project such as the National and European reports to fine-tune WP2 and the Compendium (WP3).

- Partners selected two youth workers to conduct the interviews. They have demonstrated their interest and motivation to participate in the project and they are familiar with the themes and general objectives of the project. Each partner is responsible for informing the youth workers about the project in general but even more about the main purpose and achievement of these interviews.
- YPWID were interviewed by Partners, target age was between 12 and 23 years old.
- Each partner monitors the results of the interviews and ensures that the <u>Interview</u> template is properly completed.
- The interviews are conducted either face-to-face or online.
- The interviews are composed of 57 questions, divided into two macro-subjects: relations and sexuality. The former in fact, stems from very general questions in which participants are asked to reveal their subjective point of view about friendship, affection and relations in general. The latter instead targets the focus of the project, addressing the topic of sexuality and sex education.



 Interviewers are also asked to reply to some specific questions regarding their knowledge of the context, their preparation about it and, as experts, their main findings in terms of obstacles and difficulties encountered in order to pursue the objectives of the activity.

The background of the interviewee is indicative of what is his/her experience and expertise and what contribution can be relevant for the development of the project's activities. The approach for conducting such interviews was very flexible, allowing the use of different methods in order to accommodate the interlocutor's needs.

To sum up, the present European Report (A2.4) is deemed to gather data from consortium countries in order to analyze the main findings of the desk research and to obtain sensitive information to combine with the relevant data emerged from the Interviews.



# 3. European Context and Legislation

Sexuality education aims at "disseminating general and technical information, facts and issues which create awareness and provide young people with the essential knowledge and training in communication and decision-making skills they need to determine and enjoy sexuality both physically and emotionally, individually as well as in relationships". It provides information to children, teenagers and young adults about sexuality and its possible negative consequences.

As mentioned above, the present research sets the goal of analyzing the European context in terms of Sexual Education and Affectivity for Young People with Intellectual Disabilities. As Giaff4ID Project involves Spain, Italy, Belgium, Bulgaria, Greece and Turkey, the normative context finds its legal basis in the Council of Europe legislation and international law<sup>2</sup>.

Over the past few decades, many Council of Europe's member states have made significant progress towards providing sex education and improving its subject matter so that it encompasses topics besides biology and reproduction and, more importantly, in order to truly empower children with knowledge about their bodies and their rights, as well as to inform them about gender equality, sexual orientation, gender identity, and healthy relationships. **Traditionally, sexuality education had focused on the potential risks of sexuality, such as unintended pregnancy and STIs.** In change, a holistic approach based on an understanding of sexuality helps children and young people to develop essential skills to enable them to self-determine their sexuality and their relationships at the various developmental stages. It supports them in becoming more empowered in order to live out their sexuality and their partnerships in a fulfilling and responsible manner. These skills are also essential for protecting themselves from possible risks.

The introduction of sexuality education in schools in **Western Europe** largely coincided with the development and wide availability of modern, reliable methods of contraception and the legalization of abortion in most countries during the 1970s and 1980s. These innovations opened up new opportunities for separating sexuality from reproduction. This change triggered a "**sexual revolution**" around 1970 and, in combination with other factors, stimulated the process of women's emancipation. Values and norms related to sexuality started to shift and sexual behavior began to change, or at least lost its taboo surrounding

<sup>&#</sup>x27;UNESCO report, "International Guidelines on Sexuality Education: An evidence informed approach to effective sex, relationships and HIV/STI education", June 2009.

<sup>&</sup>lt;sup>2</sup>For the purposes here intended, the research relies on a general legal framework in order to give an immersive overview of the general context in which it's based. The present states are all bound by the application of international law and are part of the Council of Europe. Differently, no mention is made of European Union law as it is not binding on Turkey.



it. Later, the HIV/AIDS epidemic in the 1980s introduced a much more serious risk that led to increased prevention efforts.

In Europe, sexuality education as a school subject officially started in **Sweden**, when the subject was made mandatory in all schools in 1955. In practice, it took many years to integrate the subject into the school curricula, the development of guidelines, manuals and other educational materials, as well as training of teachers. During the 1970s and 1980s, many Western European countries adopted sexuality education, the first were the Scandinavian countries, but also elsewhere (for example, in Germany it was in 1968, and in Austria in 1970). In the Netherlands and Switzerland, it also started in the 1970s although, because of the high degree of independence of schools. On the other hand, in Central and Eastern Europe, the development of sexuality education started after the fall of communism, before that, there had been some initiatives in individual countries. As a result, Central and Eastern European countries started with sexuality education 20 or 30 years later than in Western Europe. Only in some of them, most notably the Czech Republic and Estonia, had been made a serious launch in developing modern styles of sex education.

