



Human Sexuality Policy

I. Introduction:

Human sexuality is an integral part of personality. One's sexual thoughts, feelings, values, ideas and decisions are entwined and relate directly to how we feel about others and ourselves.

The rights of persons with intellectual disabilities include the same opportunities, responsibilities and concerns as those shared by anyone else. However some people Triangle serves may be less able to recognize, understand and express their sexual feelings effectively and may need guidance and education to assist them in comprehending their own emotional and sexual development, as well as the rights and responsibilities of sexual expression.

Developmentally disabled adults, like all other adults, have rights to sexual expression; privacy; understandable, accurate information about sexuality; choice in sexual values, preferences and behaviors; choice in marital status; accurate information about birth control options; choice in contraception or sterilization; choice in significant others; and access to counseling, legal and social services.

Developmentally disabled adults, like all other adults, have the responsibility to know and abide by the law; consider pregnancy as a potential risk of intercourse; understand the responsibility of child-rearing; respect the rights and choices of others; understand the mores of society; refrain from passing sexually transmitted diseases to others; and to inform sexual partners of such diseases.

Clearly there can be no single prescription to address all possible sources of conflict between the rights and responsibilities of developmentally disabled, or any other adults, with regard to their sexual identity and expression. As service providers and participants in the ISP process, our agency may be obligated to become involved in the process of individuals' learning about their own sexuality.

II. Purpose and Goals:

All individuals, regardless of degree of disability, are growing, changing persons. Therefore, even the most seriously impaired person should be helped to participate as fully as possible in services which support the most culturally appropriate and age typical life continuum.

In fulfilling this purpose, Triangle's residential supports seek to meet the following goals:

1. To present and discuss information that allows for optimal growth; including the concept of self as a sexual being, possessing physical, emotional, social, moral, and spiritual aspects.

2. To assist individuals in making responsible decisions relating to their own sexuality.
3. To encourage respect for individual sexual differences and preferences.
4. To provide staff with guidelines to respond to individual sexuality.
5. To provide staff with guidelines for their own behavior relating to appropriate role-modeling.

III. **Statement of Staff Responsibilities:**

All staff members are responsible for assisting individuals in developing positive attitudes about sexuality and in making decisions about social/sexual expression that will enhance their sense of self worth. For the purpose of making these responsibilities as clear as possible, they are divided into three areas:

A. **Being a positive role model**

1. Guidelines for Behavior: While on duty or volunteering time with individuals receiving supports, staff should observe all guidelines, outlined within this policy, for the social/sexual behavior of individuals in their interpersonal relationships.
2. Modeling Male and Female Behavior: Staff should understand that through interactions with others as well as own behavior, they are offering a model of male/female behavior for the individuals they are supporting. It is important for staff to expect the same standard of behavior for both men and women and to treat women and men with equal respect in all situations. All individuals should do work, learn skills and participate in activities without regard to their gender.
3. Attire: Individuals receiving supports learn appropriate dress through instruction and observing the manner in which staff clothe themselves for various occasions. Staff should wear clothing that will reflect community standards of what is considered in good taste.

B. **Encouraging appropriate social/sexual behavior**

The goal in working with individuals we support should always be to assist in learning to interact in a responsible and socially acceptable manner. Staff should become involved in explaining, demonstrating and encouraging socially acceptable methods for meeting, greeting and showing affection both physically and verbally to both friends and acquaintances.

Any comments made by staff to individuals should not serve to stigmatize, punish, coerce, embarrass, or otherwise cause harm. In any situation where sexual exploitation of an individual is suspected, the staff person who becomes aware of the possible exploitation must **immediately** notify the Disabled Persons Protection Commission (DPPC Hotline: 1-800-426-9009) and his/her supervisor.

Any interactions between staff and residents that could be interpreted as sexual by the individual, must be avoided. In situations where an individual is attracted to a staff person, it is the responsibility of that staff person to explain that a romantic relationship is neither possible nor desired by the staff person. Whenever it would be helpful to facilitate the communication of this information clearly, another staff person should be invited to participate in the explanation. Staff members who are aware of an attraction between an individual receiving supports and a staff person are expected to bring this to the attention of the staff person involved.

