SEXUALITY EDUCATION FOR STUDENTS WITH AUTISM

WHY PROVIDE SEXUALITY EDUCATION TO LEARNERS WITH ASD?

Prevent & identify Abuse	Preventing and identifying sexual abuse
Relationships	Supporting relationships, marriage, parenthood
Social Norms	Preventing & addressing socially inappropriate behavior
Health	Promoting health and hygiene
Self-Determined	Improving self-determination and self-advocacy

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BARRIERS TO SEXUALITY EDUCATION FOR LEARNERS WITH ASD

- Attitudes
  - Primarily concerned with skills related to general education curriculum
    - Reading, writing, arithmetic, science, art, music, etcetera
    - Sexuality education may or may not be part of gen ed curriculum
      - But may still not be accessible despite valuing and practicing access
  - Historically negative perceptions of "deviancy" (Wolfensberger 1972):
    - Eternal children, uneducable, dangerous, burdens of charity, holy innocents, ridicule

SEXUALLY HEALTHY ADULTS (SIECUS, 2004)

- Appreciate their body
- Seek information about reproduction when needed
- Recognize human development includes sexual development
- Respectfully and appropriate interact with others regardless of their gender
- Affirm their sexual orientation and gender identity
- Respect the sexual orientation, gender identity, values of other people
- Appropriately express love and intimacy
- Develop and maintain personally meaningful relationships
- Avoid and report exploitative relationships
- Obtain information to make family-related decisions as well as to enhance one's sexuality
- Recognize and behave in accordance with personal values
- Use decision-making skills

- Communicate with acquaintances, friends, family members, and romantic partners
- Express sexuality in safe and enjoyable ways in accordance with their values
- Experience enjoyable sexual thoughts and feelings but not necessarily act on them
- Distinguish between sexual behaviors that enhance life and sexual behaviors that harm others and/or self
- Express own sexuality while respecting the right of others to do so
- Have consensual, non-exploitative, honest, safe, and pleasurable sexual relationships
- Use contraception and avoid STDs/STIs
- Obtain prenatal care
- Prevent sexual crimes and abuse
- Identify bias against other individuals, avoid stereotyping and prejudice, and eschew bigotry

DECIDING WHAT TO TEACH

DEVELOPING INDIVIDUALIZED SEXUALITY EDUCATION PROGRAMMING

COMPREHENSIVE SEXUALITY EDUCATION

- Emphasizes ongoing, developmentally appropriate education
- Focuses on six key concepts (SIECUS, 2004)
    1. Human development
    2. Relationships
    3. Personal skills
    4. Sexual behavior
    5. Sexual health
    6. Society and culture
- The SIECUS guidelines may help you prepare individualized sexuality education programming
    – Like a curriculum map/guide

Slide 1:

Guidelines for Comprehensive Sexuality Education: Key Concepts and Topics

Key Concept 1: Human Development
Topic 1: Reproductive and Sexual Anatomy and Physiology
Topic 2: Puberty
Topic 3: Reproduction
Topic 4: Body Image
Topic 5: Sexual Orientation
Topic 6: Gender Identity

Key Concept 2: Relationships
Topic 1: Families
Topic 2: Friendship
Topic 3: Love
Topic 4: Romantic Relationships and Dating
Topic 5: Marriage and Lifetime Commitments
Topic 6: Raising Children

Key Concept 3: Personal Skills
Topic 1: Values
Topic 2: Decision-making
Topic 3: Communication
Topic 4: Assertiveness
Topic 5: Negotiation
Topic 6: Looking for Help

Key Concept 4: Sexual Behavior
Topic 1: Sexuality Throughout Life
Topic 2: Masturbation
Topic 3: Shared Sexual Behavior
Topic 4: Sexual Abstinence
Topic 5: Human Sexual Response
Topic 6: Sexual Fantasy
Topic 7: Sexual Dysfunction

Key Concept 5: Sexual Health
Topic 1: Reproductive Health
Topic 2: Contraception
Topic 3: Pregnancy and Prenatal Care
Topic 4: Abortion
Topic 5: Sexually Transmitted Diseases
Topic 6: HIV and AIDS
Topic 7: Sexual Abuse, Assault, Violence, and Harassment

Key Concept 6: Society and Culture
Topic 1: Sexuality and Society
Topic 2: Gender Roles
Topic 3: Sexuality and the Law
Topic 4: Sexuality and Religion
Topic 5: Diversity
Topic 6: Sexuality and the Media
Topic 7: Sexuality and the Arts

Slide 2:

Key Concept 1:
Human Development
....

Human development is characterized by the interrelationship between physical, emotional, social, and intellectual growth.

Key Concept 1: Human Development
Topic 1: Reproductive and Sexual Anatomy and Physiology
Topic 2: Puberty
Topic 3: Reproduction
Topic 4: Body Image
Topic 5: Sexual Orientation
Topic 6: Gender Identity

Human Development Life Behaviors:

Having applied the human development subconcepts at the appropriate age, the learner will be able to:

- Appreciate one's own body.
- Seek further information about reproduction as needed.
- Affirm that human development includes sexual development, which may or may not include reproduction or sexual experience.
- Interact with all genders in respectful and appropriate ways.
- Affirm one's own sexual orientation and respect the sexual orientations of others.
- Affirm one's own gender identities and respect the gender identities of others.

