# Issues of Gender & Sexuality in Special Needs Children: Keeping Students with Autism & Learning Disability Safe at School

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**Abstract:** The following paper addresses some of the issues presented by students with Special Needs, (especially autism) at school. It particularly focuses upon sexuality and gender. For example, autism and gender dysphoria appear to co-occur more often than in typically developing students. However, these young people may not understand how their reality translates to living within the public arena. This is also true of sexuality. Acceptance, understanding and accommodation of these students needs to inform our measures for keeping safe at school; this is of utmost priority.

**Keywords:** Special needs, Autism, Sexuality, Gender, Gender Dysphoria, Gender Variance, School, Safety, Suicide, Learning disability.

### INTRODUCTION

Autistic students are more than 7 [1,2] times more likely to experience conflicting gender and sexuality issues; 20% will experience gender dysphoria (compared to 1% of the typical population) and, a staggering 41 percent of transgender individuals will attempt suicide [2] https://spectrumnews.org/features/deep-dive/living-between-genders/.

Learning how to recognize gender variance in autism is vital. It's also vitally important to tell if the issues an individual is living with are of a permanent nature and what the best ways to educate, support and tap into resources for students on the spectrum are.

Autism is a developmental disposition requiring a brain that is wired up to use single focus [3-6]. This leads to autistic difficulties with 'change,' and multitasking, as well as a need for sameness, structure and routine. Being single minded, literal, ritualistic, resistant to change and naturally poorly equipped in social situations can cause autistic individuals to believe they are inadequate as human beings; this negatively impacts mental health (MH) and self-esteem [5].

The general, or typical population, have brains wired up to allow multi-focus and, therefore, are at an advantage in social situations requiring divided attention [6]. They are also at an advantage when it comes to recognizing sexuality, issues of gender, social propriety and personal needs for autonomy and, therefore, will connect to these at an appropriate time, often before the age of seven.

When living with gender dysphoria (GD) and autism, however, individuals are doubly disadvantaged. Statistically autistic individuals are 9 times more likely to commit suicide (7.5%-15%) than individuals in the typical population [2] while individuals in the typical population living with GD are 40-50 times more likely to attempt suicide [7].

When it comes to issues of gender, sexuality, sexual orientation and keeping children safe, parents need to have conversations with their children. Ideally, these conversations should happen early, happen often and be non-judgmental. It's simply a case of sharing the facts. Using real terms to label body parts (and give the child the slang term too) is very important. Most autistic children do best with appropriate language rather than with slang. So, a vagina is the right word, not 'your fanny'. Schools also need to support families by adding to what parents teach so there is consistency between home & school. Sometimes parents and families are uncomfortable around these issues and leave gender and sex education to the school. Although this isn't ideal, schools do need to take up this challenge. Keeping children safe is part of whole school education!

Gender dysphoria used to be thought of as gender disorder [8] and was considered a psychiatric condition requiring psychological intervention (such as psychotherapy and counselling) to aid an individual in accepting their body and cis-gender as identified at birth. Although transitioning from one gender to another also occurred it was not understood in the way it is today. Now, in the DSM-5 [4] gender dysphoria is understood as a biological condition, rather than a psychological one. The treatment for this biological condition is to transition from one gender to the other as owned by the individual concerned. Although, for

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some, transition takes place only at the social level, for others it will be social and aided by medical transition processes too [9].

# Consideration of the Additional Barriers and Disadvantage that Autistic Individuals may Experience Due to Non-Binary Gender Identity

If you are living as an autistic individual and you are comfortable being yourself, rather than feeling pressured to conform to societal ways expectations, you may face additional barriers in your daily life experience. For example, if you are six feet tall, broad shouldered and have a deep male voice but are more at home in feminine clothes because you are living in the female gender identity, you might find it difficult relating to society around you. This is because 'typical' society operates on traditional norms of what constitutes 'usual' (considered as normal by most) behavior. Most male bodied individuals identify as male and this fits with societal expectation. When a male bodied person identifies as female, but isn't conforming 'medically' to how a female might present physically, this disadvantages that individual.

Some 'transgender' autistic individuals are in touch with their own gender identity but do not cope with medical transitioning to show that gender to the rest of the world around them. They see no point in having to obey 'typical' expectations on gender identity for a variety of reasons. Some of those are connected to fear of change, some to disconnection of what might be happening to others (discomfort) who are in contact with them, for some, person/object permanence is a cognitive process not yet complete enough for them to let go of who they've been [10] while for others they simply see no need. Whatever the reason, they need our support and acceptance. Trying to get individuals to change simply to fit societal expectation is not a good reason. If, once they are mature enough, safe enough and desiring of such a change, this inspires them towards a fuller transitional process, they need support to follow through. However, many autistic trans individuals are very happy living in their chosen gender without any medical intervention. This will always present difficulties for them within the wider community; at least until the wider community is much more accepting of difference.

https://www.youtube.com/watch?v=kQI-efXUFJc
http://the-art-of-autism.com/a-child-of-two-spectrumsthe-intersection-between-autism-and-transgender/
https://www.youtube.com/watch?v=lWu40Cd00rA

# Consider how Barriers can be Reduced or Removed and Young People & Adults Educated and Supported to Understand their Gender Identity

Working to raise awareness of autism and gender dysphoria is a good thing. It will help inform the wider community that autism and gender dysphoria can coexist. However, awareness in and of itself isn't the same as action.

