

What is the attitude of Greek Special Education Teachers towards the sexuality of people with intellectual disability?

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Abstract – There are no significant studies regarding the views and attitudes of Greek Special Education Teachers towards the sexuality of people with intellectual disability (ID) in the Greek bibliography. This paper aims at enlightening some aspects of this subject.

105 teachers working at schools in Thesprotia Prefecture (Greece) have been the sample of this paper. Data collection was done by the use of questionnaire and the statistical analysis was done with SPSS (version 21.0).

The research showed that Greek teachers have a positive attitude towards the issue of sexuality of people with intellectual disability. However, it was noticed that a great number of false myths and stereotypes that prevail in the Greek teaching community seem to affect their views regarding the subject under investigation.

Additionally, it seems that the shaping of teachers' positive attitude towards the sexuality of people with intellectual disability is significantly influenced by various demographic factors.

Keywords – Intellectual Disability, Sexuality, Teachers Attitudes

I. INTRODUCTION

The recognition of the human right to the expression of their sexuality has always been a long road, which has been even harder for people with intellectual disability. The eugenics movement, from 1880 till 1940 imposed the staying in dorms by gender, the sterilization of thousands of intellectually disabled people in dozens of states in the USA and prohibited these people from getting married. Several people's attitude changed later, as a result of the assertion of political rights and the sexual revolution that was introduced by various movements throughout the world in the '60s [17]. From 1990 onwards, there have been research studies regarding the private life of people with intellectual disability, such as the issue of sexuality [30].

Sexuality, though a wider notion, is often mistakenly identified with sexual intercourse. It includes reproduction, as well as many aspects of social life, such as ideologies and practices [32]. The World Health Organization [38] believes that sexuality is expressed through fantasies, desires, beliefs, attitudes, values, behaviors, practices and that its formation is a result of the interaction of biological,

psychological, social, economic, political, cultural, juristic, historic, religious and spiritual factors.

The way of understanding sexuality does not cease to be a social construction [34]. As a social phenomenon, therefore, it produces practices, shapes sexual desires or feelings and defines the sexual behaviors as acceptable or not within a social and historical framework [36, 14].

Similarly, defining disability is a social construction too. In other words, we should not disregard the fact that each society significantly determines the meaning and content that will be attached to the term "disability" through social discrimination and stereotypes of each social framework [30]. Sexuality is a major quality of life issue for people with intellectual disability, who require more possibilities, in order to express their sexual choices [3]. They invest in sexual relations emotionally, they like intimacy, the feelings of love and companionship, but they find it too hard to deal with them [30]. Certainly, there are differences in their sexuality depending on their Intelligence Quotient and their individual characteristics, but this is not to say that they are different to the other groups of people, since there are such differences among people with "typical" development too. [26]. For example, men with intellectual disability show greater sexual interest compared to women with the same kind of intellectual disability [28]. Similarly, women with intellectual disability express their sexual interest along with social terms, they show feelings of love for their sexual partner and express interest in marriage and family [5].

Several studies have shown that the formation of sexuality of people with intellectual disability is significantly affected by their teachers' attitude towards this matter [24]. In particular, the sexuality of people with intellectual disability is most commonly faced positively by today's teachers, compared to the past, when there were more negative attitudes [12, 24]. It is noticed in various studies that young age, high education level and teachers' specialization are important factors in developing positive attitudes towards the right of sexuality of people with intellectual disability [24]. The sexual behavior of people with intellectual disability is not always a matter of personal choice. The sexual stereotypes that prevail for these people push them to the margins of society [39]. According to

widespread myths, people with intellectual disability appear to either have uncontrollable libido and brutish sexuality or be asexual [4]. Several stereotypes and prejudices regarding the sexuality of people with intellectual disability are based on false conclusions drawn from “inappropriate” behaviors of these people, such as public masturbation. However, it is possible that such behaviors do not occur as a result of excessive sex drive, but, rather, as a result of an attempt to attract others’ attention or cover their feelings of boredom and depression [35]. In a Paransky and Zurawin research [29] regarding the reproductive capacity of people with intellectual disability, it is stated that these people have limited reproductive capacity if they have $IQ < 70$, whereas it becomes almost impossible if they have $IQ < 50$. Similarly, in another research, it was noticed that the difficulty or lack of orgasm is a common problem for people with intellectual disability [22].