The Council of Europe Convention on Protection of Children against Sexual Exploitation and Sexual Abuse "the Lanzarote Convention" requires from states to "ensure that children, during primary and secondary education, receive information on the risks of sexual exploitation and sexual abuse, as well as on the means to protect themselves, adapted to their evolving capacity." Also, international human rights bodies have established that children and young people have the right to receive comprehensive, accurate, scientifically sound, and culturally sensitive sexuality education, based on existing international standards. These include the UN Convention on the Rights of the Child, the UN Convention on the Elimination of all Forms of Discrimination against Women, the International Covenant on Economic, Social and Cultural Rights and, at European level, the European Social Charter and the Istanbul Conventions. To this extent, comprehensive sexuality education is part of a good quality education. Thus, it should be provided for by law, be mandatory and mainstreamed across the education system as of the early school years. For all of the above, it is of concern that, according to a 2018 survey, sexuality education was mandatory in only 11 out of the 22 Council of Europe member states reviewed.

<sup>&</sup>lt;sup>3</sup>The "Lanzarote Committee" (i.e. the Committee of the Parties to the Lanzarote Convention) is the body established to monitor whether Parties effectively implement the Lanzarote Convention. The Committee is also charged with identifying good practices, in particular during capacity-building activities (study visits, conferences,

etc.),



Giaff4ID's target group is identified in Youngsters with Intellectual Disabilities; it is therefore predictable that people with disabilities, enjoy the same rights as the rest of the population. They play an active role in our society, and this is especially true for children and young people with either physical or intellectual disabilities.

From a legal perspective, the **UN Convention on the Rights of Persons with Disabilities** issued in 2006, that affirms that disability is "an evolving concept" and that "results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others". The Convention is the first legally binding international UN instrument on disability, which sets out the minimum standards that governments are obliged to meet in order to ensure that persons with disabilities effectively benefit from their civil, political, economic and social rights.

Children and teenagers with disabilities mature into adults in the same manner as everyone else. Part of this process involves sexual development, which is influenced by a variety of factors, including ones related to mental and physical relationships, social interactions, ethics, religion, and culture. Many children and young people with disabilities do not receive sexuality education, even though it can help their sexual development and improve their health and wellbeing. In addition, people with disabilities may differ in terms of challenges, such as learning how to manage with less privacy, for these reasons their requirements could be greater than those of their colleagues without disabilities. Persons with Disabilities (PWD) have been proven to be significantly hampered by incomplete and insufficient sexuality education. Also, they may have an increased risk of acquiring sexually transmitted infections, experiencing unplanned pregnancy, and falling victim to sexualized violence. Risks could be mitigated by empowering children and young people with disabilities and bolstering their ability to seek support.

Research has revealed that children and young people with disabilities receive less sexuality education than their peers without disabilities<sup>4</sup>. Significant obstacles are faced in the World Health Organization's European region. Disability adds a level of complexity to an already delicate topic that is already delicate particularly when it involves children's and young people's sexuality.

The main barriers are related to social misperceptions of people with disabilities, resulting in non-comprehensive and normative sexuality education. Furthermore, diversity among children and young people with disabilities, even within the same specific condition, is large,

<sup>&</sup>lt;sup>4</sup> Kristien Michielsen & Laura Brockschmidt (2021) Barriers to sexuality education for children and young people with disabilities in the WHO European region: a scoping review, Sex Education, 21:6, 674-692.



causing difficulties in providing a general approach. Finally, competing priorities related to the health of children and young people with disabilities may position sexuality education low down on the list of issues to be addressed.

In conclusion, a positive approach to sexuality education for children and young people with disabilities, as recommended by international guidelines (UNESCO, UNAIDS, UNFPA, UNICEF, UN Women, WHO, WHO Regional Office for Europe), can enable them to perceive sexuality as a valuable resource in their lives. For these purposes, involving YPWID in researching the appropriate way to teach sexual education themes is positively evaluated by scholars. The present research aims at providing the correct tools and making it available for youth workers active in the field.

#### 4. Collective transnational results of Desk Research

Desk research provides a comprehensive summary of information at national level. The present section relies on data previously collected, outlining the main findings of the activity. Here below results from Partner Countries provide a different overview of the topics gathered during the Desk Research. Each Partner has presented their results into separated National Reports (see Annexes).

#### - Italy

Sexual education in Italy still faces several challenges and limitations. The topic is considered a taboo and lacks a comprehensive legislative framework. Historically, sexual education has focused primarily on reproductive biology and STI prevention, with limited coverage of broader topics such as relationships, consent, and sexual diversity. The approach varies across regions and schools. Conservative groups and societal factors often hinder progress in implementing comprehensive sexual education, citing concerns about moral values and age appropriateness. Among these, the Catholic Church's influence represents a big obstacle to the un-stigmatization of the spread of sexual education in schools.