All the time we have 'his' and 'hers' when it comes to public conveniences, clubs, Bars, shopping areas, school uniform, and so on, we are keeping the community set on the idea that gender is binary and there are no differences to this concept. Those differences one encounters will be viewed as 'rare,' 'odd' and/or deviant. If we changed how we name things, for example we now commonly have 'unisex' hair salons... why not have something similar for public conveniences? When a person with a disability needs to use a toilet for the disabled, there isn't usually a 'his' and 'hers' public convenience! A young trans autistic youth, aged thirteen, was told to use the disability toilets at school. He felt upset with this option because, he argued, he didn't have a disability.

One of the reasons I enjoy Sci-Fi films and literature is because there is room for that which is different, such as 'the mutants' in Mutant Ninja Turtles or The X-Men. Being autistic I felt like an alien much of the time. It was only when I found my 'tribe' that I knew I could belong [5,9]. For autistic individuals who are non-binary in their gender identity, or are living as trans men and women (boys and girls) where the gender they identify with is not that assigned them at birth, finding their tribe is doubly difficult.

It's also hard to access the kind of medical treatment you believe you need, access community understanding and acceptance, find appropriate support among one's peers and be considered for suitable education and employment. Once you disclose you are: non-binary, living with gender variance, asexual, Gay or Bi-sexual, a trans gender person, and so on, keeping safe takes the support of all.

http://www.theatlantic.com/health/archive/2016/11/the-link-between-autism-and-trans-identity/507509/

http://www.sbs.com.au/topics/sexuality/agenda/article/2 016/11/17/link-between-autism-and-trans-identity

http://spectrumnews.org/features/deep-dive/living-between-genders/

There is much debate concerning whether autistic individuals are more likely to have a 'male' brain and whether this 'pre-disposes' them toward gender issues? See:

https://www.ncbi.nlm.nih.gov/pubmed/25744543

However, the theory of autism and having a male brain is only a theory and is highly debated. See:

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC375445 9/

The reason I mention this is because I believe the research on this theory is far from robust and it skews the statistics on gender and autism. If we don't question things we read and are taught, we will not learn to research concerns we face to check if they are authentic. Simply believing things we think and take these as common knowledge, might be doing the world, and ourselves a dis-service. For centuries, it was believed the world was flat and, if one went far enough, one would fall off. This belief seems idiotic today, but, when it was suggested the world might be a sphere, some thought this was heresy!

So, even if it seems a bit far-fetched to think of working towards changing the world we live in, even the bit closest to us, by aiming at a gender free society (uni-sex toys for example that any child can play with; equality in sport where females play football too; unisex bathrooms, clothing and gender free expectations on shared domestic chores and/or parenting) we will be helping to remove barriers for autistic non-binary individuals, trans persons, those who are inter sexed and so on. See:

https://www.youtube.com/watch?v=GWoWmPxHH1g

https://www.youtube.com/watch?v=u2Zem9ILPbc

It's not about whether one agrees with what some people are saying it's more about being open and willing to have the discussion.

If we are accepting of our own gender we are part the way there for acceptance of others. If we are to assist young people to accept difference, perhaps they are non-binary or trans in their gender identity, we need to begin with acceptance of the human condition, in all its colorful diversity.

The following material is adapted from an Australian government resource:

http://www.kidspot.com.au/parenting/parenthood/parent ing-style/do-you-know-how-to-keep-your-child-safefrom-sexual-abuse

### TALK and LISTEN to the Children

It's important to teach children they can refuse to do something with an adult or even another child that they feel is wrong or frightens them. However, you cannot expect children to say 'No' on their own. Instead, encourage them to tell you whenever they are worried about what other adults or children want them to do. Always listen carefully to your child's fears and concerns. Stop what you are doing and really pay attention.

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When it comes to children on the spectrum or those with learning difficulties the above ideal may not be so easy in practice. Some children do not use speech to communicate, may not notice inappropriate activity, may not be connected to their 'gut' feelings and may not be discerning of public, private, yours, mine and so on. Using social stories to outline these concepts can be useful for some children. For others, however, using visuals to teach concepts such as Private and Public, along with signing or compic can be very helpful. If you engage a child via an interactive white board or iPad program, this can help the child share with you what they have understood.

## **Teaching your Child Sexual Safety**

Teach your children how to stay safe from sexual abuse just as you talk to them about road, fire, water, and internet safety. Having a 'named person' who is there to support and communicate with is vital.

