

Treating Intellectually Disabled Adolescents with Sexual Behavior Problems

Kevin Creeden, M.A., LMHC

The Whitney Academy

Defining the problem

- ID, LD, and DD populations are a widely diverse group of individuals
- DSM-5: "Intellectual Disability" ICD-10 "Intellectual Developmental Disorder"

Criterion A: "deficits in intellectual functions"

- reasoning
- problem solving
- planning
- abstract thinking
- judgment
- academic learning
- learning from experience

Defining the problem

Criterion B: “deficits in adaptive functioning”

Limited functioning in one or more activities of daily life:

- communication
- social participation
- independent living, across multiple environments (home, school, work, community)

Criterion C: “onset of intellectual and adaptive deficits during the developmental period”

Sexual Behavior Problems and Youth with ID

Gewirtz-Mayden & Finkelhor (2020) found that 76% of males and 71% of female victims of sexual abuse were abused by other juveniles.

Estimates of how many of these children have intellectual disabilities is unknown with research studies varying from 4-40%.

Hackett, et al (2013) found that 38% of his sample of 700 children exhibiting Harmful Sexual Behaviors had intellectual disabilities

Thom, et al (2017) found the incidence of sexually inappropriate behavior among intellectually disabled adults to range from 15-33%

Difficulty with
research

Different settings in which
behavior occurs

Definition of harmful or
problematic sexual
behavior

Reporting and responses

Adverse experiences

Individuals with ID are at greater risk for experiencing sexual abuse and other types of maltreatment than non-disabled youth (Blasingame, 2005; Horner-Johnson & Drum, 2006)

Incidence of sexual victimization for individuals with ID may be as high as 80% for women and 50% for men

