

TETONS: ABLEISM & SEXUALITY

ABLEISM & SEXUALITY

Presented by TETONS



ABOUT US



Alexandria Acor (she/her) serves as a Community Educator and Relationship Consultant at the Utah Parent Center, bringing a year of dedicated experience to the TETONS Healthy Relationships and Sexual Wellness program. In her role, she plans, implements, and expands this vital program for teens and adults with intellectual and developmental disabilities (I/DD)

Committed to self-determination and neuro-affirming practices, Alexandria played a key role in developing the TETONS curriculum that fosters dignity and inclusivity. She actively works to empower the community of neurodivergent folk, with all abilities, ensuring individuals thrive in their relationships and sexual wellness journeys.

ABOUT US



Raven Burton (she/they) is currently working as an intern with TETONS assisting with sex education and research. She is currently pursuing a PhD in psychology with her research surrounding the intersection of sexual identity, behavior, communication, and education. In the future, she hopes to continue her research and education in academia.

She strives to make the world a more comfortable and shame free place with it comes to sexuality. In her free time, she enjoys playing videogames, listening to music, and hanging out with her cat.

AGENDA



1. What is ableism
2. Why is ableism important to know?
3. What is Bias
4. Disability & Sexuality

Ableism



TETONS: ABLEISM & SEXUALITY

WHAT IS ABLEISM?

ABLEISM

- Ableism is a set of beliefs or practices that discriminate against people with disabilities.
- Assumptions made under ableism are...
 - People with disabilities need to be *fixed*
 - Those without a disability are *better*
 - Those with a disability are not worth living
 - Not having a disability is *normal*
- ***Anyone can have ableist beliefs!***
 - Including those with disabilities and those without.

It is important we know how these assumptions show up and how we can challenge them within our own practice and interactions!

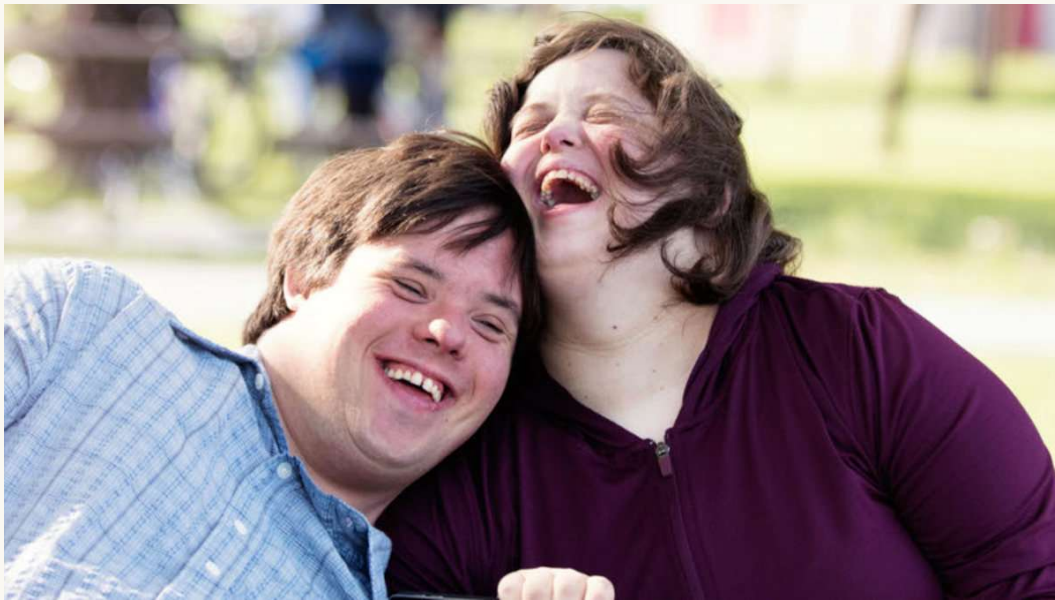
WHAT DOES ABLEISM LOOK LIKE?