Efforts are being made to update school curricula and provide evidence-based information on a broader range of topics, including LGBTQ+ issues and healthy relationships. However, gaps exist in the availability and quality of sex education programs, particularly for young people with intellectual disabilities. Barriers include a lack of inclusive curricula, trained educators, appropriate materials, and societal stigma.



# - Bulgaria

The landscape in Bulgaria lacks a comprehensive national program. Although some activities targeting sexual and reproductive health topics are included in existing strategic documents, they are insufficient and lack synergy between national and local policies. There is no *ad hoc* school subject. Access to systematic interactive health and sexuality education for all Bulgarian students is therefore limited.

Regarding the legal framework for YPWID, sexual education policies and legislation are under the authority of the Ministry of Labour and Social Policy and the Ministry of Education and Science. However, children with disabilities are still excluded and face greater risks and barriers in society. The most relevant themes on sexual education and affectivity for YPWID include biological aspects and body awareness, sexual and reproductive health, family, friendship, love and romantic relationships, prevention of HIV/STIs, pregnancy and birth, contraception, gender roles, mutual consent, etc. Clear rules, specific training and impact guidelines, as well as appropriate practical training for school staff and the family are very important in providing appropriate social and sexual education to a child with multiple disabilities.

# - Turkey

Sex education is not mandatory in schools in Turkey, and the responsibility for providing it lies with autonomous communities. Therefore, there is no national definition or specific curriculum for sexual education. Mainly it focuses on concepts like privacy, personal hygiene, and protection from abuse. In addition to that, the legal framework for young people with intellectual disabilities (YPWID) is insufficient in the country. Sexual education for YPWID is lacking, and the data suggest that young people mostly rely on information obtained from close people or social platforms.

However, there is a growing consensus on the need for sex education in schools. Studies show that many teachers have not received sexual education themselves, and there is a call for a comprehensive approach for both students and teachers. Also, when it comes to sexual education for individuals with intellectual disabilities and protection from abuse there is a fundamental lack in Turkish literature, where books on the subject have been translated since 2008. Thus, existing ones may not be sufficient in terms of comprehensive and gradual explanation of sexual education and protection from abuse.

Turkey has started focusing on guidance and awareness in accordance with international agreements. Several programs and guidebooks have been published by the Ministry of National Education to provide privacy and protection from neglect and abuse training for individuals with intellectual disabilities and their caregivers.



# - Spain

In Spain, sex education is not compulsory in schools, and its provision varies among autonomous communities and educational centers. However, there is a growing awareness on the importance of such topics, with the belief that all students should have knowledge related to it upon leaving school. To address the gap in education, Informe Junior collaborated with Platanomelón, a brand focused on sexual wellbeing, to create the Teaching Unit "Young people and sexuality," which targets secondary and high school students. The unit consists of articles with visual elements to make the information more engaging.

Regarding sexual and reproductive health education, people with disabilities often have limited access to sexual education and resources, making them vulnerable to abuse and discrimination. In Spain, there are few specialized resources for this group, and parents may avoid discussing the topic with their children. Basically, sexual education remains an exception, and they are not often protagonists of change. Though some associations and special education schools address relationships, equal treatment, and intimacy.

# - Belgium

In Belgium, the national definitions for "Sexuality," "Sexual Education," "Sexual Orientation," "Sexual Abuse," and "Safeguarding" are based on international guidance from UNESCO and World Health Organization that has been mentioned elsewhere. However, less than 20% of students have access to the comprehensive EVRAS program "Education in relationships, emotional and sexual life", the generalized educational program for the Wallonia-Brussels Federation since July 2014. The EVRAS is a very useful tool for the teenage population and an indispensable tool for equality. The Walloon Region and the French Community Commission of the Brussels-Capital Region signed a Memorandum of Understanding in June 2013 to apply and define the framework for the adoption of EVRAS in schools. This gives EVRAS a general definition and specifies the settings in which it will be used, i.e., all schools offering primary education, secondary education, special education.

At the same time, sexual education for young people with disabilities is also not fully satisfying, although efforts are made to integrate it into the educational framework. Relevant themes in sexual education and affectivity for YPWID comprise body awareness and physiology, nature of relationships, sexual topics, HIV and STIs, and instructions on what to do in case of abuse or discomfort.