Another stereotype regarding the sexual behavior of people with intellectual disability is the belief that these people show sexual aggression and that they often commit sexual crimes, compared to rest of the people. However, this belief has been negated by recent research. At this point, it is important to mention that people with intellectual disability are vulnerable to victimization [15, 11]. People with intellectual disability are not sufficiently aware of actions that put their mental and physical integrity at risk, such as rape or harassment. They do not know how to articulate a denial and how to protect themselves from sexual proposals by saying “no” [21, 23].

Homosexual behavior has also been noticed among people with intellectual disability. This occurs mainly as a result of these peoples’ institutionalization. In a research, people with intellectual disability themselves were asked to express their opinion about sexual behaviors and it was noticed that 86% of them rejected homosexuality [33, 1].

Behavior towards people with intellectual disability often raises ethical dilemmas, such as the non-consensual sterilization. The human rights of people with intellectual disability have been frequently violated from the time of the phrase “three generations of imbeciles are enough”, which was uttered in a USA court during the sterilization announcement, in 1927, till today [19]. It is, therefore, important to sexually educate people with intellectual disability; this education should not only include relevant information and knowledge, but also prepare them for sexual abuse, unwanted pregnancies and sexually transmitted diseases [37]. People with intellectual disability find it hard to buy and use condoms without relevant training [13]. Unfortunately though, the myth that sexual education for people with intellectual disability is useless or even harmful, since it may “push” them to dangerous sexual experimentations, is still prevailing [18]. Within the framework of the above, a research was carried out in order to investigate the attitudes of Greek Special Education Teachers regarding the sexuality of people with intellectual disability. Specifically, we made an attempt to record the views of Special Education Teachers regarding the sexuality and the related to this myths that prevail about people with intellectual disability. Furthermore, we studied

the views of Special Education Teachers regarding the necessity of people with intellectual disability to be sexually educated.

II. METHOD

Instrument

Data collection was done by the use of questionnaire, consisting of 23 questions. 11 questions were related to the sample’s demographics. The remaining 12 questions investigated the attitudes and views of Special Education Teachers towards the sexuality and the most widespread myths and stereotypes that prevail in the Greek society regarding the sexuality of people with intellectual disability. 9 out of the 12 were Likert-type questions on a 5-point scale (1-5), where 5 corresponded to complete agreement with the statement, whereas 3 were multiple response questions. At first, a pilot implementation of the questionnaire was conducted, recording questions that led to answers with high standard deviation. After excluding those questions, we developed the final version of the questionnaire, which was used in this research.

Participants

150 Greek teachers constituted the sample. 47 of them were Special Education Teachers working with students with intellectual disability and these teachers constituted the target group. The remaining 58 were teachers working with students with “typical” development and they constituted the control group. All participants were working at schools in Thesprotia Prefecture (Greece) during the school year 2015-2016.

Data Analysis

SPSS for Windows (version 21.0) was used for the Statistical Analysis of the research data. Variables were analyzed with the descriptive statistics method, calculating the descriptive elements mean, standard deviation and range. In order to investigate the independence of two categorical variables we used the chi-square (χ^2) control.

Nonparametric criteria were used to investigate means difference, since the regularity audit showed that data do not follow normal distribution ($p < 0.05$). In particular, the statistical criterion that was used on Special Education Teachers to find whether data is regular or not was the Shapiro-Wilk one, because the sample size was $n = 47 < 50$. As for teachers working with students with no disability, the Kolmogorov-Smirnov criterion was used, since the sample size was $n = 58 > 50$. Therefore, in order to investigate the means difference between two categories in terms of a dependent variable we used the nonparametric criterion Mann-Whitney’s U. In cases where there were more than two categories (e.g. the variable “age” has 4 categories: 23-30, 31-40, 41-50, over 51) we used the nonparametric criterion Kruskal-Wallis. In order to analyze multiple response questions, data was entered creating dichotomous variables (0 and 1 data) for each answer (Multiple Response Analysis). The significance level p value was set to 0.05.

