



Review Article

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Group Experience of Sex Education with Special Children: A Systemic View

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Abstract

The present article proposes to report the implementation of an education and sexual orientation group aimed at special children in a pedagogical and rehabilitative institution in São Paulo – and to reflect from the perspective and the systemic perspective. Questions arise regarding how a group of this nature is able to move and improve the bonds and interactions between student and teacher, parents and teachers, parents and children, student and pedagogical content and the exchanges between professionals, institution, and community. In addition to the benefits brought by the sex education group in terms of information, prevention, reflection, self-esteem, safety, place of speech, inclusion, and social interaction. Initially, the context and theoretical foundations regarding sex education in Brazil will be described, followed by a description of how the implementation and developments of the sex education group with special children were carried out over the course of 3 years. Finally, reflections from pedagogy and systemic thinking and results obtained from this experience in an educational institution and psychosocial rehabilitation.

Keywords: Sex Education; Special kids; Psychology; Systemic Pedagogy.

Upon entering an educational and psychosocial rehabilitation center in São Paulo, there was a need to work on the phenomena of sexuality present in a disoriented and insistent way among young people with special needs, aged between 14 and 18 years, who were bringing many inconveniences to educators and parents, negatively influencing the younger ones. Young people were interested in their bodies and the bodies of others, felt pleasure in sexual play and discovery, and were being heavily influenced by a particular TV show, which crudely and pornographically exposed sexuality without guiding it. How to work the issue of sexuality with children with special needs in an adequate way? How to work on this issue with parents, who were omitted in this task, but who were also uncomfortable with the possibility of a sex education group with their children? What approaches and teaching materials to use to carry out such a task, even today, with a lot of prejudice and taboos in the social, educational and even health areas? These and other issues imposed themselves and stimulated a movement that involved much more than simply creating a sexual education and orientation group.

The Institution and its Audience

The Catholic non-profit organization provided full-time care to children with Mental Disabilities (mild or moderate) or Genetic Syndromes (such as Down Syndrome, Fragile X Syndrome, Williams Syndrome, among others), aged between 6 -18 years, previously evaluated and approved by the clinical team of the center (neuropsychiatrist, psychologist, speech therapist, physiotherapist, occupational therapist and psychopedagogue).

At the center, children participated in educational programs, workshops, outings, playful-recreational activities and therapeutic projects designed uniquely for each child.

The importance of Sex Education in the curriculum of schools and institutions

The importance of sex education or spaces where this can be talked about spontaneously and seriously, is already known by many, especially in times of globalization, sexually transmitted infections, self-care and hygiene, limits and possibilities of the body, intimacy, eroticization of childhood, debates on sexual abuse and harassment, pornography, diversity, prevention, among others.

Since the discoveries of Sigmund Freud, published in the years 1900-1915, infantile sexuality has ceased to be something obscure or a source of fear and scandal; on the contrary, the Austrian neurologist and psychoanalyst pointed out how healthy it would be to approach this with children and young people whenever questions arise. Many health professionals and thinkers (SUPLICY, XAVIER-FILHA, PAULA, MAIA, for example) currently confirm this hypothesis and argue the importance of sex education for the cultural, preventive and healthy development of the population in general. However, it is possible to notice that despite knowing the importance of spaces for debate and guidance, the educational system and the health system in Brazil still have great difficulty in offering programs, lectures and classes that address, discuss and guide the theme.

Since 2004, I have developed study groups, classes and lectures focused on sexuality, sexual education, corporeality and psychoanalysis in institutions such as SOS Kinderdorf, ABSW, Hospital Dia Infantil, CAPS, and in schools and social institutions. It was noticed how the theme of sexuality and Brazilian sexual education still remain very inaccessible to those who would be the most benefited by it. In lectures given in schools, it was noted that sex education for young people is only possible when an external professional is going to lecture on the subject. There is no space in the school where this theme is debated, talked about and/or guided when necessary (SCHUBERT, 2006). Based on these experiences, it was found that the topic is distressing for both parents and educators, for institutions and for culture as a whole. The few existing sexual orientation programs are developed by the private sector or through voluntary work. There are programs developed by the State, but with little scope and incentive.