Topic 1: Reproductive and Sexual Anatomy and Physiology

Subconcept: The human body has the capability to reproduce as well as to give and receive sexual pleasure.

Level 1
middle childhood, ages 5 through 8; early elementary school

Level 2
preadolescence, ages 9 through 12; upper elementary school

Level 3
early adolescence, ages 12 through 15; middle school/ junior high school

Level 4
adolescence, ages 15 through 18; high school

Slide 3:

Key Concept 1:
Human Development
....
Human development is characterized by the interrelationship between physical, social, and intellectual growth.

DEVELOPMENTAL MESSAGES EXAMPLES

- Level 1 (ages 5-8)
  – Each body part has a correct name and specific function
- Level 2 (ages 9-12)
  – During puberty, internal and external sexual and reproductive organs mature in preparation for adulthood
- Level 3 (ages 12-15)
  – The sexual response system differs from the reproductive system
- Level 4 (ages 15-18)
  – Sexual differentiation, whether a fetus will be male or female, is determined largely by chromosomes and occurs early in prenatal development.

Key Concept 2: Relationships

Relationships play a central role throughout our lives.

Key Concept 2: Relationships
Topic 1: Families
Topic 2: Friendship
Topic 3: Love
Topic 4: Romantic Relationships and Dating
Topic 5: Marriage and Lifetime Commitments
Topic 6: Raising Children

Level 1
middle childhood, ages 5 through 8; early elementary school

Level 2
preadolescence, ages 9 through 12; upper elementary school

Level 3
early adolescence, ages 12 through 15; middle school/ junior high school

Level 4
adolescence, ages 15 through 18; high school

Relationship Life Behaviors:

Having applied the relationships subconcepts at the appropriate age, the learner will be able to:

• Express love and intimacy in appropriate ways.
• Develop and maintain meaningful relationships.
• Avoid exploitative or manipulative relationships.
• Make informed choices about family options and relationships.
• Exhibit skills that enhance personal relationships.

Topic 1: Families

Subconcept: Most people are raised in families and live in families as adults.

Developmental Messages:

Level 1

• A family consists of two or more people who care for each other in many ways.

Key Concept 2: Relationships

Relationships play a central role throughout our lives.

TOPIC 1: FAMILIES DEVELOPMENTAL MESSAGES EXAMPLES

• Level 1 (ages 5-8)
– A family consists of two or more people who care for each other in many ways
• Level 2 (ages 9-12)
– Family embers sometimes disagree but continue to love each other
• Level 3 (ages 12-15)
– Love, cooperation, and mutual respect are necessary for good family functioning
• Level 4 (ages 15-18)
– One purpose of the family is to help its members reach their fullest potential

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Key Concept 3: Personal Skills

Healthy sexuality requires the development and use of specific personal and interpersonal skills.

Key Concept 3: Personal Skills
Topic 1: Values
Topic 2: Decision-making
Topic 3: Communication
Topic 4: Assertiveness
Topic 5: Negotiation
Topic 6: Looking for Help

Level 1
middle childhood, ages 5 through 8; early elementary school

Level 2
preadolescence, ages 9 through 12; upper elementary school

Level 3
early adolescence, ages 12 through 15; middle school/ junior high school

Level 4
adolescence, ages 15 through 18; high school

Personal Skills Life Behaviors:

Having applied the personal skills subconcepts at the appropriate age, the learner will be able to:

• Identify and live according to one's own values.
• Take responsibility for one's own behavior.
• Practice effective decision-making.
• Develop critical-thinking skills.
• Communicate effectively with family, peers, and romantic partners.

Topic 1: Values

Subconcept: Values guide our behavior and give purpose and direction to our lives.

Developmental Messages:

Level 1

• Values are strong feelings or beliefs about important issues.

Key Concept 4:

Sexual Behavior

••••••••••••••••

Sexuality is a central part of being human, and individuals express their sexuality in a variety of ways.

Key Concept 4: Sexual Behavior

Topic 1: Sexuality Throughout Life
Topic 2: Masturbation
Topic 3: Shared Sexual Behavior
Topic 4: Sexual Abstinence
Topic 5: Human Sexual Response
Topic 6: Sexual Fantasy
Topic 7: Sexual Dysfunction

Sexual Behavior Life Behaviors:

Having applied the sexual behavior subconcepts at the appropriate age, the learner will be able to:

- Enjoy and express one's sexuality throughout life.
- Express one's sexuality in ways that are congruent with one's values.
- Enjoy sexual feelings without necessarily acting on them.
- Discriminate between life-enhancing sexual behaviors and those that are harmful to self and/or others.
- Express one's sexuality while respecting the rights of others.
- Seek new information to enhance one's sexuality.
- Engage in sexual relationships that are consensual, non-exploitative, honest, pleasurable, and protected.

Key Concept 5:

Sexual Health

•••••••••••••

The promotion of sexual health requires specific information and attitudes to avoid unwanted consequences of sexual behavior.