#### - Greece

For what concerns Greece, the Desk Research has shown that sexual education has been introduced to primary schools through workshops for children aging 10 - 12. According to the data, sexual education is not considered sufficiently covered in the country. In this regard, it is noticeable that most knowledge about sex comes from family members and friends. There is no specific legal framework in the country that addresses the sexuality of YPWID.

Like the sufficiency of sexual education in general, the data suggests that the country does not provide a satisfactory level of sex education for YPWID, as their knowledge mainly comes from family members and friends.

The most relevant themes identified in sexual education for YPWID in Greece include understanding definitions and meanings of sex-related terminology, effective communication about sex and relationships, and psychological empowerment. The challenges and issues related, specifically for YPWID include inadequate knowledge on sex among YPWID, a lack of appropriate education on sex issues for professionals supporting YPWID, and the difficulty of educating family members on sex-related topics to provide proper support to YPWID.

# 5. Collective transnational results of Interviews

As previously mentioned, the present European Report stems from the National Reports produced by Partners which focused on the most important topics and results addressed during the interviews phase. Therefore, in this section, data collected is categorized and parted in tables. The latter are divided into two separate parts in order to assure a better understanding of the activity and to preserve the fundamental findings of the research from all sides. The first part regards the **interviewees**, their general information and their replies to the questions, the second part instead, refers to **interviewers** which were questioned upon the implementation of the work.

Before addressing the results collected by the Partners, it is relevant to present an overview of the different modalities according to which such interviews have been conducted. Partners have presented a variety of initiatives adapting to the needs of the participants involved, both psychologists and interviewees. In fact, the Giaff4ID consortium struggled to include people in this activity; the biggest problems were represented by exploring young people's needs and their readiness and understanding required partners to involve young people aged 12 to 35. One reason identified was that at a younger age children cannot talk about or do not clearly understand issues related to sexuality. Another challenge was



addressing the subject of sexual education, which is not often covered by schools' subjects and which youth workers find complex to address. This proves that research and development in this field are needed and innovative.

Therefore, the Consortium decided to involve participants of different ages choosing independently how to conduct the interviews, still adhering to what is promised in the project proposal.

The tables - parted into macro topics - summarize the main findings from the interviews, one by one. Partners were asked to provide a detailed and discursive argumentation. The section "further findings" is a free panel for including information such as: specific quotes reported from the interviews, topics that popped out during the interviews that were not automatically related, main difficulties of that part of the interview.

Here below a description of how the interviews were conducted by the different partners in order to take into account the different backgrounds of people involved when analyzing the main findings of the report.

#### - Italy

CRES organized a series of separate interviews with 6 young people with Intellectual Disabilities. They are between 15 and 23 years old and present different kinds of disabilities. Many of them present Autism Spectrum Disorder. There are 4 people identifying themselves as females and 2 identifying themselves as males. The interviewers that took part in this project are: a senior psychologist, employed at Integrated Disability and Health Program, Azienda Unità Sanitaria Locale - AUSL of Bologna, 23 years of professional experience in the field and a professional trainee, Integrated Disability and Health Program in Bologna, 6 years of experience in the field.

# - Bulgaria

NART selected 2 youth workers according to their motivation and experience working with YPWID, helping children with physical or educational learning difficulties to develop their reading and writing skills. They selected young people aged 15-18 years. Sexual education is a very sensitive topic for parents and a consent form was collected for each child. In total 7 interviews were completed and conducted individually in order to meet the individual needs and emotions that the topic evokes. In order to be able to talk and share the professionals have provided a space to where they feel safe and secure.



# - Turkey

ZİÇEV selected 3 youth workers working with individuals with intellectual disabilities, considering their knowledge and experience. Professionals are 2 psychologists and a child development specialist who work with individuals with mental learning difficulties. They were trained on how to ask/adapt the interview questions to be made with YPWID. Ten people between the ages of 12-18 were selected following some key criteria: having social skills close to age, receptive and expressive language close to age and low level of being affected by intellectual disability. Unfortunately, among YPWID, most of the families of girls did not approve of the interview, and therefore only two of the 10 surveys were conducted with young girls with intellectual disabilities.

## - Spain

The Spanish team invited different associations to participate in a workshop on sexuality, in which they used the questions on the form and answered questions about them.

The workshop was attended by 8 people with intellectual disabilities between 14 and 17 years old and 2 professionals who accompanied them. The professionals were educators, members of the associations invited.

# - Belgium

EASPD has been reaching out to numerous organizations and schools to ask for their support in resolving the part of conducting interviews. They contacted approximately 25 organizations, seeking contact details from within and outside their memberships working with their target group within Belgium.