# **Touching**

Even little children know the difference between touching that is OK or not OK. Explain that no-one has the right to touch them in places and ways that make them feel scared or uncomfortable.

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Again, in practice with children who may not generalise you will have to specify who is safe and who isn't. For example, the doctor and nurse are allowed to touch your body to check out what is hurting you. But, they must always have a parent or care giver present during such times.

## **Feelings**

Encourage children to trust their feelings. Talk about feeling safe and unsafe and work together on plans of what to do if they feel unsafe. This should include ways to leave awkward situations, like saying they have to go home now, or need to ask a parent or other adult for permission first.

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Feelings can be 'experienced differently' for spectrum and learning disabled children. Some may be synesthetic, prefer or identify feelings via color or numbers or attachments. It's important to get to know the child so you can be supportive in the way they need.

# **Grown-Ups**

We teach children to respect adults, so it's hard for them to say 'No' without feeling rude. Explain that sometimes adults do things that are not OK and they should tell you if this happens. Don't expect them to kiss or cuddle other adults, especially ones they don't know. Make a practice of discussing what your children do when they are with other adults and whether they like these people, just as you ask about their friends. This will alert you early to possible concerns.

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Using Power-point, for example, can be a good way to place pictures in a story explaining to a spectrum or learning-disabled child what adults should and should not do. So often there is a power issue as an adult feels they have the right to dictate to a child in ways that are not ethical, just or legal. We each need to be sure if we notice this type of behavior to report it as part of our mandatory duty of care.

# **Knowing and Talking about Bodies**

Encourage children's natural interest in their bodies. Teach them the correct names of all their body parts. Talking about sexuality can embarrass some parents. Your local child librarian can help find appropriate age level books to discuss with your child. If you can talk comfortably about these matters, it will be easier for your children to tell you their concerns.

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As puberty takes place in a spectrum or learningdisabled child's life the hormone driven emotions will over-ride any teachings of public and private. At home masturbation can be taught as a private activity to take place when an individual is home, in their bedroom. But, outside of home, the child will lose the knowledge of 'private' and will only be driven by their hormones. Reiterating over and over and over again that this action is only for private at home in their bedroom, needs to occur. Giving the individual alternative activities of interest to them may help. Understanding that certain medications make it difficult to find release is important because this can keep a person who has tried to find relief, over and over again, in a state of erection or desire. Sometimes the pediatrician or psychiatrist needs to be informed if erections are lasting too long, as the individual's medication may need changing.

## Secrets!

Many abusers make children keep their abuse a secret- often using threats. Children need to learn the difference between safe and unsafe secrets. Teach them the only OK secrets are those which give someone a nice surprise.

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Using social stories, art work, technology and so on can help individuals understand what a secret is and which types are important to keep safely to one's self and which ones need to be shared with a trusted other. A nice surprise to give another person isn't enough of a descriptor for autistic and/or learning-disabled children.

# What if my Child has been Abused?

Believe what your child says and listen calmly.

Showing your distress may frighten them from telling you.

Reassure your child it is not their fault and they are not in trouble.

Tell them how proud you are they told you.

Reassure them that you love them.

Let them know that they are safe now and you will deal with it all and the abuse won't happen again.

Don't push for details of the abuse if your child isn't ready to tell you. Give them time. If the abuser is a close family member, family life will be seriously disrupted. Try to keep normal routines going if possible. Routines help children feel more secure. Even though

you may feel very anxious about your child's safety, try to maintain their usual activities.

Think carefully about who to tell about your child's abuse and when, and talk to your child about this. Other people knowing can make the situation more distressing. Explain the difference between privacy and secrecy to avoid your child feeling ashamed.

### **Important**

Get help and support for yourself. You may feel betrayed, angry, or failing as a parent. You need support from friends and family and often need professional counselling advice to keep going. Remember, child sexual abuse is rarely a parent's fault. Abusers are clever manipulators of parents as well as children.

# **Important**

Sexual abuse is a CRIME. If you suspect someone is abusing your child or others, you must tell the appropriate authorities to put a stop to abuse.

For more parenting information and support within Australia:

Parentline ACT (02) 6287 3833

Parentline NSW 1300 1300 52

Parentline NT 1300 30 1300

Parentline QLD 1300 30 1300

Parent Helpline SA 1300 364 100

With reference to gender and sexuality some useful resources are listed below.

https://vimeo.com/134400656

http://www.premier.vic.gov.au/keeping-children-safefrom-sexual-abuse/

http://www.kidspot.com.au/parenting/parenthood/parent ing-style/do-you-know-how-to-keep-your-child-safefrom-sexual-abuse

https://www.amazon.com/Sexuality-Your-Daughters-Intellectual-Disabilities/dp/1557664285/?tag= goofyfootpres-20

https://www.amazon.com/The-Growing-Up-Guide-Girls/dp/1849055742/?tag=goofyfootpres-20

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