Key Concept 5: Sexual Health

Topic 1: Reproductive Health
Topic 2: Contraception
Topic 3: Pregnancy and Prenatal Care
Topic 4: Abortion
Topic 5: Sexually Transmitted Diseases
Topic 6: HIV and AIDS
Topic 7: Sexual Abuse, Assault, Violence, and Harassment

Sexual Health Life Behaviors:

Having applied the sexual health subconcepts at the appropriate age, the learner will be able to:

- Practice health-promoting behaviors, such as regular check-ups, breast and testicular self-exam, and early identification of potential problems.
- Use contraception effectively to avoid unintended pregnancy.
- Avoid contracting or transmitting a sexually transmitted disease, including HIV.
- Act consistently with one's own values when dealing with an unintended pregnancy.
- Seek early prenatal care.
- Help prevent sexual abuse.

Key Concept 6:

Society and Culture

••••••••••••••••••••••••••

Social and cultural environments shape the way individuals learn about and express their sexuality.

Key Concept 6: Society and Culture

Topic 1: Sexuality and Society
Topic 2: Gender Roles
Topic 3: Sexuality and the Law
Topic 4: Sexuality and Religion
Topic 5: Diversity
Topic 6: Sexuality and the Media
Topic 7: Sexuality and the Arts

Society and Culture Life Behaviors:

Having applied the society and culture subconcepts at the appropriate age, the learner will be able to:

- Demonstrate respect for people with different sexual values.
- Exercise democratic responsibility to influence legislation dealing with sexual issues.
- Assess the impact of family, cultural, media, and societal messages on one's thoughts, feelings, values, and behaviors related to sexuality.
- Critically examine the world around them for biases based on gender, sexual orientation, culture, ethnicity, and race.
- Promote the rights of all people to accurate sexuality information.
- Avoid behaviors that exhibit prejudice and bigotry.
- Reject stereotypes about the sexuality of different populations.
- Educate others about sexuality.

SELECTING & EVALUATING CURRICULA

- Relatively few options
  - May cover some specific areas in-depth, but nothing covered in other areas
- Examples
  - Promoting Social Success: A curriculum for Children with Special Needs (Siperstein & Rickards, 2004)
  - Teaching Children with Down Syndrome About their Bodies, Boundaries, and Sexuality: A guide for Parents and Professionals (Couwenhoven, 2007)
  - Life Horizons I & II (Kempton, 1999)
  - Taking Care of Myself: A Hygiene, Puberty and Personal Curriculum for Young People with Autism (Wrobel, 2003)
  - *Finger Tips: Teaching Women with Disabilities About Masturbation Through Understanding and Video (Hingsburger, & Haar, 2000)*
  - *Hand made love: A guide for teaching about male masturbation through understanding and video (Hingsburger & Haar, 2000)*
  - *Circles I: Intimacy and Relationships (Walker-Hirsch, 2008)*

EVALUATING FOR APPROPRIATE CONTENT (SIECUS Key Concepts)				
Human Development				
Contains information about reproduction, sexual anatomy, and physiology	0	1	2	3
Contains information about puberty	0	1	2	3
Contains information about reproduction	0	1	2	3
Contains information about body image	0	1	2	3
Contains information about sexual orientation	0	1	2	3
Contains information about gender identity	0	1	2	3
Relationships	0	1	2	3
Contains information about families	0	1	2	3
Contains information about friendship	0	1	2	3
Contains information about love	0	1	2	3
Contains information about romantic relationships	0	1	2	3
Contains information about marriage and lifetime commitments	0	1	2	3
Contains information about raising children	0	1	2	3
Personal Skills	0	1	2	3
Contains information about values	0	1	2	3
Contains information about decision making	0	1	2	3
Contains information about communication	0	1	2	3
Contains information about assertiveness	0	1	2	3
Contains information about negotiation	0	1	2	3
Contains information about looking for help	0	1	2	3
Sexual Behavior	0	1	2	3
Contains information about sexuality throughout life	0	1	2	3
Contains information about masturbation	0	1	2	3
Contains information about shared sexual behavior	0	1	2	3
Contains information about sexual abstinence	0	1	2	3
Contains information about human sexual response	0	1	2	3
Contains information about sexual fantasy	0	1	2	3
Contains information about sexual dysfunction	0	1	2	3

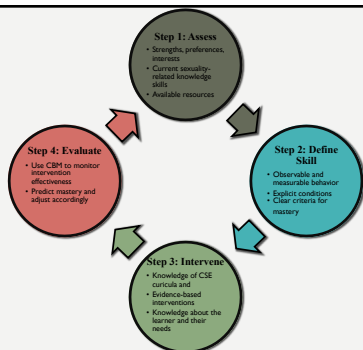| Sexual Health	0	1	2	3
Contains information about reproductive health	0	1	2	3
Contains information about contraception	0	1	2	3
Contains information about pregnancy and prenatal care	0	1	2	3
Contains information about abortion	0	1	2	3
Contains information about sexually transmitted diseases	0	1	2	3
Contains information about HIV and AIDS	0	1	2	3
Contains information about sexual abuse, assault, violence, and harassment	0	1	2	3
Society and Culture				
Contains information about sexuality and society	0	1	2	3
Contains information about gender roles	0	1	2	3
Contains information about sexuality and the law	0	1	2	3
Contains information about sexuality and religion	0	1	2	3
Contains information about diversity	0	1	2	3
Contains information about sexuality and the media	0	1	2	3
Contains information about sexuality and the arts	0	1	2	3
EVALUATING FOR CONTENT ACCURACY				
The curriculum only uses scientifically and medically accurate information	0	1	2	3
The curriculum contains information that is not older than 10 years	0	1	2	3
Lessons include various graphics, including line drawings, photographs, and/ or video	0	1	2	3
Curriculum includes or requires concrete materials and examples for lessons	0	1	2	3
Curriculum includes information that is appropriate and accurate for students of different ages	0	1	2	3
Curriculum includes information that accurately represents various racial and ethnic groups	0	1	2	3
Curriculum includes information that accurately represents various sexual orientations	0	1	2	3
Curriculum includes information about people with ASD and other developmental disabilities	0	1	2	3
The curriculum includes information about the benefits of abstinence without relying on fear or shame	0	1	2	3
The curriculum includes accurate information about safe sex	0	1	2	3