III. RESULTS

23.4% of the Special Education Teachers failed to



precisely define the term “sexuality” in the relevant question. An increased 25.9% of the teachers working with typically developed students failed to give a proper definition.

Special Education Teachers seem to agree with the statement “young people with intellectual disability have the right to get married” (M=3.72). On the other hand, fewer teachers that work with students with typical development seem to agree (M=3.58). Special Education Teachers express a neutral position in the statement “people with ID show stronger sex drive than the general population” (M=3.02), whereas teachers agree with this statement (M=3.28). Special Education Teachers disagree with the statement “people with ID have no sexual interests” more strongly (M=1.87) than teachers (M=2.28). Additionally, in this particular question, there is a statistically significant difference between the answers of Special Education Teachers and teachers (sig.=0.017 < 0.05). Special Education Teachers also disagree with the statement “people with intellectual disability are more susceptible to committing dangerous sexual crimes compared to the general population” more strongly (M=2.40) than teachers (M=2.67).

Special Education Teachers disagree with the statement “people with intellectual disability display homosexual behavior more often, as an inherent characteristic” more strongly (M=1.89) than teachers (M=2.13). Special Education Teachers disagree with the statement “people with intellectual disability are more capable of having an orgasm and sexual intercourse than people with no disability” more strongly (M=2.43) than teachers (M=2.69). Similarly, in the statement “when people with ID masturbate intensely and in public, they mostly reveal their intense sex drive” Special Education Teachers express stronger disagreement (M = 2.79) than teachers (M=2.95).

The statement “sexual education will increase sexual activity of people with intellectual disability” finds both Special Education Teachers and teachers in even disagreement (M=2.64 and M=2.66 respectively). Special Education Teachers seem to agree with the statement “sexual education of people with moderate or mild intellectual disability could help them gain knowledge and skills, so that they live their sexuality as healthily and safely as possible” more strongly (M = 4.34) than teachers (M = 4.22).

The variable “seminar attendance on sexuality” seems to have a significant statistical effect on the views of Special Education Teachers about the statement *sexual education will “awaken” the sexual activity of people with intellectual disability* (sig. = 0.039 < 0.05). In particular, Special Education Teachers who have attended seminars on sexuality express stronger disagreement with the above statement (M=2.08) compared to Special Education Teachers who have not attended such seminars (M=2.76). Additionally, the level of studies of Special Education Teachers has also seemed to have a significant statistical effect on their views about the statement *sexual education will “awaken” the sexual activity of people with intellectual disability* (sig. = 0.028 < 0.05). In particular, Special

Education Teachers with high level education (M=2.27) clearly disagree with this statement.

Working experience has a great statistical effect on the views of Special Education Teachers regarding the statement *people with intellectual disability are more capable of having an orgasm and sexual intercourse than people with no disability* (sig.=0.027 < 0.05). In particular, Special Education Teachers with a working experience of 6 to 10 years disagree more strongly with this statement (M = 2.00) compared to Special Education Teachers with greater working experience. Similarly, the working experience of Special Education Teachers has a great statistical effect on their views regarding the statement *public masturbation of people with intellectual disability reveals their strong sex drive* (sig. = 0.001 < 0.05). Special Education Teachers with a working experience of 6 to 10 years disagree more strongly with this statement (M = 2.08) compared to all other Special Education Teachers.

As far as age is concerned, it seems to have a significant statistical effect on the views of Special Education Teachers regarding the positive role of sexual education on people with intellectual disability (sig. = 0.031 < 0.05). Younger Special Education Teachers, aged between 23 and 30 years of age, agree with this view more (M = 4.72) than older Special Education Teachers.

Having a relative or friend with intellectual disability among their environment, seems to have a significant statistical effect on teachers’ views (sig. = 0.022 < 0.05) about the widespread perception that people with intellectual disability, through their public masturbation, reveal their strong sex drive. In particular, teachers that have a relative or friend with intellectual disability agree more (M=3.38) with the view that these people’s masturbation results from their strong sex drive. On the other hand, teachers that do not have someone with intellectual disability in their close environment disagree with the above statement marginally (M=2.82).

