Hello, my name is Joe Falkner, and welcome to the Flexible Mind Therapy Podcast. Today we are going to take a step back to the beginning of the podcasts on ASD and Sexual Development, to provide a bit of context and scope for this series of podcasts.

Recently, as a part of the Mindfulness-Based Stress Reduction for Teens program that I am completing with a client, I selected the "Beginner's Mind" as the mindful quality that I wished to work on for the week. The "Beginner's Mind" Mindful Quality encourages us to practice: seeing things for the first time, being open and fresh, and applying a clean slate to things as a way towards attaining wisdom. As I practiced this, I thought about this series of podcasts, and realized that I had not provided any context or scope for the discussion. I provided a bit of information on neurotypical development, as well as some of the potential factors that may impact on the development of relationships, intimacy, gender identity, and sexuality for individuals with ASD. But, I didn't feel like I provided enough context for this discussion. Today's podcast will hopefully begin to provide a bit more of that context.

In April of 2017, I presented on the topic of *Working with Issues Related to Relationship, Gender Identity, and Sexual Development in Individuals with Autism Spectrum Disorders* at the Minnesota Association for Children's Mental Health annual conference. One of the questions that was left unanswered for some people was why I, as a speech language therapist, was interested and presenting on this subject. I have been a speech-language pathologist for over 25 years now. I have worked in a variety of environments, including: nursing homes, hospitals, pediatric clinics, day training and habilitation centers for people with developmental disabilities, day treatment centers, schools, and most recently in private practice. I have specialized in working with individuals with Autism Spectrum and other neurodevelopmental disorders. In all of that time, I have rarely seen a class of behaviors that cause more distress for individuals with ASD, parents, staff members, and community members than those related to sexual expression.

Now, please don't get me wrong, other behaviors certainly cause difficulties for these groups. Tantrums, meltdowns, aggression, and noncompliance all create their own level of concern. They carry with them their own unique problems,

worries and unease for all involved. But, none in my experience create the levels of dread that issues related to sociosexual development cause. Subjects like relationships and dating, sexual identity and orientation, gender identity and expression, self- and other- pleasuring, etc. are all emotionally laden (Walker-Hirsch, 2007). I'll discuss this more in podcasts on neurotypical sociosexual development and Ableism, but when we pair these already emotionally laden terms with other emotionally laden terms like "developmental disability" or Autism Spectrum Disorders, parents and professionals can experience a great deal of "discomfort, fear, and uncertainty" (Walker-Hirsch, 2007). And, unfortunately, when we are uncomfortable we tend to either try to avoid or minimize the activity that we blame for our discomfort. In this case, that would be the sociosexual development of individuals with ASD.

I've been parts of teams struggling with questions, like: Who talks to the young man with ASD who is masturbating in a public place? How do we decide whether two individuals can date, become intimate, and marry? Who decides what appropriate expressions of gender and intimacy are allowed in public places? And, as I've considered this over the years, three key facts came to my awareness:

1) In many, if not most, of the situations that occurred around sociosexuality we were discussing individuals with ASD without their input, and making decisions without considering their wishes; 2) These actions were driven by compassion, kindness, and with a great deal of fear on the parts of caregivers, family members, and staff members; and 3) Both the inappropriate sociosexual behaviors that some individuals with ASD exhibited, and the fear and discomfort of their caregivers, family members, and staff members, had the same root cause—a lack of sociosexual training.

So, I did what I always do, I began reviewing articles and books on the subjects. What I found in all of these resources confirmed my own experiences and observations. There were all sorts of recommendations on how we should address these concerns. Books and programs were written and published based on many of these recommendations. And yet, for some reason this information wasn't reaching individuals with ASD, caregivers, family members, or other professionals. I hate when there is information is out there, but isn't getting to people. So, because this has shown up in my practice over the years, and because

there was a need to share this information, I committed to doing what I could to share the information that I have garnered over time. Do I consider this the definitive discussion on the matter? Not at all. I'm hoping this is the beginning of people's journey, just as I'm hoping that I continue this journey over time. I'm hoping, though, that this helps to clarify questions, and provides some options for answers for individuals with ASD and those who care about them.

So, now that I've answered the question of why I became interested in and have shared information about this subject, I want to introduce some of the topics that we will be discussing over the next several weeks. The first areas that I will review will be related to sociosexual development for individuals with ASD, and the both extrinsic and intrinsic factors that impact on this development. You may ask yourself, "Why discuss and study all of these different topics? Why can't we just get to the good stuff." For the person with ASD, if these describe some of the areas that you may have struggles or challenges, they may serve as areas to focus on for increased awareness and personal growth. For parents, caregivers, and other professionals, these topics may serve as additional targets for therapy, education, and/or development for the individual with ASD that you are interacting with. Overall, these topics may serve as explanations for particular sets of behaviors, difficulties in expression of certain skills that have been learned, and/or challenges that affect sociosexual development overall.