Some organizations refused to participate as they considered themselves as not specialized/not offering Sexual Education Services; others informed them that they were either were currently overwhelmed with other commitments; and others mentioned the need to submit an ethical application to the Ethics Review Committee, alongside an approval of a Belgian ethics review committee with full accreditation, according to an EU Directive (2001/20/EC) which has been transposed into Belgium law (7/5/2004).

After expressing concerns to the consortium in regard to the lack of collaborations for the interviews EASPD suggested an alternative to compensate for this task. This resulted in the creation of a <u>questionnaire</u> - available in both English and French Language - to collect experiences and perspectives of youth workers who work with Young People with Intellectual Disability in Sexual and Affectivity Education composed of a set of 10 questions.



Using EASPD's European Network, out of the total 5 responses, they received 2 responses from Belgian organisations. Participant 1, is a co-managing director at U-Thrive Europe asbl, with two years of experience in informal education, youth work, and project management. She primarily works with individuals aged 20-50 with mild intellectual disabilities. On the other hand, Participant 2, Veronica Ascolese, works at a center called Creb, focusing on entertaining children with team activities, stimulating their senses, and providing physiotherapy. She has ten years of experience working with individuals with intellectual disabilities.

#### - Greece

EILD conducted 2 face-to-face interviews. They were performed by 2 professionals working for Merimna Paidiou Katerinis, an NGO providing support to adults with mental disabilities. One social worker and one psychologist. Interviewees were two male adults.

#### a. Key findings regarding the different kind of relations

This section concerns questions 1 to 17 of the <u>interview template</u> (see Annex\_Interview template). It includes very generic questions related to all kinds of relationships.

Topic	Bulgaria	Italy	Spain	Turkey	Greece
Relationship	- general understanding of relationships, - clear differentiation between what friendship is and what love relationships are.	understanding of relationships, with different approaches.	-general understanding, some difficulties in differentiating between love relationships and friendships.	-clear understanding of relationships, distinguishing between friendships and romantic relationships.	- good understanding only of some specific kind of relationships
Friendship	- "being with someone who has the same interests and gives you support and	- Some state to have a lot of friends and make new ones,	- general knowledge - some struggle to differentiate between	- no difficulties in making friends with their peers,	- Interviewees generally have a good understanding of friendships, defining them accurately.

	understanding. Being with you in difficult situations." - do not share difficulties in making friends	<ul><li>others are socially excluded and show many difficulties.</li></ul>	different types of relationships, such as friends, colleagues, or flat mates.	- admit the importance of friendship.	
	with other peers.				
Sentimental	- general	Difficulties in	- No problem in	- general	- They show some
/Romantic	understanding	explaining the	describing	understanding	understanding of
relationship	and experience	concept.	romantic	of romantic	sentimental/romantic
	about romantic		relationships	relationships,	relationships,
	relationships.		- some struggle to grasp the	- no problems or shame in	associating them with needs, respect, and
			difference at	describing	love.
			the beginning	their	
			of a	experiences.	
			relationship.		
Obstacles	- Interviewers	- some	- express	- identify lying,	- They recognize
related to	identified lying,	interviewees	concern	rejection, and	problems in
relationship	rejection,	responded in a	regarding	alienation as	relationships,
	alienation as	very childish	intimacy,	the main	particularly related to
	obstacles related to	manner	difficulties to understand	problems,	disrespect and
	related to relationships.	demonstrating that they don't	how to have	- topics not commonly	arguments.
	relationships.	really know	privacy and	discussed at	
	-No discussion at	how to handle	navigate	school and	
	school and in	difficult or	certain aspects	rarely	
	rare cases rather	sensitive	of	addressed with	
	with a parent.	situations.	relationships.	parents.	
Further	- friendship is a				
findings	leading topic for	tricky for			
	young people	YPWID, when	by some of the	topic	
	and they can describe it	it comes to address	questions, simply because	- romantic	
	- explain love	non-tangible	they had never	relationships, rely on their	
	relationships	issues.	experienced	own	
	mainly through		the situations	experiences	
	their experience		before.	·	
	and relate it to			-uncomfortabl	
	feelings and love			e behaviors	
	emotions.			when	
	- topic of sexual			addressing	
	relationships				



causes		sexual
embarrassment.		relationships.

# b. Key findings regarding sexuality and sexual education

This section refers to questions 17 to 54. Here the core topics of the interview are addressed.