ROLES, RESPONSIBILITIES, COLLABORATION, & DISAGREEMENT

- Introduction of aspects of sexuality education in earlier years may
  - Enhance team member comfort discussing sexuality education
  - Clarify roles of team members providing different aspects of sexuality education
  - Enhance access to broader sexuality education curriculum (e.g., friendships, social development, safety)
- Professionals:
  - Experts in design and delivery of instruction (i.e., how to teach skills)
    - May not have sufficient knowledge about various aspects of sexuality education
    - May not agree with aspects of sexuality education
  - Multiple professionals may be necessary (PE & Health teachers, counselors, psychologist, other educators)
  - Training may be necessary

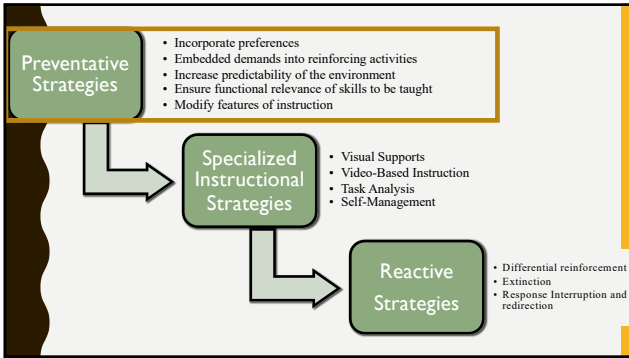## ROLES, RESPONSIBILITIES, COLLABORATION, & DISAGREEMENT

- Parents & Families
  - May have broader and different understanding of their child's needs
    - May be better able to provide some or many aspects of sexuality education
    - Collaboration and consultation may be necessary
  - Are models for family, relationships, love and are primary means of communicating values to their children
    - But usually learned implicitly– parents & families may need support, coaching, guidance to teach
  - May not be unprepared, uncomfortable, or unwilling teaching any aspect of sexuality education
    - Clear planning, communication (written?), and adherence to family values (e.g., faith, beliefs, values)
    - Seek less sensitive topics to begin with, such as friendships or body part names, that may be more agreeable
  - Consider developing a separate, informal plan for use at home
  - Consider consulting a knowledgeable/certified sexuality educator
- Consider involving the student, when appropriate

Four-Step Teaching Process

Step 1: Assess
- Strengths, preferences, interests
- Current sexuality-related knowledge skills
- Available resources

Step 2: Define Skill
- Observable and measurable behavior
- Explicit conditions
- Clear criteria for mastery

Step 3: Intervene
- Knowledge of CSE curricula and
- Evidence-based interventions
- Knowledge about the learner and their needs

Step 4: Evaluate
- Use CBM to monitor intervention effectiveness
- Predict mastery and adjust accordingly

TEACHING

DELIVERING INDIVIDUALIZED SEXUALITY EDUCATION PROGRAMMING

Slide 1

Preventative Strategies	• Incorporate preferences • Embedded demands into reinforcing activities • Increase predictability of the environment • Ensure functional relevance of skills to be taught • Modify features of instruction
Specialized Instructional Strategies	• Visual Supports • Video-Based Instruction • Task Analysis • Self-Management
Reactive Strategies	• Differential reinforcement • Extinction • Response Interruption and redirection

Slide 2

PREVENTION STRATEGIES

- Some inappropriate behavior may be caused by motivation to escape or avoid
  - e.g., FBA reveals student disrobes and/or attempts to masturbate during math time in order to escape tasks/demands
    - Decrease motivation to escape
      - Alter tasks to incorporate preferences (e.g., movie characters)
      - Alter the task to decrease difficulty– make it easier to complete (and access preferred activity)
      - Embed math demands into reinforcing activities
        - Money math to "purchase" YouTube videos of favorite movie/character
        - Solving word problems presented as a comic book hero dilemma
      - Modify instruction: fast-pace instruction, behavioral momentum, strategic prompting, offering choices of materials
    - Decrease opportunities to escape
      - Alter tasks to make them shorter
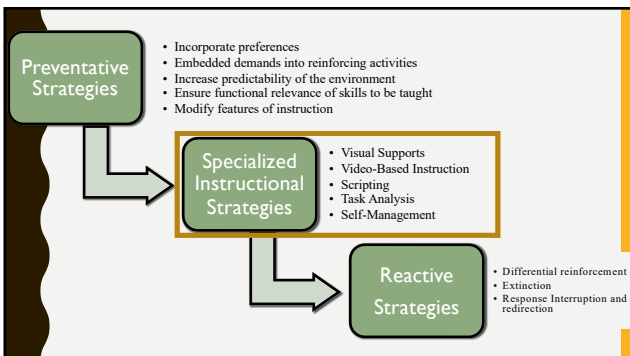
Slide 3