Teachers’ gender was found to have a significant statistical effect (sig. = 0.014 < 0.05) on their views about the myth that people with intellectual disability express stronger sex drive compared to people with no disability. This view is marginally rejected by male teachers (M=2.91), whereas female teachers accept it (M=3.51) (table 1).

Table 1: Mean and Std. Deviation of teachers according to their gender

| Gender | Mean | N | Std. Deviation |
|--------|--------|----|----------------|
| Male | 2,9130 | 23 | ,99604 |
| Female | 3,5143 | 35 | 1,01087 |
| Total | 3,2759 | 58 | 1,03945 |

Regarding sterilization as “an acceptable contraception method”, 8.5% of Special Education Teachers answered positively. On the other hand, a higher 12.1% of teachers answered positively (Table 2).

Table 2 - Views on sterilization

| | Sample Group | |
|--|----------------------------|-------------|
| | Special Education Teachers | Teachers |
| It satisfies the fears of the society | 19 (40.4%) | 16 (27.6%) |
| It is a cruel form of sexuality control and it constitutes an abuse. | 24 (51.1%) | 35 (60.3%) |
| It is an acceptable contraception method. | 4 (8.5%) | 7 (12.1%) |
| Total | 47 (100.0%) | 58 (100.0%) |

Having a relative or friend with intellectual disability has a significant statistical effect ($\text{sig} = 0.026 < 0.05$) on teachers' views about accepting sterilization as a contraception method. 30.8% of the teachers that have a relative or friend with intellectual disability accept this statement. On the other hand, only a 6.7% of the teachers that do not have a relative or friend with intellectual disability share the same opinion (Table 3).

Table 3: Cross Tabulation among teachers.
Views on sterilization

| | | Do you have a relative or friend/familiar with ID in your close environment? | | Total |
|---|-----------|--|--------|--------|
| | | YES | NO | |
| It satisfies the fears of the society | Frequency | 1 | 15 | 16 |
| | % | 7.7% | 33.3% | 27.6% |
| It is a cruel form of sexuality control and it constitutes an abuse | Frequency | 8 | 27 | 35 |
| | % | 61.5% | 60.0% | 60.3% |
| It is an acceptable contraception method | Frequency | 4 | 3 | 7 |
| | % | 30.8% | 6.7% | 12.1% |
| Total | Frequency | 13 | 45 | 58 |
| | % | 100.0% | 100.0% | 100.0% |

IV. DISCUSSION

The data analysis showed that 25% of the sample failed to give a precise definition of the term *sexuality*. This verifies the researches that highlight the subjective interpretation of the term [6]. In this research, it was pointed out that participants confuse *sexuality* with *sexual intercourse* or *sex appeal*. This confusion results from the inadequate education of both Greek Special Education Teachers as well as teachers on the matter. We need to

notice, here, that “sexuality” is a taboo issue for the Greek society, even today.

In general, this research showed that Special Education Teachers adopt a more positive attitude towards sexuality of people with intellectual disability, compared to teachers working with students with no disability. This finding is also verified by other related researches [2]. Furthermore, both the target group as well as the control group have a positive attitude towards the right of young people with mild intellectual disability to get married. Similarly, many researches have shown positive attitudes of adults that take care of people with intellectual disability towards marriage, but not maternity [12]. On the other hand, the researches of Leyser and Abrams [20], Brantlinger [7, 8, 9] and Wolfe [40] have shown the negative attitudes of teachers towards marriage or people with mild intellectual disability. As for the myth that people with intellectual disability are asexual [4], it is rejected by the Special Education Teachers of the sample. However, they express a neutral attitude towards the myth that people with intellectual disability present stronger sex drive compared to people with no disability in the general population. This research showed that Greek teachers tend to accept the myth of excessive libido of people with intellectual disability. More specifically, female teachers agree with this myth more than male teachers do, even though some similar researches emphasize gender neutrality on forming attitudes towards sexuality of people with intellectual disability [11, 16].