- Ableism is pervasive and shows up in every aspect on one's life from interpersonal interactions to organizational policies
- Ableism can show up in a variety of ways
 - Mental Age Theory
 - Benevolent Ableism
 - Paternalism
 - Pretending that people with disabilities do not exist
 - Believing people with disabilities are pretending to receive benefits

WHAT DOES ABLEISM LOOK LIKE – SCENARIO 1

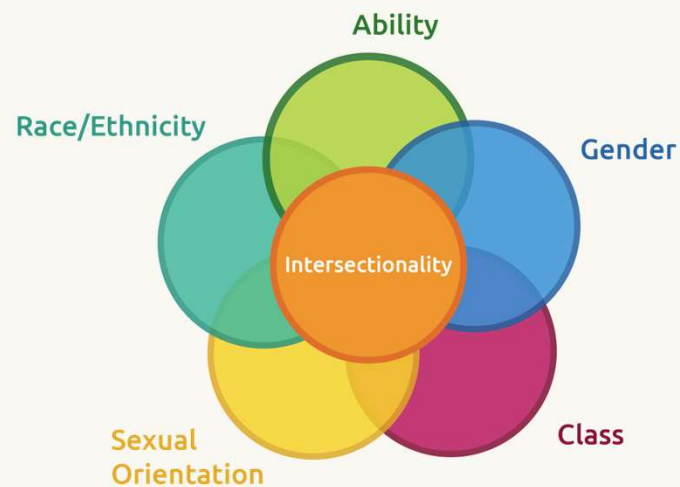


WHAT DOES ABLEISM LOOK LIKE – SCENARIO 2



INTERSECTIONALITY

- Intersectionality is a framework to understand how various often intersecting identity interacts with systems of power.
- Using this approach allows you to take a comprehensive approach to understand your client's unique lived experiences.



ABLEISM & INTERSECTIONALITY - SCENARIO



ABLEISM & TRAUMA

- Trauma is "any disturbing experience that results in significant fear, helplessness, dissociation, confusion, or other disruptive feelings intense enough to have a long-lasting negative effect on a person's attitudes, behavior, and other aspects of functioning." (APA, 2018)
- **Experiencing ableism is traumatic!**
 - Minority Stress
 - Stigma & Discrimination
 - Misdiagnosis or underdiagnosis can be traumatic
 - 1 in 4 adults with autism & 1 in 3 women with autism have reported at least one misdiagnosis in their lifetime (Kentrou et al., 2024).
- Long-term health outcomes

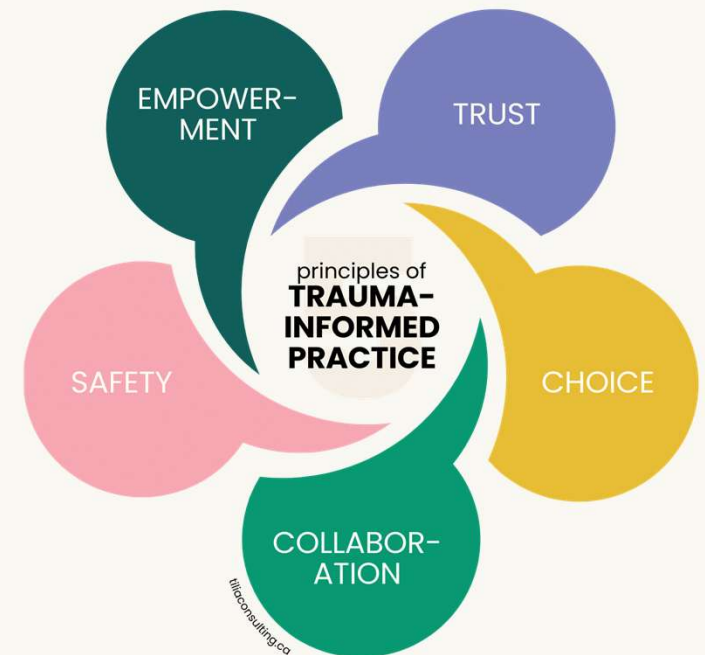
HOW TRAUMA MAY SHOW UP IN THE BODY

- Presenting as mental health "problems"
 - Emotional dysregulation when "triggered"
 - Poor or worsening self-concept
 - Chronic stress
 - Difficulty connecting with community
- Experiencing physical symptoms
 - Chronic pain
 - Substance use
 - Cardiac issues
 - Stomach issues
 - Headaches

TRAUMA-INFORMED

Being Trauma-Informed means...

- Understanding how trauma affects the body & self
- Understanding the signs and symptoms of trauma
- Integrating knowledge about trauma into your practice, policies, and procedures
- Avoid re-traumatizing



6 PRINCIPLES OF TRAUMA INFORMED CARE (1/2)



Safety

Feeling safe in both the physical setting as well as during interpersonal interactions.