PREVENTION STRATEGIES

- FBA reveals student grabs peers body parts to get their attention
  - Teach functionally relevant skills to get peer attention
    - Use functionally relevant instruction
      - Being able to say name of peers when shown picture won't generalize to saying peer's name to get their attention
      - Teach social scripts for getting a peer's attention, and provide authentic opportunities to use the script
    - Arrange frequent opportunities for appropriate peer interactions to ensure attention need is met

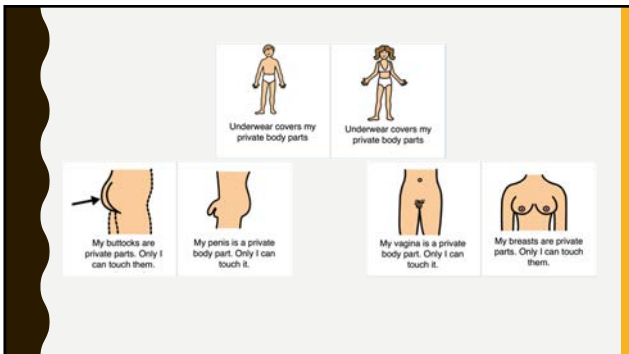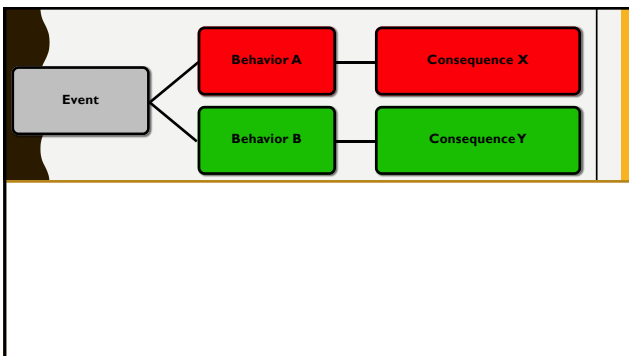| Antecedent Strategy	Explanation	Examples for CSE
Incorporating Learner Preferences	Integrate preferred items, characters, materials, media, and etc. into instruction	• Sing songs to learn names of body parts • Dress up as favorite characters to role play decision-making • Use videos of favorite TV characters to teach about families • Create and read illustrated stories/comics with about preventing and reporting abuse
Embedding Demands into Reinforcing Activities	Provide sexuality education during preferred activities	• Teach about gender roles during favorite imaginary play activity • Teach negotiation and compromise during video games or outdoor play
Increasing the Predictability of the Environment	Provide consistent daily routines and instructional methods	• Establish one or more times of day at home when time masturbation is appropriate (i.e., schedule masturbation time) • Use the same materials, language, and procedures to teach menstrual care and practice even when not menstruating.
Teaching Functionally Relevant Skills	Identify skills that will immediately and directly lead to natural reinforcers	• If repeatedly observed to touch/massage genitals in public, work with parents to provide opportunities to masturbate and achieve orgasm in private (i.e., bedroom). • If passive even when they appear to want something, teach requesting and assertiveness skills.
Modifying Features of Instruction	Changing content and/or delivery of instruction and tasks to increase compliance	• Provide choice of people or locations for role playing conversation and dating skills. • Ask student to do 2-3 easy/mastered tasks (e.g., say name of family) before asking them to do a new/difficult task (e.g., saying name of peer).

SPECIALIZED INSTRUCTIONAL STRATEGIES

• With knowledge about and team agreement on what ought to be taught
• And having assessed for present knowledge and skills, strengths & preferences
  – And defined specific, observable, and measurable skills/behaviors to be increased
• Provide specially designed instruction
  – Visual supports
  – Video-based instruction
  – Task analysis
  – Self-management

Preventative Strategies
• Incorporate preferences
• Embedded demands into reinforcing activities
• Increase predictability of the environment
• Ensure functional relevance of skills to be taught
• Modify features of instruction

Specialized Instructional Strategies
• Visual Supports
• Video-Based Instruction
• Scripting
• Task Analysis
• Self-Management

Reactive Strategies
• Differential reinforcement
• Extinction
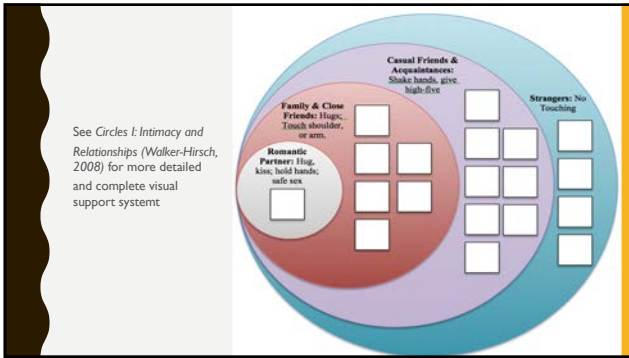• Response Interruption and redirection