Furthermore, almost all participants rejected the statement *homosexuality is an inherent characteristic of people with intellectual disability*. On the contrary, they express a neutral attitude and they do not reject the statements: *people with intellectual disability commit sex crimes more often, they are more capable of having an orgasm and through their public masturbation they reveal their strong sex drive*. It is therefore clear that some stereotypes regarding the sexuality of people with intellectual disability are still maintained among Greek Special Education Teachers, as well as teachers.

Special Education Teachers with working experience between 6 and 10 years reject the view that *people with intellectual disability, through their public masturbation, reveal their strong sex drive*, as well as the view that *people with intellectual disability are more capable of having an orgasm*, showing the progressive attitudes on these issues. However, regarding public masturbation, teachers that have a relative or friend with intellectual disability present rather conservative attitudes. Here, we need to point out that some researches conclude that the parameter of having a relative or friend with intellectual disability in a teacher's environment is positive [2], whereas some others find it neutral [16], regarding the formation of attitudes towards sexuality of people with intellectual disability.

The majority of the sample have a neutral attitude towards the view that sexual education re-inforces the sexual activity of people with intellectual disability. Of course, there are some participants who adopt the stereotype that sexual education may “push” people with intellectual disability to dangerous sexual experimentations [18]. However, this stereotype is rejected by Special Education

Teachers who have attended seminars on sexuality and have a high level of studies. Several researches indicate that high education level and specialization are very important factors of forming positive attitudes towards issues regarding the sexuality of people with intellectual disability [24]. In general, the sample accepts the positive results of sexual education on people with intellectual disability in a great extent. Specifically, younger Special Education Teachers seem to completely agree with the necessity of sexual education on people with intellectual disability. This finding is common to other related researching attempts [16]. Young age and high education level, as demonstrated in a number of researches, contribute positively in forming liberal attitudes towards sexuality of people with intellectual disability [2, 11, 24].

As far as sterilization of people with intellectual disability is concerned, only a minor percentage of the participants accept it. However, participants working with students with no disability and have a relative or friend with intellectual disability in their close environment accept sterilization in multiple percentage compared to those teachers who do not know people with intellectual disability. Aunos & Feldman [2] mention researches which show that even parents are positive towards sterilization of their children with intellectual disability.

Teaching experience of Special Education Teachers in this research seemed to play a special role in the formation of their attitudes towards sexuality of people with intellectual disability. Specifically, Special Education Teachers that are at the beginning (0 to 5 years of experience) or at the end (over 11 years of experience) of their career express more conservative views, compared to those who are in the middle of their working life (6 to 10 years of experience) and whose views are more progressive. The lack of experience at the beginning of their working life, as well as job burnout that they feel towards the end of their career, may be the reasons for adopting these conservative attitudes.

The respondent teachers that have a relative or friend with intellectual disability in their environment expressed more conservative attitudes towards the issue of public masturbation of people with intellectual disability. This finding is consistent with the findings of other researches, which point out that the closer a relation with people with disability, the greater the rejection and the negative attitudes towards them [27]. This rejection is increased by the lack of specialized knowledge about sexuality of people with intellectual disability, something that is also verified by the views that some teachers expressed in the present research [42].

V. CONCLUSION

Through the data analysis of this research attempt, we notice the emerging profile of the Greek Special Education Teacher who adopts positive and modern attitudes towards sexuality of people with intellectual disability. It is the Special Education Teacher that has a high education level, has attended seminars on sexuality, it is man, young in age and with working experience between 6 and 10 years.

However, the Greek State ought to take all the necessary measures, so that the entire Special Education community, as well as teachers working with students with no disability, reject myths and stereotypes related to sexuality of people with intellectual disability. This can only be achieved by properly educating the teachers community on issues regarding the both two genders relations of these people.

VI. LIMITATIONS

The small number of sample, as well as the fact that it was taken from only one Greek Prefecture, Thesprotia in particular, does not allow generalization of the findings. Furthermore, the fact that no parents of people with intellectual disability were asked regarding their children's sexuality, limits exploitation of the findings.

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