Topic	Bulgaria	Italy	Spain	Turkey	Greece
Sex education	<ul><li>no sex education at all,</li><li>Young people get information on the topic from other sources .</li></ul>	<ul> <li>major lack of knowledge in this field,</li> <li>no opportunity to discuss it with friends, relatives or other close supporting figures.</li> </ul>	- no familiarity  - learned by imitation or talking with familiars.	- not familiar with - none of them received sex education lessonsinformed from other sources (friends, films, and social media).	- very limited knowledge of sexual education, with most of their information coming from family members and friends.
Sex	<ul> <li>basic</li> <li>understanding,</li> <li>need for a</li> <li>specialist to talk to</li> <li>about this topic,</li> <li>difficult to share</li> <li>directly and openly</li> <li>about this.</li> </ul>	-overall comprehension at least from a generic point of view, -People interviewed can describe the activity of sex.	- they experienced it by experimenting on their own.	- basic understanding, - express the need for a specialist to talk to.	- understanding of sex is primarily related to love and affection.
Safe space	- some interviewees feel uncomfortable talking to their parents and get information about the topic from outside sources.	No occasion or space to discuss about sex if not exceptionally with their parents.	No occasion.	-feeling uncomfortable in talking to their parents and rely on outside sources for information.	- They tend to discuss sexual topics with trusted family members or professionals such as those



					involved in the
					interviews.
Different kind of relations	- understanding of the difference between friendship, sex and love they share the emotional and physical differences.	- can all describe the difference between the 3 kinds of relationships, albeit in a very naive way. The average response is "friendship is love without sex".	- don't know the boundaries, - Some say that for them sex is the same as love.	- demonstrate a good understanding of the difference between friendship, sex, and love, - they could not differentiate relationships based on the emotions and feelings they experience.	- Interviewees struggle to differentiate between friendship, sex, and love.
Hygiene and body changing	<ul> <li>difficulties in addressing such topic,</li> <li>no proper understanding of the body changing.</li> </ul>	No particular problems relating to hygiene care.	-understanding of their body and its changes, - some difficulties in keeping their body clean.	- varied understanding of body changes, depending on intellectual disability, - feel ashamed.	- good understanding of their changing bodies and hygiene.
Orientation	- no safe space to talk about it. This conversation opened up an opportunity for personal sharing and a request for support.	- topics of interest for young people.	- not familiar	- expressed desire for more open discussions on the topic, because most of them don't know anything related to sex education.	- understanding of sexual orientation and gender is limited.
Pleasure	- primarily through their own experiences, - going through a trial-and-error experience, which may expose them to a risky situation or problem for them.	- the feeling is that the deep meaning behind these two words is scarce.	This question has not been answered.	- difficult to talk about sexual pleasure, -understanding is primarily based on limited experiences.	- limited understanding of sexual pleasure and autoerotism.



Consent	- unclear how	- a well-known	Some say they	- express	- difficulties in
	much this is	topic,	understand it	understanding,	explaining the
	related to their	- discrepancy	but find it	refusing	meaning of
	real behavior and	between their	difficult to set	unwanted	what consent is
	boundaries they	understanding	limits.	contact and	or how to
	have with	and actual		saying no to	behave in
	acquaintances and	behavior.		harmful or lying	relation to
	strangers.			individuals.In	sexual desire.
				other words,	
				young people	
				have an opinion	
				about which	
				body parts	
				should not be	
				touched.	
				- discrepancy	
				between their	
				understanding	
				and actual	
				behavior	
Behavior	- embarrassing for	- sexual desire is	- no	- rarely	
related to	them and they are	too abstract for	understanding.	discussed.	
sexual	reluctant to talk	them,			
desire	about their	- no sympathy or			
	feelings and	familiarity.			
	emotions about				
	sex.				

# c. Key findings regarding the degree of knowledge in this context

This second section of the document is addressed to the **Interviewers** in order to better understand their professional background.

# - Italy

The interviewers have a highly positive perception of the project's objectives and its potential impact. They believe the topics addressed are of major interest, particularly because they work on affectivity and sexual inclusion and are engaged in supporting young people with intellectual disabilities. Also, the material produced can be helpful not only for the interviewees but also for other research centers. For what concerns helping YPWID



speak up for their needs, relevant materials indicated by experts include: information gathering, direct opinions, outreach and active involvement, specific questions, school-based workshops, dissemination of books and board games.

During the interview, the main difficulties encountered were the length and complexity of the questions, which can be challenging for individuals with intellectual disabilities, especially those with autism spectrum disorder (ASD). Clear, concise, and structured questions with visual elements are recommended. They were also considered broad, general, and abstract. In terms of knowledge and support's lack, the interviewers feel that important topics have been covered, but they highlight that a lot of knowledge is taken for granted.