Trustworthiness & Transparency

Procedures & practices are done in a way in which decisions are made transparent and consistent. Additionally, these operations must be respectful and fair to build and maintain trust.



Peer Support

Support from others who have a history of trauma or family members.

6 PRINCIPLES OF TRAUMA INFORMED CARE (2/2)



Collaboration

Leveling power differences between staff and client to work in collaboration.



Empowerment

Recognizing and building upon an individual's strengths and lived experiences.



Humility & Responsiveness

Moving past cultural stereotypes and biases that are caused by historical trauma.

TRAUMA & DISABILITY

- The scars of disability are often invisible
- 17.2% of children with a disability reported being a victim of or seeing violence
 - Versus 5.3% of children without a disability (CDC, 2022)
- 18.6% of children with a disability have experienced 2 or more types of stressful events
 - Versus 6.5% of children without a disability (CDC, 2022)
- Language and communication barriers compound these experiences of abuse by making it harder to interrupt, stop, and report the abuse.
- The symptoms of abuse may then present themselves as other issues, such as “behavior management problems”

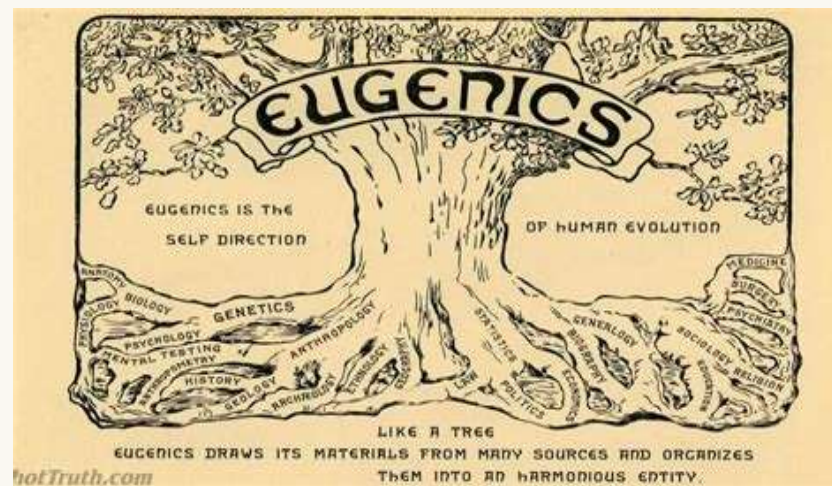
It is important that you refer back to the 6 principles if this does happen.



WHY IS ABLEISM IMPORTANT TO KNOW?

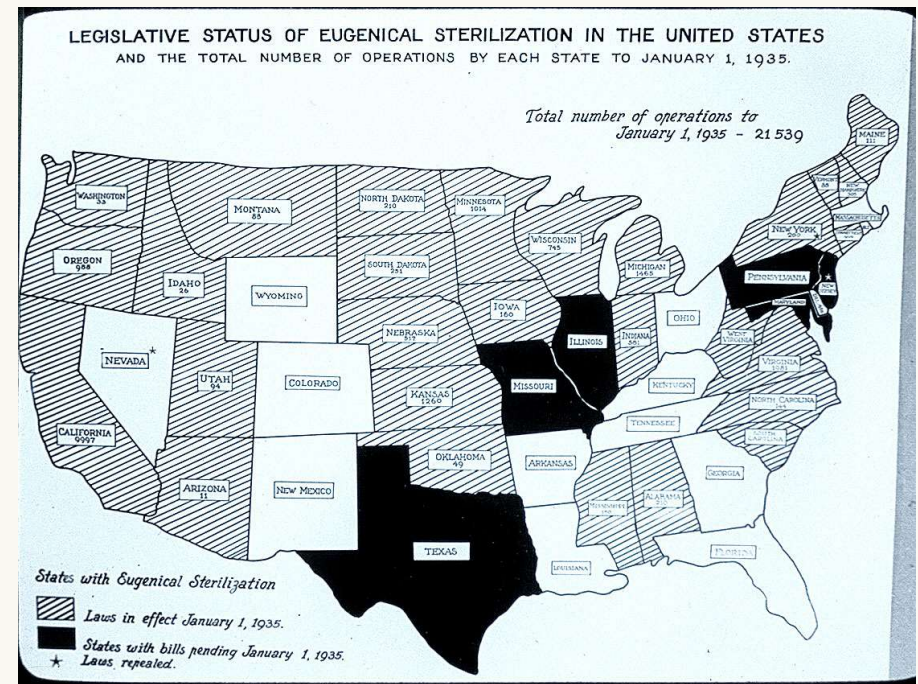
EUGENICS

- Eugenics is the belief that some people should have children and some should not
- These determinants are based on “good genes” but was highly biased favoring one group of people.
 - Those with good genes under Eugenics: white, able-bodied, straight, higher income
- Historically this has led to force sterilization of individuals with disabilities.



