#### Hamilton, C. (2002). Doing the wild thing: Supporting an ordinary sexual life for people with intellectual disabilities. *Disability Studies Quarterly*, *22 (4)*

Keywords: emotional and sexual life, intellectual disability, social and psychosocial support.

This paper is the result of a series of interviews with support staff in specialised care homes for people with intellectual disabilities in New Zealand. The aim of the interviews was to understand the ways in which people with intellectual disabilities perceive and express their sexuality, and the ways in which organisations working with these people can give them support.

**METHOD**

Two female employees of a support organisation for people with intellectual disabilities were interviewed ; one is a lawyer, the other is a sex education teacher.

**RESULTS**

1) The interviews showed a lack of information on sexuality in people with intellectual disabilities. They did not necessarily know about protection against sexually transmitted diseases (for example condoms). Constraints emerged at different levels : in expression of sexual orientation within the family, in access to places within the care home in which to have sex.

2) The interviews showed parents’ desire to control the sexuality of children with intellectual disabilities. By invoking their child’s lack of autonomy and responsibility for his own acts, the parents may wish to prohibit their sexuality. When a desire for sex is apparent, the parents can then ask that the child be moved to a new home, to prevent sexual activity.

3) The interviews showed that parents have an extremely important role vis-à-vis the sexuality of their child (or adult with intellectual disability). The support of parents in enhancing sexual knowledge (for example bringing them to an information centre) is a key factor in improving their sex lives. Conversely, a lack of parental support leads to strong anxiety in children living in care homes. They may be afraid of losing ties with their family, of disappointing their parents and not meeting expectations, and so they accept this lack of support.

4) The support of staff is sometimes in conflict with the regulations of the care home. An example of this is given here. A member of staff used funds from the care home to pay for a sex worker for one of the residents. This person was fired. Broadly speaking, staff can sometimes feel themselves under threat of warnings or penalties if they do not respect the rules of the residence, rules which limit the sexual behaviour of residents.

5) For the interviewees, living in a care home was a significant obstacle to the expression of sexuality and to its existence. Care staff of the residence are essentially there to provide meals for the residents ; sexuality is not an issue where support is provided by staff. The fact that all beds are single in the care home is a reminder that residents are perceived as single, not part of a couple. Group living, in a care home, restricts the possibility of meeting sexual partners. One of the interviewees gave an example of this. She explained that trips outside the care home take place in groups, at specific times, which makes it difficult to have meeting times with potential sexual partners.

6) Within the care home, according to the interviewees, information on sexuality is provided. For example, sexual practices (masturbation) and pictures of genitalia are shown and discussed by staff at group sessions held for this purpose.

**RECOMMENDATIONS**

Based on the interviews, the author made several recommendations. Firstly, she advised that private spaces be set up for residents to have sexual relations in, rather than having to hide (for example in public toilets, as was reported by one of the interviewees). Secondly, sex education programmes should be set up for people with intellectual disabilities, as should access to discussions with professionals on the topic. Thirdly, access to sex workers should be made possible. Fourthly, care workers should be better trained to inform on sexuality.

This document stems from a project by the Resource Center Applied Research and Disability and its partners: the CeRHes (Centre Ressources Handicaps et Sexualités), CH(s)OSE (Collectif Handicap et Sexualité OSE), CCAH (Comité National Coordination Action Handicap). It was written by Aurélien Berthou (doctoral student in sociology at the CERLIS, Centre de recherches sur les liens sociaux).