#### - Bulgaria

The interviewers perceive the project's objectives as an opportunity to break down stereotypes around sexuality education and raise awareness on the topic. They believe that young people would express their needs if they are provided with more information and opportunities to discuss sexuality. However, there is a lack of information and interviewers feel that they do not have sufficient training, information, and materials on sexual education and affectivity for YPWID. For these reasons, they acknowledge the importance of trained professionals who can discuss sexuality education with students, and they emphasize the need for accessible information materials tailored to the age and individual development of children. Regarding the development of materials, the interviewers are generally satisfied, but they highlight the need for more questions that address topics such as refuse, understanding abuse, and protection from psychological and physical abuse.

During the interview, the main difficulty encountered was the hesitancy of interviewees to discuss the topic of sexuality, possibly due to embarrassment or reluctance to talk about their feelings and emotions. Interviewers also found it challenging to address topics related to sexual relations and pleasure, as well as body changes during adolescence and it can be associated with feelings of shame and. In terms of knowledge and support, interviewers believe that respondents lack understanding of sexual relations and pleasure.

# Turkey

Interviewers recognize the importance of the project and its effective outcomes. In this respect, it is emphasized that young people need more information and opportunities to talk about sexuality in order to express their needs and concerns. While they appreciate the willingness of young people to share with their loved ones, they also note a lack of



information regarding sexually transmitted diseases, preventing unwanted pregnancies, and the risks of challenging behavior and abuse.

Interviewers, who are youth workers, themselves feel inadequately prepared and lack educational information materials regarding sexuality education. They highlight the importance of having trained professionals in schools to discuss sexuality education with students, particularly those with special needs and intellectual disabilities. There is the expressed need for information materials tailored to children's age and individual development, and addressing topics related to refusing and understanding abuse, is emphasized. The interviewers state that all the topics from the questionnaire were covered in the materials. However, they ask additional questions focusing on how to refuse and what abuse means, as well as protection from psychological and physical abuse.

#### - Spain

Interviewers perceive the project's objectives as important and necessary, recognizing the relevance of themes such as sexuality education for young people with intellectual disabilities. Hence, there are varying opinions on the approach and content of the education; some emphasize the importance of preventing sexually transmitted diseases and unwanted pregnancies, while others prioritize teaching social and emotional skills. At the same time, all interviewers agreed that the topic should be addressed in a respectful and inclusive manner, tailored to the individual needs, and taking into account the type of disabilities. Still, the interviewers involved lack sufficient training and materials to effectively support YPWID in addressing these topics. Some seek additional resources online to enhance their support. They stress the need to work individually with persons with disabilities in order to ensure appropriate information and personalized support.

While conducting the interviews, some difficulties were encountered, including the participants' lack of knowledge on certain topics, such as sexually transmitted infections (STIs). Some respondents had never been in an affective relationship, leading to limited topics for discussion. Additionally, some participants preferred not to answer certain questions due to privacy concerns. identified several topics in which they lacked knowledge or support, including differentiating between sex and love, issues related to women and feminism, and understanding consent. In addition to that, overprotection from families also hinders the development of intimate relationships.



# - Belgium

Both professionals acknowledge that young persons with intellectual disabilities are most interested in topics related to intimate relationships, such as having a girlfriend or boyfriend and getting married. A common issue highlighted in the questionnaire is that YPWID often do not understand the concept of sexuality or sexual attraction nor desire. Instead, they rely on unreliable sources like TV soap operas, random comments from family members, or their observations from daily life. Moreover, societal assumptions about sexuality and disability further exacerbate their challenges by denying them their natural, human needs.

Professionals, including those that were involved in the project, encounter several challenges when teaching or discussing topics related to sexual education with young persons with intellectual disabilities. These challenges include incorrect assumptions and overprotectiveness by families, cultural and religious barriers that hinder open discussions about sexuality, and reluctance of specialized organizations to allow external engagement, which limits exposure to a broader society.

For what concerns the training materials, Participant 1 mentions that her organization creates its own materials for sexual education projects, as they are not exclusively specialized in working with this group. However, they sometimes face difficulties accessing specialized resources from other centers.

According to the professional, there have been explored innovative engagement methods including the use of art forms like trash-art techniques, improvisational theater, and musical videos. Results from these approaches have been encouraging. Additionally, they have used "supported/controlled natural situations," such as evening discos, excursions, and retreats, to engage individuals with intellectual disabilities effectively.

On the other hand, Veronica did not mention having access to specific training or materials for teaching sexual education.

A central pillar for working with YPWID is the involvement of the parents or legal tutors. The participants have in fact emphasized the importance of transparency and building a relationship with them. It is believed that activities that involve both parents and disabled individuals have positive results and impacts. However, both organizations have not worked directly with parents thus far. Moreover, the perspective is that also professionals from additional fields, including alternative therapies and the arts, can play a successful role in sexual education for young persons with intellectual disabilities.