EUGENICS CONTINUED

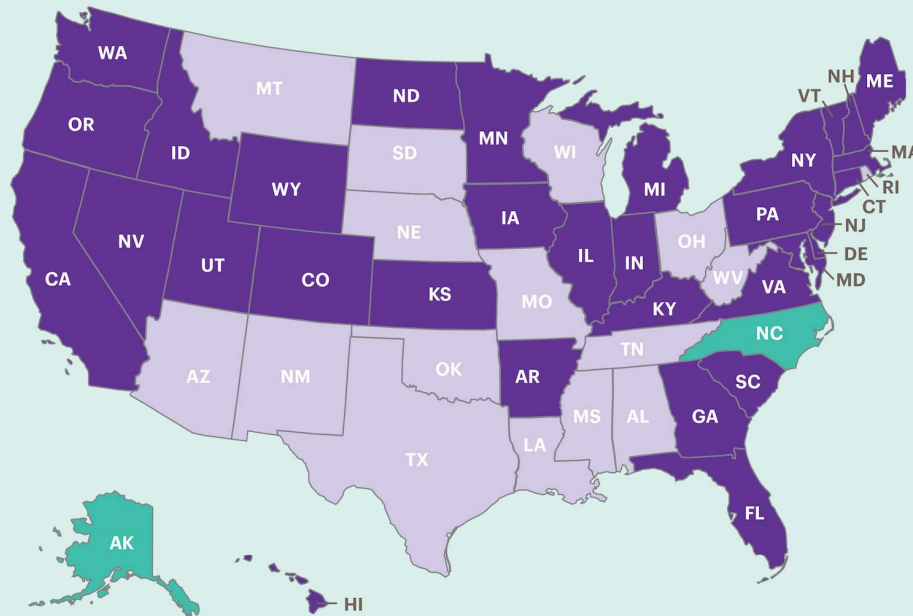
- In 31 states, forced sterilization is still allowed.
 - Only 2 states have banned it.
- In states where it is not legal, caregivers can use long-acting reversible contraceptives (LARCs) to "sterilize" them
- People with disabilities are also often more likely to have their children taken from them
 - 1 in 10 children are at risk of being removed from their home simply because their parent has a disability.



Eugenics Sterilization United States, 1935

(image credit PBS, 2016)

STATES THAT ALLOW FORCED STERILIZATION



- Forced sterilization is allowed.
- Forced sterilization is banned.
- It is not clear if forced sterilizations are allowed.*
**Includes Puerto Rico, Guam, and Virgin Islands*

Image credit (National Women's Law Center, 2021)

HOW ABLEISM SHOWS UP TODAY: REPRODUCTIVE HEALTHCARE

- Doctors may assume their patients do not have disabilities when they do.
- Doctors may assume patients with certain disabilities are asexual/aromantic.
 - May not screen for sexually transmitted infections
 - May assume they cannot give consent
- Lower rates of cervical cancer screenings
- May be unsupportive if patient with disability wants children
- May prioritize support person's opinion over patient



HOW ABLEISM SHOWS UP TODAY: SEX THERAPY

- Assuming a client is asexual/aromantic
- Assuming clients lack the ability to give consent
- Refusing to answer client questions about sexuality
 - Changing the topic
 - Suggesting the client speaks with a support person first
- Dismissing, minimizing, or disbelieving patient experiences around sexuality
- Speaking with a client's support person instead of a client about client concerns around sexuality



HOW ABLEISM SHOWS UP TODAY: SEX EDUCATION

- Not offering the same quality of sex education
 - Removing students with disabilities from sex education
 - Only teaching certain topics and not comprehensive sex education.
- Praising peers without disabilities when they want to date a student with a disability
- Only offering sex education as a response to problematic behavior (example: public masturbation or nudity).
- Teaching based on perceived cognitive ability rather than biological age



Bias

and how we understand it

WHAT IS BIAS

- Bias is the inclination or prejudice for or against one person, a group, or an object.
- Types
 - Explicit Bias
 - Implicit Bias
- Ableism
 - When an individual is negatively discriminated against due to their ability or lack thereof.