Sexuality encompasses a series of activities, present since childhood, that provide great pleasure in satisfying a fundamental physiological need (example: breathing, breastfeeding and nutrition, excretion function, touching and feeling the touch by the body and thousands of others). Sexuality includes, apart from the sexual act itself, a whole series of bodily sensations, sensuality, curiosity about the body (own and others), seduction, ways of making up and dressing, sexual games, sexual behaviors and so on. The word sexuality contains within it a mistake commonly made by us. Sexuality doesn't just mean sex or sex. In this way, when we talk about child sexuality, we do not mean sexual act or movements of erotic and/or pornographic sexuality in the child.

Child sexuality is the search for satisfaction, for pleasurable sensations independent of the sexual act. Such a search is initially linked to bodily sensations and, later, to doubts and questions about the body, its functions, its emergence and origin.

It is part of the popular opinion, when talking about sexuality, to think that it is absent in childhood and will only awaken in the period of life called puberty. But this is not just any common mistake, but a mistake with serious consequences, as it is the main culprit for our ignorance about the basic conditions of sexual life. Most of the time, this distance between the morality of the adult universe and the absence of childish modesty results in teachings full of reprimands and punishments. Thus, treating the matter with the naturalness it deserves is a fundamental condition to enable an open and healthy dialogue between adults and children. SUPLICY (2002) explains how repression or omission in the face of manifestations of infantile, young sexuality can interfere with their emotional and intellectual development. Fact exhaustively theorized by FREUD (1905) when he pointed out that child sexual investigation was intimately involved in intellectual-emotional development because it involves one of the great mysteries and questions of children, the "where did I come from?". The energy initially invested in understanding and discovering this enigma will later turn to other subjects such as studies and social contacts. Again, quoting FREUD (1907) "The thirst for knowledge seems to be inseparable from sexual curiosity."

If it is already difficult to include sexual education and orientation programs in the curriculum of our schools or health centers, what about programs aimed at young people with special needs?

It is a very recent experience to work, or at least to publicize, the publication of works on sex education aimed at children with special needs. In part, prejudice and exclusion are primarily responsible. PAULA, REGEN & LOPES (2005) well remember that until recently "it was not even accepted that these people had the right to express their sexuality. It was as if the disability annulled the desire. Even today there are those who perceive them as asexual beings and not they rarely repress their sexuality themselves because they never had the opportunity to recognize themselves as sexual beings".

Sex education with children and young people

There is a movement of exclusion of this theme, for several reasons and justifications. Bert Hellinger makes several notes on the dynamics of exclusion and how it affects us consciously and unconsciously. Sexuality, being treated as an outcast, as something marginal, ends up intoxicating the naturalness and spontaneity of its movements, causing results that act directly and indirectly on the prohibiting agent and on the one who is forbidden to express something, which in this case, is his. human nature, human relational nature.

In this way, sex education work is not only important for being informative and preventive, but also for giving a place to “being sexed” to the child, a living being within society. It is one of the many inclusive ways necessary to remove these children from the obscure ignorance in which they are immersed, as if they were to blame for their condition and unable to understand what surrounds them and even what marks them and touches their own bodies.

MAIA (2007) points out in her article how common it is to look at the special child as an asexual angelic being or as extremely inadequate in terms of their behaviors related to sexuality. It also points out the importance of these children being seen as sexual beings, with the right to know their own bodies and to enjoy their sexuality, but who, like other people, also need guidance and information that lead them to autonomy, and not ignorance. He also emphasizes that "the scarcity of educational proposals that help the disabled to perceive, recognize and discriminate socially appropriate behaviors in relation to their desires and affections is enormous".

The creation of the sex education group: experience report

It was at the beginning of 2006 that the need to create a sex education group internal to the institution where he worked was realized. Acting as a psychotherapist and facilitator of the sex education group, since the young people were presenting sexually exacerbated behaviors, causing difficulties for the educators, conflicts with the family and negatively stimulating the younger children with their behaviors.

Young people had been following a soap opera that was very successful in Brazil, "Rebeldes", which conveyed scenes of sensuality and even sexuality in a very explicit way. Young people were reproducing what they saw their idols doing, without criticism, without knowing what it meant socially. Thus, the number of young people swearing, kissing and making out in inappropriate places and times, speeches addressing a sexually active and promiscuous life and even phenomena of masturbation in public has considerably increased. Attitudes of punishment and demonstration of disapproval for indiscipline and inappropriate behavior had already been taken by the educators without having much effect. The young people continued to reproduce something that they did not understand very well, but that they found interesting for the effect it caused and, of course, for the pleasure it caused. It was necessary to direct this natural phenomenon that was uncontrolled and distorted. Persons with disabilities not only can but should benefit from education and sexual orientation programs, as the lack of clarification favors the occurrence of inappropriate behavior such as exhibitionism, hygiene problems, difficulty in interpersonal relationships (another factor of social exclusion) , sexual exploitation and abuse and many others. Sexual education for people with disabilities does not have to be "special" or necessarily "different", what changes most of the time are the resources used (MAIA, 2007).