VISUAL SUPPORTS

- An evidence-based practice (Wong et al., 2015)
- Teach basic or complex concepts that are hard to convey using language alone
  - Names of private body parts
  - Different types of relationships and acceptable behavior for each
  - Consequences for appropriate and inappropriate sexual behavior
- Combine with task analysis to teach complex skills with multiple steps
  - Washing body in the shower
  - Changing a maxi-pad
  - Safe and appropriate masturbation in the bedroom

See *Circles I: Intimacy and Relationships (Walker-Hirsch, 2008)* for more detailed and complete visual support systemt

SIECUS Key Concept	SIECUS Topic & Level	SIECUS Develop-mental Message	Examples of Visual Support
Human Development and Life Behaviors	Topic 1: Body Awareness Level 1: Ages 5-8 years	Body parts have a correct name and function	• Match images to poster of body • Match written names of body parts to pictures of body parts • Ask student to point to parts of his body (arm, hand, had, leg, shoulder, stomach, back, etc.) in a photograph when asked to find it • Match pictures and/or photographs of body parts to various functions (hands to hold things and write; eyes to see; feet to walk; mouth to eat and talk).
Relationships	Topic 2: Friendship Level 2: Ages 9-12 years	Friendships help people feel good about themselves	• Sort photographs of familiar people according to family, close friends, acquaintances (e.g., familiar children in other classes or schools). • Match images of close friends with special activities (e.g., favorite games) • Match images of friends and activities with images of the learner that represent emotional states (e.g., happiness) and show behavior (e.g., smiling, laughing,
Personal Skills	Topic 2: Decision Making Level 3:	Evaluating past decisions can help individuals learn from experiences and not repeat mistakes.	• Images to convey if/then relations from previous &future events • Use photographs of events, activities, or outcomes that followed important decisions (When you did ___, then ___ happened). • Use a chart to help the person track how often they believe they made decisions that had desired and undesired consequences

VIDEO-BASED INSTRUCTION

- Supported as EBP by large body of research (Wong et al., 2015)
  - Can enhance attention to important details
  - Provides consistent instruction and can be used repeatedly
  - Must be able to see the video and have generalized imitation skills
- Commonly used for teaching social and play skills
  - Peer-peer communication to facilitate friendships (MacManus et al., 2015)
  - Persistent requests to join a playground game (Chan & Charlop, 2014)
- Can be developed to teach safety and other skills
  - Example (https://www.youtube.com/watch?v=t-fu0vgOSSA)

STEPS FOR USING VIDEO MODELING

Step 1: Identify and define the sexuality-related target behavior in observable and measurable terms.
Step 2: Obtain necessary equipment (e.g., tablet, images, video editing software).
Step 3: Prepare for (e.g., script) and produce the video
Step 4: Collect baseline data on the sexuality-related target behavior
Step 5: Arrange for and show the video
Step 6: Document student performance of the sexuality-related target behavior (count, percent, rate, duration, latency, etc.)
Step 7: Evaluate intervention effectiveness
Step 8: Adapt intervention according to evaluation results

SCRIPTING

- An EBP (Wong et al., 2015) for promoting communication skills
  - Ganz (2007) identified seven steps for using scripting interventions
    1. Choose an activity/topic (e.g., lunch time; dating)
    2. Observe typical peers for scripting ideas
    3. Define skill to be increased
    4. Write the script for the targeted skill
    5. Teach the script
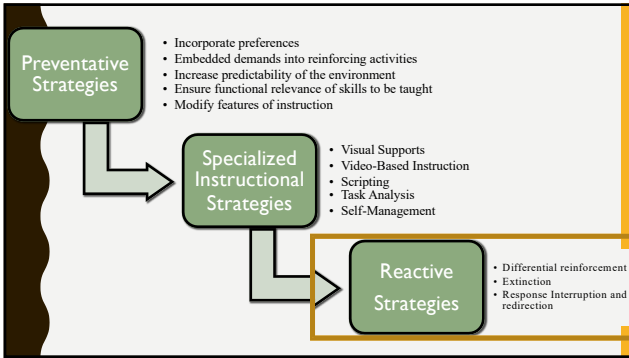   6. Implement the script during the chosen activity
    7. Fade the script