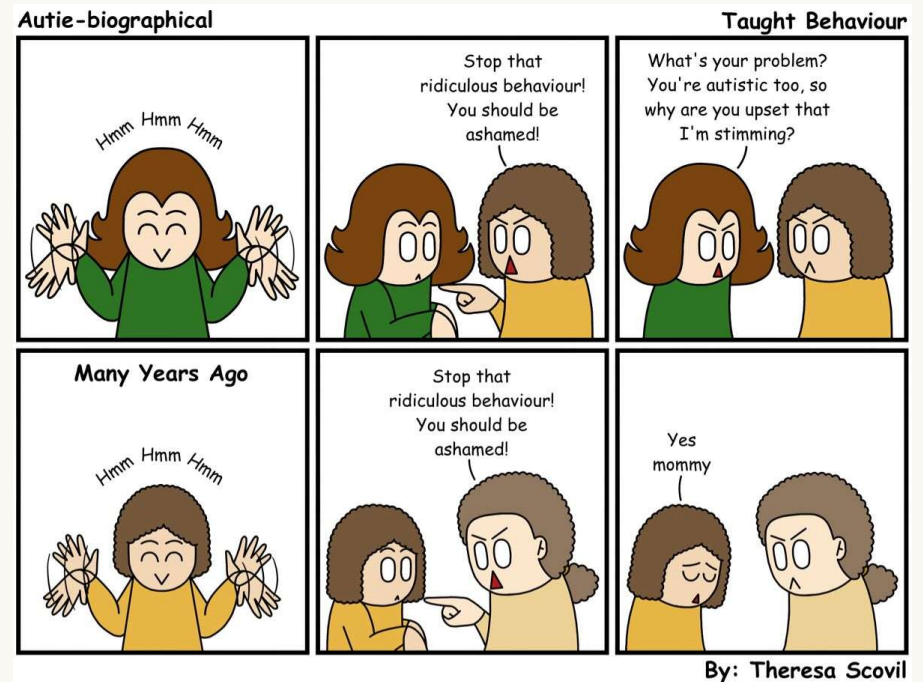


COUNTERTRANSFERENCE

- Occurs when a therapists' own feelings and emotions begin influencing their reactions to a client.
- Can manifest in four* different ways
 - Subjective
 - Objective
 - Positive
 - Negative
- Previous research has found that therapists countertransference experiences are diverse and often swing negative to positive countertransference (Durban, 2014; Harpazi et al., 2025)

UNDERSTANDING BIAS WITHIN CLIENTS: INTERNALIZED ABLEISM

- When someone hears a negative message repeatedly, they may start to believe it is true.
 - This is the case with internalized ableism
- They may believe people may not find them attractive or want to date them.
- May not believe their needs are as important in a relationship.
- May experience diminished autonomy and not know they can say no.
- Can lead to policing or controlling of others' behaviors.



MANAGING BIAS

- There are several ways to manage bias, such as...
 - Becoming Aware
 - Forming Positive identity
 - Education



BECOMING AWARE

- You can be actively aware of your biases (conscious/explicit) or not (unconscious/implicit).
- One of the best ways to challenge these unconscious biases is to become self-aware. You can do this by...
 - Challenging your current thoughts and behaviors
 - Education
 - Joining community

FORMING POSITIVE IDENTITY

- Connecting with a disability advocacy community to learn more about disability culture and history can lead to a positive identity.
- Getting involved with advocacy and community-based organizations that support a positive identity around disability and sexuality.
- Joining support groups to share experiences and connect with others who are similar or learn from those who are different.

EDUCATION

- Provides a space to hear and learn about the experience of others.
 - Hearing and learning from other people with disabilities and their journeys around healing from and understanding internalized ableism.
- Education provides an opportunity to address the misconceptions and learn!
- Education can normalize things that have been historically stigmatized, such as disability and sexuality.

