



CREATING SAFE
SPACES

Disability and sexuality

accepting, acknowledging and affirming

Establish class values



- We will be talking about sexuality, gender, pleasure, abuse and safety in these sessions. What will make this class a safe space for everyone to share, express their views and discuss freely?
- How do we want others to behave?
- How will we behave?

Group Activity



20 minutes:

Participants make groups of 4-6 persons

Each group:

- A. defines disability.
- B. is given one of the following areas. They have to list the beliefs they have heard of about persons with disability in that area.
 1. Why some people are born with disability or develop it later in life
 2. Ability of to care for themselves
 3. Ability to form relationships
 4. Economic activity
 5. Sexuality
 6. Reproductive rights
 7. Marriage
 8. Contribution to their family
 9. Contribution to society

40 minutes: Each group presents the definition they have written, and the beliefs they have noted and whether they agree with it or not.

Session is held after this is completed

Long term physical, mental, intellectual or sensory **impairments** which, in interaction with **barriers**, hinders the **full and effective participation** in society equally with others.

- It is a complex interaction of biological, psychological and social factors.
- Different lens from which society looks at disability
 - Religious model
 - Medical model
 - Rehabilitation model
 - Charity model
 - Social model
 - Bio-psycho-social model
 - Rights based model

Bio-psycho-social model of disability



- Links social and medical models - proposes that disabilities are caused by physical/ biological problems which need medical help.
- Also, society has to include disabled people in social, economic and political activities by supporting and providing them equal opportunities.
- Forms basis for WHO's ICF: A person's **level of functioning** as a **dynamic interaction** between their **health conditions, environmental factors, and personal factors**.
 - **Activity limitation:** to do with the activities of people and limitations they experience
 - **Participation restriction:** to do with the participation in all areas of life, and the participation restrictions they experience
 - **Inhibitors or enhancers:** to do with the environmental factors and personal factors which affect these experiences



[Source](#)

Rights based model



- India has seen a shift in the way disability is viewed - from a charity-based model to a rights-based perspective. A paper by TARSHI (2018) talks about how the charity or welfare model of disability views the person with disabilities as the problem and dependent on the sympathy of others to provide assistance.
- According to the rights-based model, all human beings irrespective of their disabilities have rights, which are unchallengeable. This model promotes dignity, self-entitlement and agency of the individual human being, as a holder of rights, not the recipient of any resources, services and aid.



[Source](#)

Rights of Persons With Disabilities



- UN Convention on the rights of persons with disability-50 articles based on 8 principles:
 1. Non-discrimination
 2. Full participation and inclusion
 3. Respect for dignity and personal autonomy
 4. Respect for difference and diversity
 5. Equality of opportunity
 6. Accessibility
 7. Gender equality
 8. Respect for evolving capacities of children with disabilities
- **India - ratified in 2007**

Sexuality & Disability Intersecting



- People with disabilities are asexual
- People with disabilities are innocent - like young children
- Disabled People Can't Have Sex
- People with disabilities should only marry and have sexual relationships with other people with disabilities.
- People with disabilities should not have children
- People with disabilities have more important things to worry about than sex
- People with disabilities don't need CSE

- Surrounded by myths and misperceptions - Often Desexualised / Infantilized /Hypersexualised
- People with disabilities are sexual and can express sexuality in a diverse ways like the non disabled
- Having a physical or intellectual impairment doesn't change sexuality and desire to express it – or the emotions that can go with it

Impacts of myths and misconceptions



- Comprehensive sexuality education is not provided
- Feeling of inadequacy, lack of sexual self esteem and sexual satisfaction
- Sexual expression is often punished, controlled or stopped
- **Vulnerable to sexual harassment and abuse at higher rates**
- Face unnecessary, often non-consensual medical/surgical interventions

Menstruation



- Obstacles
 - Lack of sensation
 - Lack of strength & dexterity
 - Spasticity
 - Limited accessibility
 - Lack of WASH facilities
- Challenges faced in terms of management

Menstrual Management



- Supporting in deciding which sanitary product to use like sanitary napkins, sanitary panties, menstrual cups, tampons etc.
- Pad Practice
- Providing adaptive clothing
- Helping them to use aids like knee spreaders
- Teaching them different positions to lessen difficulties if they are using a wheelchair, have spasticity or there is lack of strength in hands.
- Teaching proper disposal of products after the use.
- Tracking of periods and symptoms
- Premenstrual syndrome management
- Adult modeling calm responses

Etiquettes



- Use of Inclusive language
- Do not assume that disability is a tragedy
- While talking adjust posture to be at eye-level
- Make eye contact. Do not avoid/ overlook someone with disability
- Ask before helping
- Speak to the person directly, not to the caregiver or interpreter
- Don't ask questions about a person's disability unless it is brought up by the individual
- Don't lean or hang on someone's wheelchair or physical aid - they are an extension of personal space

Comprehensive sexuality education



- Every child and adolescent require CSE
- Can be personalised based on the learning methods by persons with different disabilities
- Tools that can be used (eg):
 - Suvidha kit
 - Tactile tool kits
 - Video aids
 - Anatomical models
- Methods and materials must be in accessible formats

Terminologies



Avoid	Use
Handicap, cripple, invalid	Person with disability (or disabled person)
Confined to wheel chair , wheel chair bound	Wheel chair user
Mental patient, insane , mad	Person with mental health condition
Able bodied, normal	Non- disabled
Spastic	Person with cerebral palsy
Autistic	Person with autism
Retarded, imbecile, mental handicap	Person with intellectual disability
Dwarf , midget	Person with restricted growth or short stature

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Thank You!

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SURAKSHITH APP

Information, stories on personal safety for children.



BAL SURAKSHA APP

Information on answering children's questions, managing child sexual abuse.



STRI SURAKSHA APP

On crimes against women, laws, interventions and healing techniques.

All Apps in 10 languages, free on android Developed with UNICEF and MeitY (CDAC Hyderabad)