Relationship Type	Example Topics for Scripts
Acquaintances	• Formal and informal greetings (of various kinds) • Talking about the weather • Complimenting a person's clothing or hairstyle • Asking for assistance (directions, etc.) • Telling benign jokes and humor • Talking about local events or sports teams (e.g., "Did you see the game last night?")
Friendships	• Inviting a friend to play a game (basketball; video game) • Asking peers to join in a playground game • Asking a friend how they are doing • Inviting a friend over after school • Asking for a friend's forgiveness and/or forgiving a friend • Telling a friend when you are happy, unhappy, angry, frustrated, and etcetera • Offering and asking for help and/or support from a friend • Encouraging a friend to make the right decision • Jokes and humor • "What's your favorite" questions with follow up responses (e.g., "My favorite color is blue, too!" "Cheese pizza is my favorite food, too!"
Dating and Romantic Relationships	• Complimenting her/his appearance, outfit/clothing, perfume, and/or etcetera. • Asking what the person is interested in and related follow up questions (e.g., "What do you like to do on the weekends?" "How did you become interested in ____?" "What sorts of things do you do related to ____?" "Have you ever been to____?"). • Asking where the person grew up, where they went to high school, what college they went to. • A story about a funny or exciting moment in your life (e.g., winning a contest; moving to another school/state; a trip). • What's your favorite ____? (e.g., book, movie, video game, movie, sport, etc.) • Asking about their typical/daily routine, and have scripts prepared (e.g., "I also drink coffee every morning. How do you take it?"). • Questions and responses about family and/or a best friend. • Wrapping up the date (e.g., I had a really great time. Thank you for your company." "I hope we can go out again soon." "Would it be okay if I called or texted you" "Maybe if you're available next weekend we can go/do ____."
Professional/ Work Relationships	• Initiating and responding to greetings (e.g., "How are you?" "How is your day going?" "How was your weekend?" "See you later." I hope your day gets better."). • Asking if the person has children and/or details about them (e.g., sports they play, hobbies, etc.) • Tell about plans for holidays, travel, or vacation.

TASK ANALYSIS

- An EBP for learners with ASD (Wong et al., 2015)
- Breaking down complex behaviors/skills into discrete chunks
- Systematically teaching each chunk
  - Forward or backward chaining
- Effective for teaching social skills, play, communication, hygiene, self-care, daily living skills, etcetera
- May be useful when designing video models or visual supports

Sample task analysis for escorting your date to the car

Step	Behavior
1	Hold open building door for date to exit, then follow out
2	Walk next to your date at their pace toward car
3	Hold out your arm or hand for your date to hold
4	Make a comment about meal, movie, or compliment appearance (e.g., That was a nice meal. What was your favorite part of the movie? I really like your perfume.)
5	Walk to the passenger door of your car
6	Unlock the door
7	Open the passenger door
8	Offer a hand when she/he begins to seat herself
9	After she/he is seated, check to see if doorway is clear of all clothing and limbs
10	Close the passenger door
11	Walk to your/driver side of car
12	Get in and start the car

Sample task analysis for changing maxi-pad

Step	Behavior
1	Get clean pad from purse/bag/backpack
2	Put pad in pocket
3	Walk to the restroom
4	Enter and lock bathroom stall
5	Put pants and panties down
6	Look at pad and, if red or brown, remove from panties
7	Roll pad
8	Wrap used pad with toilet paper
9	Put used pad in trashcan in stall
10	Remove clean/new pad from pants pocket
11	Remove wrapper from pad and place in trashcan in stall
12	Unfold pad
13	Remove strips from bottom/back of pad
14	Put sticky side of pad on panties
15	Put strips in trashcan in stall
16	Pull up panties and pants
17	Unlock stall door and walk to sink
18	Wash hands (may require additional task analysis)

Sample task analysis for teaching masturbation

Step	Behavior
1	Get towel from closet
2	Go into bedroom and lock door
3	Put towel on bed or nightstand
4	Get sex toy(s) (e.g., vibrating massager, dildo, silicone vagina) and put on bed or nightstand
5	Get lubricant and put on bed or nightstand
6	For adults who prefer, turn on pornographic video (may require additional task analysis; turning on separate music to mask sound may be necessary)
7	Remove clothing
8	Apply small amount of lubricant, if needed
9	Use hand, massager, or sex toy (adults) to achieve orgasm (may require visual supports or video-based instruction)
10	Use towel to wipe off lubricant from genitals as well as semen or vaginal fluid
11	Put towel in dirty laundry basket
12	Turn off pornographic video
13	Put lubricant away
14	Clean/wash hands, massager, or sex toy(s) (may require additional task analysis)
15	Put sex toy(s) away
16	Put clothing back on
17	Unlock bedroom door

Slide 1

- Preventative Strategies
  - Incorporate preferences
  - Embedded demands into reinforcing activities
  - Increase predictability of the environment
  - Ensure functional relevance of skills to be taught
  - Modify features of instruction

- Specialized Instructional Strategies
  - Visual Supports
  - Video-Based Instruction
  - Scripting
  - Task Analysis
  - Self-Management

- Reactive Strategies
  - Differential reinforcement
  - Extinction
  - Response Interruption and redirection

REACTIVE STRATEGIES

- Differential Reinforcement of
  - Lower Rates of Behavior: Nose picking at rates lower than X are rewarded (from 17 to 12 to 8 to 4 to 2 to 1)
    - Best when problem behavior can be tolerated (e.g., nose picking vs. public disrobing or touching strangers)
  - Zero Rates of Behavior: Absence of behavior in period of time is rewarded (0 in 2 min; 0 in 4 min; 0 in 8 min; 0 in 12 min; 0 in 17 min)
    - Useful when problem behavior cannot be tolerated (e.g., rubbing genitals in classroom)
  - Incompatible Behavior: Rewarding behavior/tasks that require both hands (incompatible with rubbing genitals)
- Extinction (function-based)
  - Withholding/blocking access to the reinforcing consequence
  - Not instructional, but can be important part of broader instructional plan