Maltreatment and Neurodevelopment

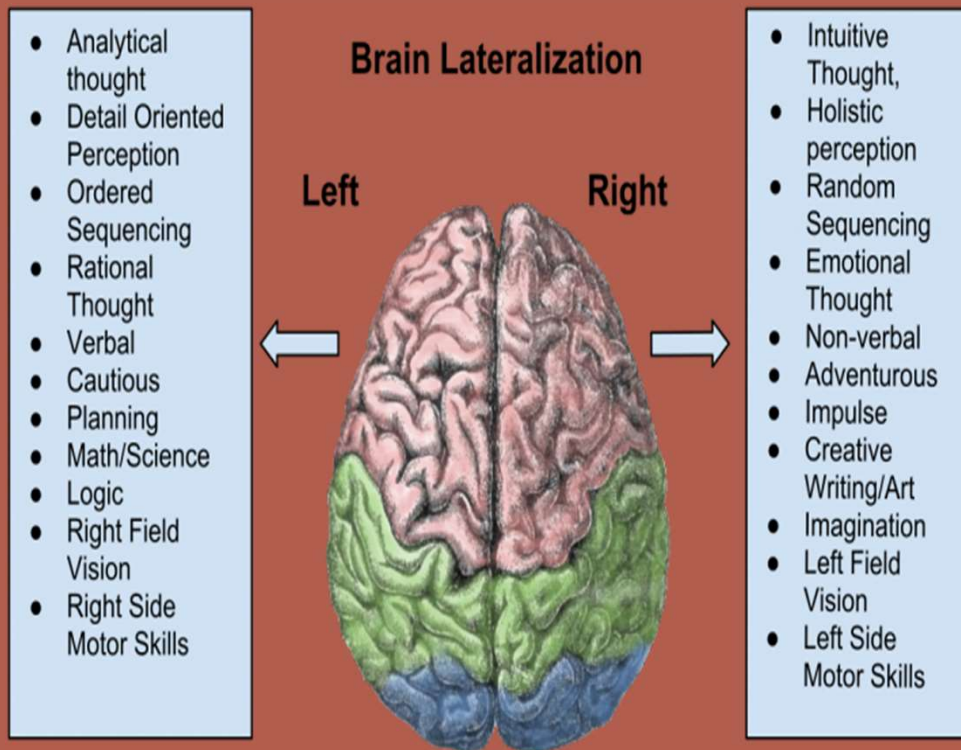
Increased limbic irritability

Decrease left hemisphere development

Decrease left/right hemisphere integration

Limited activation of cerebellar vermis in self-regulation

Teicher & Samson, 2016



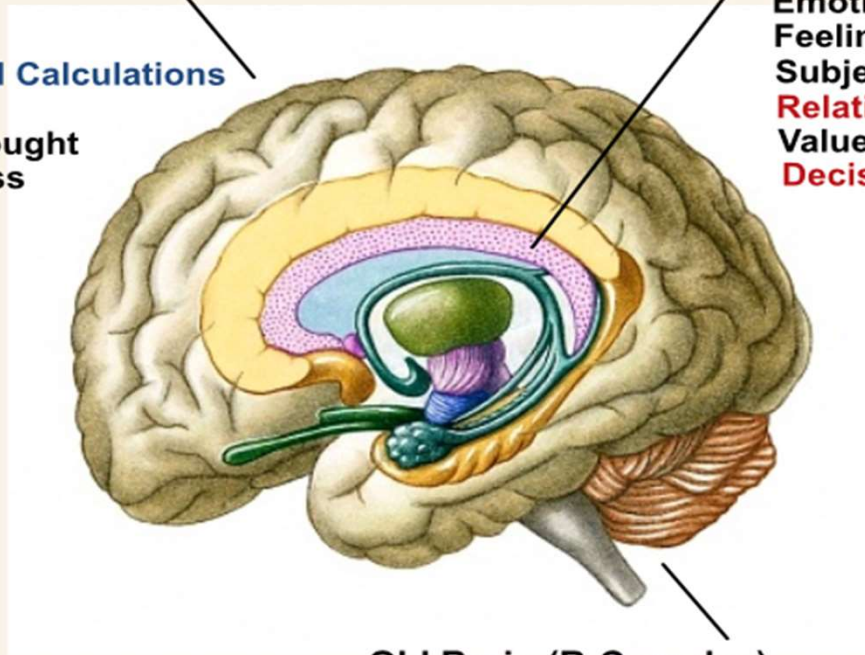
Triune Brain Organization (Dr. Paul MacLean)

New Brain (Neo-Cortex)

Reasoning
Analysis
Mathematical Calculations
Language
Abstract Thought
Consciousness

Middle Brain (Limbic Complex)

Emotions (Love, Fear)
Feelings (Trust, Loyalty)
Subjective Senses (Purpose, Duty)
Relationships
Value Judgements
Decision Making



Old Brain (R-Complex)

Breathing
Circulation
Digestion
Movement
Reproduction
Instinct

Families and ID Adolescents

- roughly 40% of parents with ID children identify them as a significant challenge or “burden”
- between 14% and 39% of children with ID also have diagnosed emotional difficulties
- any family emotional problem increases the risk for inconsistent, coercive, or harsh parenting
- the dynamics between the individual, family, and social context either supports or undermines positive outcomes

Assessment Issues

- Individuals with ID still require a comprehensive assessment
- Obstacles:
 1. Language processing difficulties
 2. Reading difficulties
 3. Attention and focus
 4. Frustration tolerance

Assessment Issues

Responses

- Need for shorter sessions
- Non-language-based assessment tools
- Need to read instrument questions or explain language
- Need to structure sessions to switch up demands

Consider neuropsychological assessment

Need for adaptive behavior assessment (e.g., Vineland, ABS)

Assessment

Adaptations to current assessment tools are warranted

Our Assessment

- Personality assessment (MACI)
- trauma inventories (TSCC; TSI-2)
- executive functioning (Wisconsin Card Sort-64; Tower of London)
- projectives (Incomplete Sentence, Robert's Apperception)
- Sexual Knowledge and Attitudes (ASK)
- PROFESOR (Worling, 2017)
- Vineland
- Childhood Autism Rating Scale (CARS-2)
- Quality of Life Survey

Considerations

Deficits that are specific rather than global

Narrow social engagement and more limited social understanding

Assessment of sexual knowledge and constraints for "healthy" sexual expression

Considerations

- Use of social media, internet, and pornography use
 - Parent/child education
 - Parameters for use
 - Balance between internet social interactions and “real life” activities and interactions
 - Resource: Good, B. and Fang, L. (2015) *Promoting Smart and Safe Internet Use Among Children with Neurodevelopmental Disorders and Their Parents*, *Clinical Social Work Journal*, DOI 10.1007/s10615-015-0519-4.