Understanding why things may occur a certain way, or what may be missing in our current approaches that are needed by individuals with ASD to make informed decisions, can help to alleviate all our fears, eliminate the prejudices that these fears cause, and help promote healthy sociosexual development for individuals with ASD. The risk in avoiding learning about these things is that we will apply our perspectives and biases based on neurotypical sociosexual development, and fail to consider those unique factors that may actually underlie differences or difficulties in sociosexual development and/or that we may fail to make the information provided in sociosexual education meaningful to these individuals.

Many journal articles and books over the years have established a number of different issues that individuals with ASD may experience in sociosexual development. These may include: decreased sexual knowledge and understanding, difficulties with sexual desire and arousability, difficulties with

gender identity development, difficulties with self- and other- pleasuring, misinterpretation of social rules and mores as they relate to sociosexual expression, and difficulties with dating and being intimate with a partner, among many other possibilities (Pecora, Mesibov, & Stokes, 2016) (Henault, Asperger's Syndrome and Sexuality: From Adolescence through Adulthood, 2006) (Attwood, Henault, & Dubin, 2014) (Henault, Healthy Sexuality: Adaptive Skills for Individuals with Asperger's Syndrome, 2016) (Henault, Sexual Education for Adolescents and Young Adults with an Autism Spectrum Disorder, 2013) (Henault, Understanding Relationships and Sexuality in Individuals with High-Functioning ASD, 2013).

Here is a sampling of just a few different author's perspectives on some of the difficulties that individuals with ASD experience:

- Heffernan (2016): "Most people with autism will express the desire to be in a relationship though many will find it difficult to meet partners due to anxiety, sensory, social and communication issues."
- Soraya (2013): "Romantic relationships are something that many of us on the spectrum may struggle with. They can be very complex, and also very rewarding. But the process can be especially challenging for those on the spectrum. The dating world is rife with unspoken rules and expectations, and can be difficult for even the most skilled among us to navigate. Add strong feelings into the mix and it can get pretty daunting."
- Jackson (2017): "Sex is messy, whichever way you paint it, and a lot of people on the autism spectrum struggle to cope with that level of mess. If people on the spectrum learn from unrealistic portrayals of sex, such as pornography, then the problem is compounded. Sex education doesn't teach you that you should keep a towel handy, or that sometimes people make weird noises during sex, or that there are way more fluids than you expect. It's pretty understandable that a lot of people on the autism spectrum may become disillusioned or disenfranchised with sex and become asexual through choice, a way to bow out of a confusing and strange world. There seem to be so many different rules and ways to act in terms of sexuality that nobody is told and we just have to learn."

These observations point out many of the intrinsic factors impacting on sociosexual development, including: social factors (e.g., unspoken rules), cognitive factors (e.g., coping with mess), sensory (or regulatory) factors (e.g., noises during sex); behavioral (e.g., unrealistic expectations due to pornography), and mental health (e.g., anxiety). These intrinsic factors may be the result of, or

exacerbated by, a number of extrinsic factors, including: social isolation and/or rejection (i.e., social means are some of the richest sources of sociosexual information for many neurotypical individuals, and individuals with ASD may have less exposure or access to these sources); Ableism which is form of discrimination or prejudice against individuals with physical, mental, or developmental disabilities that is characterized by the belief that these individuals need to be fixed or cannot function as full members of society (Castañeda & Peters, 2000) (which can be expressed through denial of the sociosexual rights of individuals with ASD, denial of access to training, and, in the past, even through sterilization); lack of sociosexual training for individuals with ASD (which may have many different etiologies); and finally, lack of training for caregivers and other professionals (which can lead to the development of fear, anxiety and Ableism in parents, caregivers, or other professionals). By understanding both the intrinsic and extrinsic factors, we can better understand potential areas of need or development, as well as better design developmental opportunities, education, and/or training/treatment.

The second group of areas that I will discuss will relate to approaches for addressing the needs of individuals with ASD. I will propose a tiered approach, which is like the Response to Intervention tiers used in educational settings, to sociosexual education and treatment. I'm a bit of a sucker to be honest when it comes to using a Tiered approach. But, I believe this, like many cases, lends itself very well to this type of approach. The first tier is the Universal Tier, and relates to the educational needs of all individuals with ASD. The second tier is the Secondary Tier, and relates to approaches and strategies for those individuals who are at increased risk for difficulties with sociosexual development, or are at increased risk for being exploited, victimized, or sexually acting out. The third and final tier is the Tertiary Tier, and it relates to those that have already been exploited or victimized, or who have already exhibited problematic sexual behaviors.

At each of these Tiers, I will discuss the importance of considering the unique social, cognitive, regulatory, and behavioral needs of individuals with ASD when developing strategies, approaches, and programs. I will review and discuss evidence-based practices, including: behavioral approaches and strategies, visual supports, relationship-developmental approaches, and social cognition/skills interventions. We will also explore topics related to Gender Identity, the needs of

individuals with significant intellectual and cognitive delays or deficits, pornography, mental health and medication impacts on sociosexual development and expression, and consent.

Hopefully, the podcast today did a better job of setting up topics related to sociosexual development and individuals with ASD.

A transcript of this podcast, along with citations and a related bibliography, can be found on the flexiblemindtherapy.com website. In addition, a flow chart can be found on my website of topics that will potentially be included in this series.

Thank you for joining me today.

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