IV. Parental/Family Involvement

Individuals will be counseled regarding the discussion of issues of sexuality with parents or involved family members. Individuals will be encouraged to let involved family members know if they are in a relationship with another person, etc. If the individual does not wish to share information with involved family members, staff will respect those wishes. Individuals will, however, be counseled regarding the potential ramifications of keeping this information from involved family members and the possibility of them finding out later and becoming upset. Staff will assist in conveying information to involved family members (e.g. accompanying the individual when he or she discusses information with the family member, facilitating assistance from the individual's therapist, discussing information with the family member for the individual, etc.) if needed.

V. Guidelines

A. Individual Questions and Curiosity

Questions and curiosity are a part of ongoing sexual development and should be encouraged.

Staff Guidelines:

1. Respond to questions to the best of your ability and in a non-judgmental manner, being careful not to inject personal values.
2. If staff are uncomfortable with answering the question or if answer is unknown, staff should assist the individual in obtaining the information from another source (e.g., local hospital, family planning clinic).
3. If the individual has limited verbal skills and expresses curiosity, staff should try to anticipate questions and verbalize them. Visual aids might be a useful tool in this process.
4. If inappropriate questioning or curiosity occurs, staff should direct questions to a more appropriate time and place.
5. Refer to sexuality and health education programs as indicated.

B. Relationships Between Individuals:

In our lives, we develop close personal relationships. These may include friendships, work relationships, romantic relationships, or family ties. While there are many ways in which we all experience personal growth, it is only through close relationships that a certain quality of emotional, intellectual, and spiritual development is available to us.

Educational and social opportunities must be provided to allow individuals the dignity of expressing their sexual orientation, whatever it may be.

Staff Guidelines:

1. Assist individuals who may need help relating to others.
2. Work with the staff team to provide opportunities that encourage interaction between individuals.
3. Encourage and respect caring and sharing in individuals' relationships with one another.
4. Investigate an interaction or relationship between individuals that is emotionally or physically abusive (this includes the verbal harassment of one individual by another).
5. Refer concerns regarding a possible inappropriate relationship to the Disabled Persons Protection Commission (DPPC Hotline: 1-800-426-9009) and your supervisor.

C. Privacy:

All individuals have a right to privacy. This includes being alone (i.e. away from public view and/or company) with another person for personal, social, teaching or therapeutic reasons.

To the extent that private space can be found, this space should not be invaded by staff without permission, except for reasons of sanitary inspections and where circumstances indicate a reasonable belief that the rights of another individual are being violated.

Privacy also includes the right to have personal problems or activities discussed only with persons that have a legitimate need to know the information and only with the expressed permission of the individual.

Staff Guidelines:

1. Intervene in any situation to which an individual is not consenting.
2. Provide individuals with the information necessary to make an informed decision.
3. Respect and support an individual's right to make decisions.
4. Support an individual's decision to withdraw consent.

5. Discuss issues related to an individual's ability to give consent with the team.

Limitations on the availability of privacy, if any exist

Limitations on privacy must identify the existence of unreasonable risk to health or safety, including the emotional or physical well being of the individual. An unreasonable risk means the likelihood of serious harm. All individuals have the right to make decisions involving risk to themselves to the extent they are able to understand and accept the consequences of their action.

d. Sexual Expression:

Intimate touching (e.g., kissing, caressing) and sexual intercourse are normal means of human sexual expression between consenting adults.

Staff Guidelines:

Situations may vary and as a result, interventions may also need to be varied. The following are suggested interventions that should be used with discretion and respect for the individual's rights.

1. Assist in defining public vs. private places. Help to determine some private places.
2. Assist in defining consent and understanding that it is wrong to force oneself on another.
3. Assist in obtaining education and/or counseling regarding all aspects of human sexuality and any decision to engage in sexual intercourse.
4. Assist in understanding responsibilities as well as consequences involved in behavior (e.g., that pregnancy may result from sexual intercourse, training in use of contraception).
5. Provide individuals with information relative to AIDS and other sexually transmitted diseases.
6. Allow individual(s) opportunity to clarify feelings about intimate touching and/or sexual intercourse.
7. Help individual(s) to understand that intimate touching and sexual intercourse are normal means of sexual expression.
8. If individuals engage in behavior in a public place, in front of others, or if it is interfering with living or work responsibilities:
 - a. Discreetly interrupt the behavior.