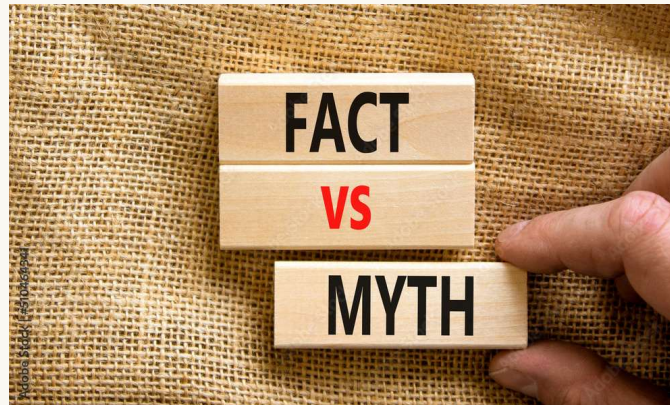


DISABILITY & SEXUALITY

Why it is important we talk about this

FACTS V. MYTHS

- **Myth:** Self-advocates have no interest in sexual or romantic relationships
- **Fact:** Self-advocates have the same sexual desires and gender expression as those who do not have a disability.
- **Myth:** Teaching self-advocates sex education will lead to more inappropriate behavior.
- **Fact:** Teaching self-advocates decreases the rates of inappropriate behavior, aids in better decision making, and increases relationship and social skills.



ABLEISM & DATING

- Many spaces are not built with individuals with disabilities in mind.
 - For example, not being able to go to a bar or club due to these spaces being inaccessible, such as not providing accessible ramps for wheel-chair users.
- Feeling the need to accommodate others and/or feeling unworthy due to the added labor which may result in people with disabilities feeling like they are a burden to others.
- May experience a mismatch in expectations when dating other individuals with disability.
- Not wanting to date individuals with certain disabilities.



ABLEISM & DATING - SCENARIO



ABLEISM & SEXUALITY

- Many people with disabilities have negative experiences with school sex education
 - Found it unhelpful, harmful, and had little to no discussion about sexuality among people with disabilities.
- Many feel they do not deserve sexual well-being due to internalized ableism and shame.
 - This is chronic and has its roots in societal norms and expectations
- A lack of a proper sex education and guidance, puts undue burden on individuals with disabilities to find their own information.

WHY SEX EDUCATION IS IMPORTANT

- Individuals with disabilities have higher vulnerabilities to abuse, partially due to a lack of education.
 - Women with developmental disabilities have experienced higher rates of sexual assault (68% - 83%) than those without disabilities
 - Children with disabilities are 3.4 - 4 times more likely to be sexually abused than children without
- Sex education decreases these rates of abuse by teaching the necessary skills to mitigate abuse

SEX EDUCATION IS NOT ONLY ABOUT SEX

- Comprehensive sex education goes beyond the behavior and touches on diverse topics including...
 - Anatomy
 - Healthy platonic and romantic relationships
 - Communication & consent
 - Proper hygiene
 - Development of positive identity
 - Rights and agency
 - Online and in person safety



What is TETONS?

A **HEALTHY RELATIONSHIPS AND SEXUAL WELLNESS CLASS** FOR TEENS AND ADULTS WITH I/DD

1. TETONS VALUES **HEALTHY, SAFE, AND LEGAL** BEHAVIORS AND RELATIONSHIPS
2. **COMPREHENSIVE SEXUALITY EDUCATION**
3. SELF-DETERMINED SEXUAL WELLNESS
4. NEURODIVERSITY AFFIRMING APPROACH
5. EDUCATION FOR CAREGIVERS AND PROFESSIONALS

CONTACT & FUTURE TRAININGS



Waitlist
TETONS
SELF-ADVOCATES, CAREGIVERS
AND PROFESSIONALS

TETONS is a comprehensive social skills class mapping a road to relationships, healthy sexuality and self-determination for individuals with disabilities.

The course material and class environment is designed with total accessibility in mind. Our program is a safe, inclusive, and judgment-free space.

Everyone deserves access to comprehensive, medically accurate sexual health information for relationships with healthy outcomes.

REGISTER HERE:
bit.ly/2026TETONSWaitlist

Waitlist Receives Priority Registration

Contact us!
For more information: utahparentcenter.org/TETONS
Questions? Email: TETONS@utahparentcenter.org

The poster features four hexagonal photo cutouts: a man in a red jacket and green hat, a couple embracing, a man and woman smiling, and a woman in a white shirt. It also includes the TETONS logo at the bottom.

Contact us at TETONS@utahparentcenter.org



For More
Information



To Register Scan
Here

REFERENCES

For References
Scan Here