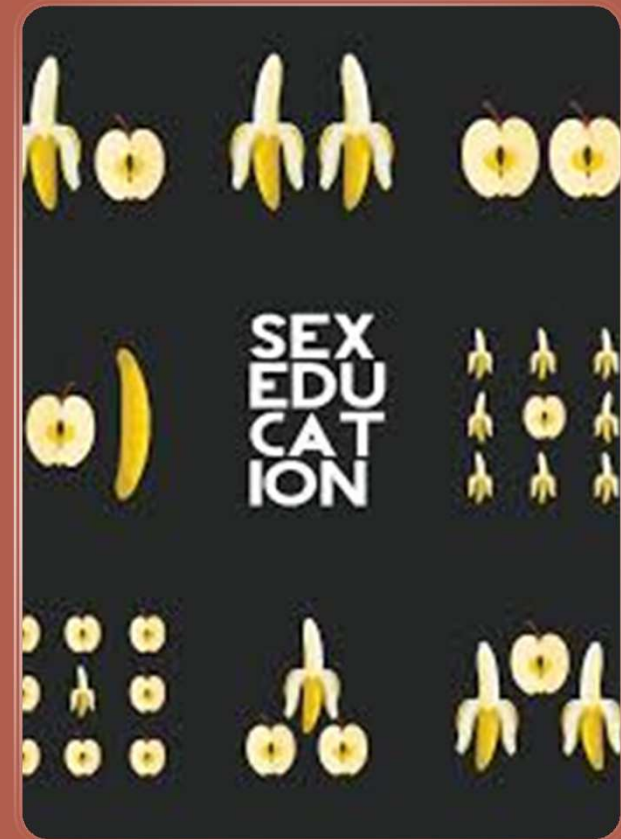
Assessment for Sexual Knowledge and Interests

Life Facts Sexuality Education: Stanfield, (2021)

Socio-Sexual Knowledge and Attitudes Assessment Tool (SSKAAT-R) : Lunskey, et al (2007)

General Sexual Knowledge Questionnaire (GSKQ): Talbot and Langdon (2006)

Assessment of Sexual Knowledge (ASK): Galea, et al., (2004)



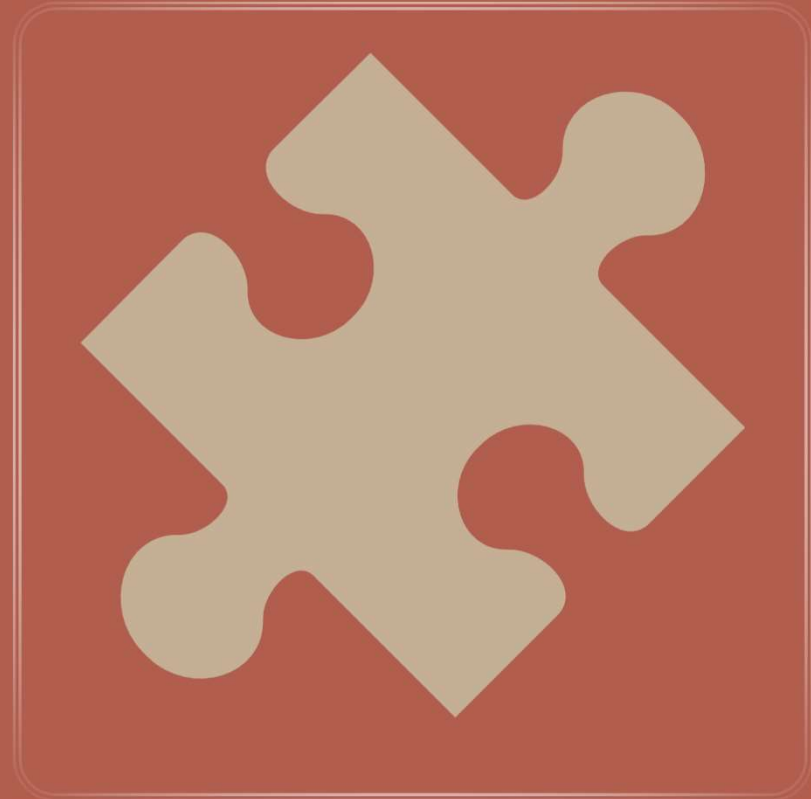
What about ASD kids

Question

- Do treatment approaches with ID youth apply to youth with Autism Spectrum Disorder