- b. Make use of the teachable moment to explain the pertinent issues: inappropriateness of place, interfering with the rights of others or work/home responsibilities.

E. Masturbation:

Masturbation is an acceptable means of human sexual expression and development.

Staff Guidelines:

Situations may vary and as a result, interventions may also need to be varied. The following are suggested interventions that should be used with discretion and respect for the individual's rights.

1. Help residents to understand that masturbation is a normal and healthy means of sexual expression.
2. If individuals engage in this behavior in a public place, it is suggested that the staff intervene as follows:
 - a. Discreetly interrupt the behavior by discussing the inappropriateness of the place.
 - b. If individual continues to engage in the behavior, the staff could intervene with physical prompts.
 - c. During this intervention staff should protect the individual from embarrassment (i.e. cover them with coat, blanket, etc.)
3. If behavior interferes with living or working responsibilities, staff should intervene as follows:
 - a. Discuss with the individual your concerns regarding the behavior.
 - b. Assessment should be done to determine reasons for the behavior.
 - c. Refer for counseling as needed.
4. If an individual masturbates to the extent of causing personal injury:
 - a. Interrupt the behavior immediately.
 - b. Assess bodily injury. Provide first aid and seek medical care as needed.
 - c. Explain the harm of the behavior.
 - d. Refer for counseling.

F. Sexually Transmitted Diseases (STD):

These include AIDS, gonorrhea, syphilis, vaginitis, pelvic inflammatory disease, herpes, hepatitis, venereal warts, non-gonococcal urethritis, etc.

Staff Guidelines:

1. If an individual's behavior or conversation indicates possibility of STD, (i.e. itching, discomfort, pain) staff should:
 - a. Make or assist individual in making an appointment with personal physician, family planning clinic, etc. for exam and appropriate treatment.
 - b. Assist individual in following physician's treatment plan (e.g. taking prescribed medication, informing sexual partners, avoiding sexual contact during contagious stages, discussing importance of maintaining proper hygiene, returning to physician for follow-up treatments).
 - c. Establish an individual education plan regarding STD to review prevention and treatment methods.

G. Contraception:

Pregnancy prevention is an option for individuals who choose to be sexually active but do not wish to become involved with a pregnancy.

Staff Guidelines:

If an individual chooses to be sexually active, staff should:

1. Assist him or her in obtaining education and/or counseling regarding all aspects of human sexuality and the decision to use contraception, in keeping with his or her religious beliefs.
2. Assist medical professional/professional counselor/clergy person in discussing any and all aspects of the decision making process with the individual.
3. Monitor use of the method as needed, being aware of any possible problems or side effects.
4. Assist in making both routine and problem-centered follow-up visits to physician and/or counselor.

NOTE: These guidelines apply only to individuals who are legally competent. If individual has a guardian, or his or her legal competency is challenged, or if sterilization is being considered, refer to DMR Legal department for guidance.

H. Marriage:

Individuals who are considering marriage are entitled to support

Staff Guidelines:

1. Assist individuals in making informed decisions:
 - a. Respect an individual's inquiries concerning marriage.
 - b. Make sure the individual has access to all counseling resources (these may include counseling by a social worker, medical personnel, clergy, etc.)
 - c. Help the individuals to evaluate their relationship.
 - d. Discuss with the individual(s) any effect that marriage may have on their living situation.
 - e. Assist individual in planning for the wedding.
 - f. Encourage individuals to become involved in post marital counseling.

I. Pregnancy:

Pregnancy is a possible consequence of heterosexual intercourse as well as artificial insemination. The individuals we support are not always aware of the potential consequences of their actions. Individuals who are sexually active may not consider the issue of pregnancy. Therefore, staff needs to be aware of situations in which an individual may become pregnant. If an individual receiving residential supports has a child, it may necessitate an alternative placement for the individual, as our current supports are not equipped to deal with family-type living arrangements. Options to continue receiving supports from Triangle could be explored, given the availability of resources.