REACTIVE STRATEGIES

- Response Interruption & Redirection (function-based)
  - Self-stimulation/automatic reinforcement confirmed via FBA
    - Because redirection may worsen behavior caused by attention
    - And masturbation or other similar behavior can be caused by other functions
  - Identify an incompatible behavior (e.g., holding/playing with putty; tablet computer)
  - Block (interrupt) attempts to engage in problem behavior (grabbing others; touching genitals)
  - Redirect student to engage in the incompatible behavior (i.e., give putty; tablet)

INAPPROPRIATE MASTURBATION

- Comprehensive plan is perhaps best, but more complicated plans may be difficult to follow
- Prevention strategies:
  - strategies that make inappropriate masturbation less likely and appropriate masturbation more likely
- Instructional strategies
  - Strategies that make appropriate masturbation more likely to be gratifying (ineffective masturbation may contribute to higher rates, frustration, injury)
- Reactive strategies
  - Strategies for reacting to inappropriate masturbation
  - Strategies for reinforcing absence of masturbation where inappropriate (quiet hands when in public)
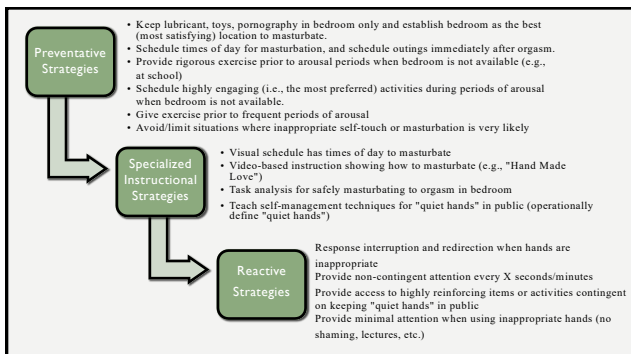
INAPPROPRIATE MASTURBATION

- Prevention Strategies
  - Arrange an appropriate place to masturbate
    - Bedroom at home with various stimuli that make it an ideal (and best) place to masturbate
      - Vibrating massager, lubricant, sex toys (for adults), pornography (for adults)
  - Schedule "Private Time" and include it in visual daily schedule
    - Communicates when (and where) masturbation will be allowed (predictability)
    - Schedule, if possible, during times when arousal is most likely (e.g., morning and/or evening)
  - Schedule highly preferred activities during high-arousal times when bedroom/masturbation is not allowed
  - Schedule rigorous exercise prior to times of day when arousal is high
    - Trampoline may be preferred and provide rigorous exercise
  - Avoid settings where inappropriate masturbation is likely to occur

INAPPROPRIATE MASTURBATION

- Instructional Strategies: Not all individuals will know how to masturbate
  - Task analysis of steps for appropriately masturbating to achieve orgasm
    - May be conveyed using visual supports for each step (e.g., lock door, get towel)
  - Video modeling of the task analysis (e.g., Hand Made Love; Fingertips; Hingsburger & Haar, 2000)
    - Video may show techniques using anatomical models (e.g., silicone penis, vagina) rather than human model
    - Keep in mind learning must have imitative repertoire for video modeling to be useful
  - Self-monitoring of behavior (and EBP; Wong et al., 2015)
    - Monitor hand location, self-touching

INAPPROPRIATE MASTURBATION

- Reactive Strategies
  - Response Interruption & Redirection (function-based)
    - Interrupt attempts to masturbate inappropriately
    - Redirect to activity requiring two hands (holding/carrying items)
  - Differential reinforcement of Zero Rates of Behavior
    - Powerful rewards for short intervals without masturbation behavior
      - Gradual increase in interval length according to tolerance, need

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Preventative Strategies
- Keep lubricant, toys, pornography in bedroom only and establish bedroom as the best (most satisfying) location to masturbate.
- Schedule times of day for masturbation, and schedule outings immediately after orgasm.
- Provide rigorous exercise prior to arousal periods when bedroom is not available (e.g., at school)
- Schedule highly engaging (i.e., the most preferred) activities during periods of arousal when bedroom is not available.
- Give exercise prior to frequent periods of arousal
- Avoid/limit situations where inappropriate self-touch or masturbation is very likely

Specialized Instructional Strategies
- Visual schedule has times of day to masturbate
- Video-based instruction showing how to masturbate (e.g., "Hand Made Love")
- Task analysis for safely masturbating to orgasm in bedroom
- Teach self-management techniques for "quiet hands" in public (operationally define "quiet hands")

Reactive Strategies
- Response interruption and redirection when hands are inappropriate
- Provide non-contingent attention every X seconds/minutes
- Provide access to highly reinforcing items or activities contingent on keeping "quiet hands" in public
- Provide minimal attention when using inappropriate hands (no shaming, lectures, etc.)

SEXUALITY EDUCATION FOR LEARNERS WITH ASD

- Decide what to teach
  - SIECUS Guidelines; Curricula
- Assign roles and responsibilities; collaborate and resolve disagreements
- Prevent inappropriate socio-sexual behavior using EBPs
- Teach appropriate socio-sexual behavior using EBPs
- React strategically to both using EBPs
- Measure intervention effects
  - Make changes when needed