Answer

- It depends



Defining Characteristics of ASD

Difficulties in:

- “Serve and return” social interaction
- Language and communication
- Lack of flexibility: restricted interests, behaviors

Distinctions for ASD Youth

- Some research points to differences between ASD youth who are verbally and physically aggressive; just physically aggressive; and non-aggressive
- Those that are V & P aggressive tend to experience higher levels of bullying from peers and other types of victimization
- ASD youth with only physically aggressive behaviors show higher degrees of frustration with inability to manage social interactions
- Non-aggressive ASD youth may have greater social skills or are using avoidance and isolation to manage difficulties

ASD Variables

- Low functioning or high functioning ASD
- Level of verbal skills
- Areas of competency
- Support and education for parents
- Access to peer social groups

ASD enhanced risk for HSB

- Difficulties in “serve and return” (reciprocal) interactions leads to impairment in self-regulation capacities
- Peer relations difficulties lead to social isolation or relationships with younger peers
- Difficulties with accurately reading non-verbal cues creates problems with issues involving consent

ASD enhanced risk factors for HSB

- Tendency towards fixed interests and repetitive behavior can make youth more prone to compulsive sexual behaviors such as masturbation and pornography use
- Not being able to read non-verbal cues makes it difficult to understand the impact of their behavior on others
- Difficulty developing empathy

Treatment Foundation

- Increase capacity for interoception: getting back in touch with your body
- Expand the adolescent's emotional vocabulary
- Enhance "attunement"



Treatment Goals

Self-Regulation

Enhanced capacity for accurately
recognize other's emotions,
intentions

Adaptive Problem Solving and
Social Decision Making

Personal Agency

Treatment Goals

challenging cognitive
assumptions

- about themselves
- about relationships
- about gender roles

sex education

sexual behavior and the law

Treatment

- Considerations

- organize treatment into brief (10-15 minute) segments
- **repeat, repeat, repeat**
- vision is our most dominant sensory area
- experience creates emotion and emotion creates meaning
- movement and action enhance learning and memory

Basic concepts with providing interventions

- ☑ Avoid complex instructions
- ☑ Develop visual and easy to recognize progress indicators
- ☑ Adjust your pace
- ☑ Create opportunities for “positive failure”
- ☑ One question or idea at a time
- ☑ Give examples and stories to generalize learning
- ☑ Set achievable goals
- ☑ Give opportunities for practice

Basic concepts cont'd

- ☑ Give **more** opportunities for practice
- ☑ Test for comprehension
- ☑ Test for retention
- ☑ Use simple visual cues and descriptions
- ☑ Use visual cues and colors to identify progress and success

Treatment

- Break down information into smaller “bytes”
- Promote personal agency and decision-making
- Use repetition and review
- Use rhyme and raps as a means for enhancing memory



Treatment

- Use stories and metaphors to promote key concepts
 - Carol Gray: *Social Stories* (2015) stories written specifically for ASD youth
 - The *Social Stories* concept has now been expanded to include video

Bottom-Up

- Sensory Interventions
 - Body based:
 - deep pressure (weighted blankets, use of touch)
 - movement (rocking, spinning, walking, Brain Gym)
 - proprioception: ("power sitting", exercise bands)



Right-
hemisphere
activated

use of rhyme, rhythm, music, in
conveying information

use of movement, art, music to
identify and convey emotions
(teach an affective language)

using role-play and psycho-drama
for education, examining cognitive
assumptions, exploring trauma,
developing new narrative

⓪ Anger ■ Happiness
⓪ Hatred ■ Goodness
A Love ■ Evilness



Jeremy B.