Women who can become pregnant include those who:

- are of reproductive age (roughly 12-47 years old)
- have not been medically declared post-menopausal
- do not use birth control
- do not have documented physical conditions which would preclude pregnancy

Circumstances which may indicate the risk of pregnancy include:

- observation of an individual who is engaging in sexual intercourse
- observation of sexual activity where the possibility of intercourse is indicated

- an individual's comments about possible sexual intercourse
- an individual who has missed a menstrual period or exhibits signs of pregnancy

Staff Guidelines:

1. Be aware of individuals who are at risk of becoming pregnant. Assess their need for Human Growth and Development Training and counseling.
2. If a legally competent individual chooses to become pregnant, staff should:
 - a. Assist her in obtaining education and/or counseling regarding all aspects of a decision to become pregnant.
 - b. Inform the Program Manager and Director of Residential Services of the individual's intentions.
3. If an individual suspects or discovers a pregnancy, staff should:
 - a. Assist her in securing appropriate medical care to confirm pregnancy and/or obtain contraception.
 - b. Assist medical professionals/professional counselor/clergy person in discussing any and all aspects of the decision-making process with her.
 - c. Assist her in receiving family planning counseling to discuss options regarding pregnancy (i.e., keeping the child, adoption, abortion).
 - d. Assist her in obtaining counseling regarding financial implications, health and nutrition, anatomy and physiology, social implications, parental responsibilities and alternative living arrangements.
 - e. Inform Director of Residential Services about any on-going issues and decisions regarding the situation.
4. Respect the individual's right to confidentiality.

NOTE: These guidelines apply only to individuals who are legally competent. If individual has a guardian, or his or her legal competency is challenged, refer to DMR Legal Dept. for guidance.

J. Sexual Abuse and Sexual Exploitation:

Sexual abuse refers to any sexual act committed against an individual through coercion, manipulation, physical force or without the individual's consent. Sexual exploitation refers to the use of coercion, manipulation or physical force to compel an individual to participate in, promote, or witness an act of sexual explicitness which would not otherwise be freely chosen by that individual.

Sexual abuse and exploitation are harmful, degrading acts. In most situations, the perpetrator is subject to criminal prosecution. All individuals have the right to be free from and protected against sexual abuse and sexual exploitation.

Any situation of abuse or exploitation must be handled with the greatest degree of confidentiality.

Staff Guidelines:

1. Never exploit or abuse another person.
2. Assist individuals in receiving education regarding sexual abuse and exploitation (specifically appropriate vs. inappropriate touching, self-protective behaviors, where and from whom to seek assistance).
3. Utilize opportunities for promoting individuals' assertiveness on a daily basis.
4. When staff suspects that individual has been abused or become aware that an individual has been abused, he or she should:
 - a. Assure that all possible evidence relating to the abuse or exploitation be preserved. The individual should not shower or wash if there exists a possibility of discerning evidence from sexual excretions. Also, all clothing, bed linens, etc., should not be washed and should be made available to medical and legal personnel.
 - b. Assist the individual in seeking medical attention.
 - c. Notify Director of Residential Services immediately.
 - d. Report abuse or suspected abuse to Disabled Persons Protection Commission (1-800-426-9009) and/or local law enforcement (see Disabled Persons Protection Mandated Reporting of Abuse Policy for guidance) and complete an Incident Report.
 - e. **Ensure individual who was or may have been victim of abuse or exploitation is not at risk of further abuse.** Assist the individual in avoiding situations where additional abuse or exploitation could potentially occur.
 - f. Assist individual(s) in obtaining counseling services as needed.

K. Pornography:

Use of pornographic materials is a matter of personal taste and is appropriate when used in a private place with respect for the rights of others.

Possession of pornographic materials in one's home for private use by consenting adults is not illegal and in fact is considered protected by the First Amendment of the U.S. Constitution. Dissemination of pornographic materials to minors (and perhaps to those under guardianship) is illegal. A person is potentially exposing him/herself to criminal liability if he or she distributes, displays or exhibits pornographic materials to one who does not consent, is a minor, is under guardianship, or is unable to give informed consent due to intellectual, emotional or psychological concerns.

Staff Guidelines:

1. Assist individuals receiving supports in defining private vs. public places.
2. If pornographic materials are being used in a public place, discreetly interrupt the behavior and let the individual know that it is inappropriate to use these materials in a public place.
3. If pornographic materials are found in a public place, they should be removed from the area by staff.
4. Staff must not procure pornographic materials for individuals receiving services and supports.