The educators had some difficulty in approaching sexuality with young people, as they found this occurrence strange in children with such characteristics. The parents were concerned, but none of them had broached the topic of sexuality with their child. On the contrary, they thought it shouldn't even touch on this subject. Questions such as: "but how can he, he's a child, how can he be doing this... he seems like a bastard (...) I thought that children like that... with disabilities didn't have that" (sic). There was a clear denial of the possibility of the sexual phenomenon happening to his/her child, since he/she was "special". However, it is well known that the fact that a child is "special" does not remove the presence of human phenomena. PAULA, REGEN & LOPES (2005) in an exposition on this aspect point out: "we found that most people with disabilities cannot live or even express their sexuality (...) disability itself, but the lack of conditions to lead a dignified life, with equal opportunities and respected rights. The libido is shipwrecked in the midst of so many needs, that is, no one can fully fulfill themselves sexually if they cannot live their lives. life in all its aspects."

Possibly if the fact was not properly oriented, children with their parents' scolding and reprimands at school would end up thinking that it is wrong to mess with these "things" of sexuality. They would feel the impetus of the sexual drive, but again, through the look and social reaction, they would feel inadequate and insecure about their body, self-image and personality. They would feel that they had "failed" again with their teachers, with their parents, with the adult world. The weight of this frustration would only make these children's bodies and personalities more fragmented.

After a meeting with the Institution's coordination, with the clinical-pedagogical team and with the religious leaders, permission was obtained to organize a sex education group for special young people. From the reflection and demonstration of the preventive and behavioral importance for the young people and their families of this project, all the professionals of the institution gave their support.

The next step was to arrange a meeting with the young people's parents and inform them about the establishment of this sexual orientation group. It was important that everyone knew about this movement, even if only some of the young people participated effectively and actively in the group. A document was prepared in which the parents authorized the work to be carried out and conducted by the psychotherapist.

The group members themselves signed a document in which they committed to actively participate in it, respect their colleagues and not make inappropriate or explicit use of the topics discussed at home or at school. It was noticed that the fact that the young people signed this document was very important for them – it showed their commitment and the fact of "being older" and being able to participate in the group focused on sexuality. First, the document signed by the parents was shown to them and, later, they signed their own document. After each group, the psychotherapist also signed the presence and participation of each young person in their own school agendas – so that the parents could follow the themes worked on.

The sex education group was created with some young people who had been exhibiting sexually exacerbated behaviors and others who were role models for others. Most were over 15 years of age. Everyone was excited by the idea of "a sex group" - a fact that was discussed at length with them, the difference between sexuality and sex. Initially, a male and a female group were separated to target more specific themes for boys and girls.

The first guidelines dealt with questions they raised based on what they had heard in the soap operas and movies: How do you have sex? At what age can I have sex? How does the pee get hard? What was sex behind? Can a boy kiss a boy? When does the breast grow? What is disease down there? Why do boys like to hug from behind? Can you have drunk sex? Is it normal for an old man or man to rub the back when he passes by on the bus? And many others that indicated ignorance and, at the same time, the thirst for knowledge on the part of young people. They were exposed to sexual and sensual stimuli all the time in society, in the media, they perceived and became aware, but they did not have, until then, a space where they could inform themselves, debate, be questioned and directed.

After two months of introductions, explanations and guidelines, in which the questions brought by them were either worked on or lectures were prepared elaborating specific topics on sex education (information and didactic material were used in a language closer to theirs, showing many pictures and making use of didactic videos), the male and female groups were brought together in one. There were requests from themselves for the group to be united. The proposal was accepted as long as they made an effort in the debates and respected the other colleagues. The group now had 15 members, the orientation took place once a week, lasting an hour and a half. Among the members of the initial group there were: 7 young people with Down Syndrome, 1 with Fragile X Syndrome and 7 with Genetic Syndrome of etiology to be clarified. There were 7 boys and 8 girls. Over the course of 3 years, these numbers changed, and children left the group to make room for other children. The mixed group, boys and girls, was actually the most functional - because of their own characteristics, boys and girls were motivated, stimulated, debated, competed, and approached each other.