Both participants expressed concerns about the lack of practical support in their respective countries' legal frameworks for teaching sexual education to young persons with intellectual



disabilities. They believe that while legal frameworks and strategies may exist, practical support for implementation, including methodologies and specialized tools, remains insufficient. A critical need is to change public awareness, emphasizing that people with intellectual difficulties can feel real emotions.

#### - Greece

The professionals involved in the project perceive its objectives as very interesting and anticipate a positive impact. They hope that the research results will be helpful in addressing the needs of young people with intellectual disabilities (YPWID). The interviewers emphasize that better knowledge and understanding among professionals can empower YPWID to speak up for their needs.

However, interviewers express a lack of training in sexual education and affectivity related to YPWID. Despite their satisfaction with the development of materials for the project, they believe that more training and information are needed to effectively support YPWID in this context.

During the interviews, several difficulties were encountered, including some questions that could not be understood by the respondents. Additionally, the interviewers identify specific topics where YPWID may lack knowledge or support, including consent and masturbation. In the final considerations and conclusions, key findings from the research confirm the overall lack of adequate sexual education for both YPWID and the individuals who support them, including family members, friends, and professionals.

To address these issues in Greece, laws and policies should ensure that individuals with disabilities, including YPWID, receive appropriate sexual education and support, special education programs should be tailored to the specific needs of people with disabilities, including providing information on sexual health and relationships.

Also, school curriculum and teaching materials for sexual education should be adapted to make the information more accessible, including using simplified language and visual elements. Educators working with individuals with disabilities should receive specialized training to provide effective sexual education, considering the unique needs and challenges of their students.

Parents and caregivers play a crucial role in the sexual education of YPWID. They should get guidance and support to facilitate conversations about sexuality and relationships at home.



#### 6. Final Considerations

# 6.1 Analysis, interpretation and comments of the key findings

The data collected from partner countries reveal common challenges and disparities in sexual education and affectivity programs for YPWID, emphasizing the importance of addressing the unique needs of those in the context of sexual education and affectivity. The main differences are rooted in the legislative frameworks, access to comprehensive programs, and societal attitudes.

In fact, one of the central themes that emerge is the significant role played by legislative frameworks in shaping sexual education programs. The variation in legal support and guidelines across partner countries is striking. While some countries benefit from comprehensive legislation that provide a clear structure for sexual education, others lack in that, leading to inconsistencies in the quality and availability of sexual education programs. For instance, Belgium stands out as a country with specific national definitions and programs based on international guidance, providing a solid foundation for sexual education. In contrast, Italy faces deep-seated taboos surrounding sexuality, largely influenced by the conservative stance of the Catholic Church. This cultural context hinders progress towards inclusive sexual education. Spain is navigating a path toward greater awareness of sexuality education but contends with societal stigma, especially concerning individuals with intellectual disabilities. In Turkey, the absence of comprehensive sexual education programs, even for the general population, poses a significant challenge. This highlights the urgent need for legislative reforms and comprehensive guidelines to ensure the inclusion of YPWID in sexual education programs.

Despite their differences, all countries share a common understanding of the importance of sexual education for young people, including those with intellectual disabilities. They are making efforts to improve school curricula, adapt educational tools and contents and provide evidence-based information on a broader range of topics. Such efforts imply the development of sexual education programs and personalized, flexible and material-supported education for YPWID which would be will be more beneficial. Each country acknowledges the specific needs of YPWID specifically, stressing the importance of addressing topics such as body awareness, physiology, relationships, and protection from abuse or discomfort. The success of these initiatives will depend on continued advocacy, proper training for educators, and breaking down societal barriers surrounding the topic of sexuality education.



#### 7. Conclusions

The present European Report on Sexual Education and Affectivity for Young People with Intellectual Disabilities offers a comprehensive and insightful analysis of the state of sexual education programs/curricula across several European countries (BG-IT-SP-BE-EL-TR). It does not only sheds light on the current state of sexual education for YPWID in Europe but also serves as a call to action. It emphasizes the need for continued efforts to break down barriers, challenge societal taboos, and provide inclusivity. This work is vital to ensuring that all young people, regardless of their intellectual abilities, have the opportunity to lead fulfilling, healthy, and informed lives, capable of making decisions about their bodies and relationships confidently and responsibly.

#### 8. Annexes

- Interviews template
- National Report Template
- CRES National Report (IT)
- NART National Report (BG)
- Open Europe National Report (SP)
- ZICEV National Report (TR)
- EASPD National Report (BE)
- EASPD Questionnaire (BE)
- EILD National Report (GR)



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