Good Way
Model (Ayland &
West, 2016):
New Zealand



Keep Safe
(Malovic,
Rossiter, &
Murphy, 2018):
UK

Some Specific Treatment Groups for ID
Adolescents with Sexual Behavior Problems

Structure



CBT in overall treatment approach



Group treatment model with a parallel group for parents/care-givers



Periodic joint meetings with parents and youth



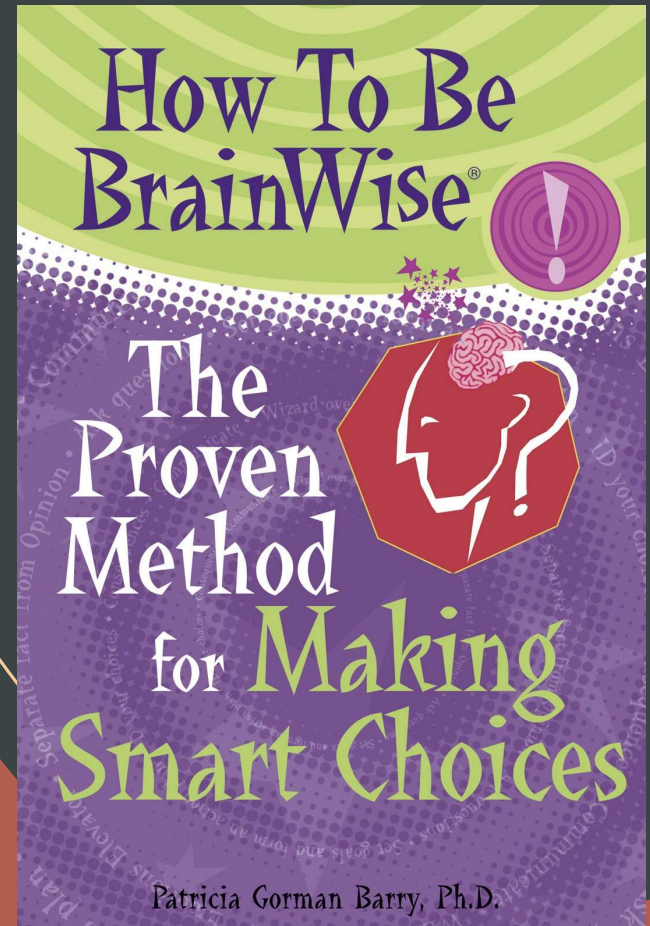
Manualized

Resource

- *Emotion Regulation Skills System for the Cognitively Challenged Client: A DBT-Informed Approach*
(Brown, 2016)



Barry, P. (2008). BrainWise:
A Guide for Building
Thinking Skills in Young
People. [www.brainwise-
plc.org](http://www.brainwise-plc.org).



ASD Treatment options

- Use of individual treatment and then dyads before moving into group treatment modalities
- Neuro-feedback has been found useful to treat more repetitive and compulsive behaviors with ASD populations
- *Skillstreaming the Adolescent* (Goldstein & McGinnis, 2000)

Teaching skills to youth with ASD

- Important to recognize the specific aspects of the youth's processing: what is their preferred way to get information
- Important to recognize the role that ASD clients' sensory processing play
- Solomon, Pantalone, & Faja (2019): Information-Motivation-Behavior model (I-M-B).
- Dekker, et al. (2014). Tackling Teenage Training evaluated Dutch sexuality training program for ASD youth

Teaching skills to ASD adolescents

- Adding the voice of older ASD clients can be highly effective in conveying practical information and increasing motivation
- Group treatment that focuses on managing personal space, developing social scripts, recognizing and accurately reading social cues and allows for active practice of these skills

Trauma Narrative and Transformation

- This key element of trauma informed treatment is often an obstacle for ID and ASD clients
- Make “narrative” available in many modalities: music; collages; video; raps/poems
- Build narrative over the course of treatment

The Batman Group

Young Bruce Wayne: Why do we fall...to pick ourselves up, Flashbacks, and life changing events (death of parents) leads to feelings/thoughts, decisions and behaviors

<https://www.youtube.com/watch?v=suwR35mwbpU>

Will to act: Bruce Wayne goes to train with league of shadows, his anger makes him strong, but also makes him vulnerable