The parents were called after 6 months of group work, and the proposal to permanently establish the sex education group was presented, as it brought very positive results. From this experience, the decrease in the phenomena of exhibitionism and exacerbated sexuality within the institution became visible; greater approximation and relational exchange between young people; the approximation and positioning among those more withdrawn and shy young people; the active and questioning position towards the educator; care regarding the verbalization of profanity; the care regarding the subjects and games performed close to the younger children; the search by educators and parents regarding issues related to sexuality and doubts or phenomena that occurred within the institution; the approximation of parents in meetings and open spaces for family guidance (SCHUBERT, 2007).

At the same time that they showed relief that the topic was being addressed and oriented, the parents also revealed fear that this would encourage sexual practice. For this reason, they were also oriented in some meetings about the subjects, themes and objectives of the group. This Family Orientation space brought benefits to the young people in their global framework: parents followed what they were learning and sometimes even asked questions with them, or forwarded questions to the group. The educators were also guided and participated from time to time in a group or guided certain topics related to sexuality in the classroom.

In the course of 3 years of experience with the sex education group, it was possible to perceive that, despite continuing to address themes related to sexuality, the group was assuming many characteristics of a therapeutic operative group. The relational difficulties that young people had among themselves, their fears, criticism of the institution and professionals, the diagnoses that each one had and with which they became aware and aware of and the forms of social relationship, such as flirting, dating, marriage, friendship, collegiality. In a spontaneous movement, they themselves suggested and organized balls, in which they could dance, talk, eat, come with whatever clothes they wanted. Two plays were staged, in which they approached younger colleagues about the dangers of sexually transmitted diseases, teenage pregnancy, drugs in the community and violence, harassment due to prejudice and discrimination - topics very close to these young people.

So this space, originally for sex education, became a space for expression. Expression of your fears, desires, anxieties and desires. A movement of inclusion, manifestation and expression was created. It was a special group, not because it had participants with special needs, but because it provided a special learning and exchange for all those who participated and who were directly or indirectly involved in it.

Reflections from Systemic Pedagogy

This experience reported by the sex education group - internal to an educational and psychosocial rehabilitation institution in São Paulo - acted at different hierarchical levels and its repercussion was directly on the young people and children of the same, as well as indirectly on the educators, family members, colleagues, acquaintances and community. How did this happen? Today, looking a posteriori, it is clearer to perceive the systemic movements that such work provided.

Marianne Franke (2005) points out: "Systemic Pedagogy allows us to observe the whole system and not just the didactic one. The educational system, the family system and the social system are in constant interaction in the classroom. Thus, it allows perceiving people not as isolated individuals, but as part of an interrelated structure."

This group worked mainly on inclusion and belonging. Yea! We can talk about sexuality and sex. Yea! You also present these phenomena. Yea! Sexuality and relationship are present in you, every day and every hour. Yea! You can get to know, explore, reflect and know about your body. Yea! You are part of this important project called life, and it was through sexuality that you came into the world.

The group focused a lot on family issues, how they were at home, difficulties, crises, needs – and everyone actively participated, in their own way, in finding possible solutions. Again, quoting Franke (2005) "The best gift we can give a student is to accept his destiny. This requires, however, for our teachers, a lot of discipline, which includes, for example, the renunciation of wanting to help the child overcome the limitations of their family of origin. We are "just" the teachers, and the children remain connected to their destiny, to their family."

Bert Hellinger (2008), mentioning the Laws of Love, pointed out how a disorder in the system causes entanglements, blocks and confusions in movement and walking. In education, when there is disorder, the teaching-learning process cannot flow naturally. In this case, sexuality and the body were being denied, for the most diverse reasons. And the result was exclusion. Looking at sexuality and allowing a space for expression in the Institution created a movement and a feeling of belonging. Initially in the children, then in the parents, in the team, in the community. It wasn't forbidden. It wasn't taboo. It was no cause for shame and guilt. It could be said and explored. It could be looked at and directed. It could be recognized and accepted, just the way it is. With care and respect.

I close this brief exposition with the reflection: "The essential for systems thinking is to understand how close, how interconnected we are and how we really relate to each other, and to develop an understanding that, in addition to our individual consciousness, we are part of the global environment that surrounds us." RENOLDNER (2013).

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