<https://www.youtube.com/watch?v=uiaRYQlsjy4>

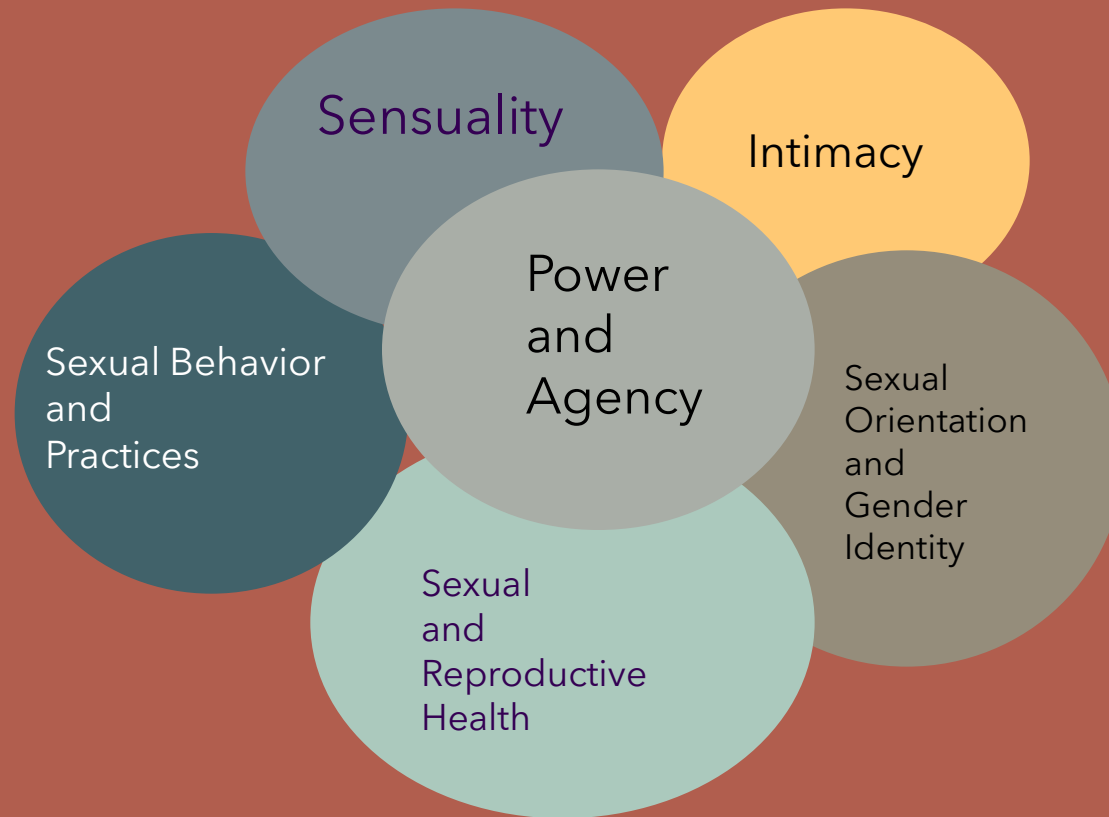
Prison Escape: Bruce Wayne is in prison. The prison has an opening in the top that allows them to see freedom, but never reach it. He tries climbing with the rope, but it prevents him from making the jump and getting out. He is only able to make the jump after he lets go of the thing he thinks will keep him safe.

<https://www.youtube.com/watch?v=sZmvQ5Qc9Rs>

Joker's social experiment: Joker places bombs on two ferry's and falsely provides them with two choices...blow up the other boat or you will be blown up.

https://www.youtube.com/watch?v=K4GAQtGtd_0

What is Sexual health





Treatment
Elements

Discuss realistic means
for sexual expression
for parents and youth

Regularly set up times
to answer
“unanswered”
questions

An abstract graphic design featuring a large, semi-transparent red shape on the left side. Within this red shape is a black, teardrop-shaped oval with a white outline. A thin, curved orange line arches over the red shape. The background is a light gray gradient with faint, concentric white circles centered behind the red shape. The email address 'kcreeden@whitneyacademy.org' is printed in black text at the bottom left of the red shape.

kcreeden@whitneyacademy.org