



The Provision of Relationship and Sex Education Programs for Individuals with Autism Spectrum Disorder– Staff Perspective

Mark J. Brown^{1,2}  · G. H. Murphy¹

Accepted: 30 December 2024 / Published online: 6 February 2025
© The Author(s) 2025

Abstract

Relationship and Sex Education (RSE) has been integrated into the National Curriculum within UK schools for the past two decades. RSE aims to teach about the emotional, social, and physical aspects of growing up, relationships, sex, human sexuality and sexual health. Such a curriculum tends to be mainstream oriented, taught in large classes, with limited exploration and clarification for those who need it. There is concern that the development of incomplete knowledge and skills places the pupil with Autism Spectrum Disorder (ASD) in a difficult and potentially vulnerable position. This study was the first of three looking at development of a more appropriate RSE program for pupils with ASD. The study focused upon evaluating the RSE program being utilised at the time (2016) via face-to-face semi-structured interviews with teaching staff. Participants were either senior leadership members or school RSE coordinators and they came from 15 schools providing for pupils with ASD in London, Surrey, and Sussex.

The resulting qualitative data were analyzed for common themes. The resulting themes highlighted difficulties in implementing RSE programs with pupils with ASD, lack of resources and support, and being able to develop positive RSE. The results indicate that although those in charge of RSE implementation are committed, they are frequently faced with a range of barriers. The discussion section highlights the importance of this subject and the need to increase understanding in relation to such programs.

Keywords Autism · Sex · Sexuality · Relationship · SRE Programme · staff perspective · United Kingdom

NB. For this piece of work the identity first term of autistic person will be used as a recognition that this is preferred by many autistic people as they see being autistic as integral to who they are.

✉ Mark J. Brown
M.Brown@kingston.ac.uk

¹ Tizard Centre, University of Kent, Canterbury, England

² Kingston University, London, England

Introduction

Within the UK, the National Curriculum has included relationships and sex education (RSE) for the past two decades. RSE aims to teach about the emotional, social, and physical aspects of growing up, relationships, sex, human sexuality and sexual health. At the time of the study, the policy regarding RSE placed an emphasis upon all school governing boards to provide some form of RSE program. However, schools were left to develop their own specific topics and resources, though some new guidance has recently been issued [1]. There is concern that the development of incomplete knowledge and skills places the pupil with Autism Spectrum Disorder (ASD) in a difficult, and potentially vulnerable, position [2, 3] due to difficulties relating to the lack of social understanding and social boundaries. These can result in perceived 'deviant' behavior, leading to misunderstandings from others [4, 5]. Prior research has recognised that an effective sex education program can improve some of the knowledge and skills of individuals with Autism Spectrum Disorder [6].

The need for adaptation of education for people with Autism Spectrum Disorder has been recognised within education provision for many years [7]. However, due to the needs of this diverse group, alternative teaching methods and materials must be considered [8]. This is especially relevant when considering those with Autism Spectrum Disorder for whom such difficulties can increase ongoing stress and anxiety. Previous literature reviews () have demonstrated the lack of research within this topic, with very few studies occurring within the UK. With the curriculum changes, attempting to understand how such programmes are developed and delivered is imperative in reducing inconsistencies within RSE education. Therefore, the present study aims to fill this information gap by directly accessing staff who are tasked with the job of implementing such programmes. By gathering such data, a better insight into the issues faced by staff will be gained in order to assist the development of more relevant programs and materials.

Current Study

This study investigates how staff coordinating RSE teaching perceive the success of the UK based RSE programs involving teenagers with Autism Spectrum Disorder. Through semi-structured 1:1 interview, the study aimed to:

- Explore the planning, implementation and evaluation of the UK based RSE programs involving teenagers with Autism Spectrum Disorder within schools.
- Consider the necessity of adapting the present RSE programs in order to encompass the areas of difficulties that are recognised as being important for people with Autism Spectrum Disorder.

Methods

School Settings and Participants

Various educational databases were searched, including the UK National Autistic Society school list and relevant Local Authority sources, in order to identify possible schools serving children in the southeast of the UK. To be included, the school had to have a minimum of 25% of students possessing a primary diagnosis of Autism Spectrum Disorder, as identified within their Education, Health, and Care Plan (EHCP). It is important to note that autism and intellectual disabilities are distinct diagnostic categories, and so someone can have both diagnoses. Due to limited response rates, including some schools no longer supporting autistic students, only 15 sites that met the criteria and wanted to be part of the study responded. Therefore, all 15 sites were recruited, all of which provided support for Autistic teenagers: 9 (60%) were in North & South London, 3 (20%) were in Surrey, and 3 (20%) were in Sussex. Of these, 12 (80%) also provided for other children with special needs while 3 (20%) provided for autistic children only. Participants being interviewed in this first study were teaching staff with responsibility for RSE programs (one per school). All were female, the majority were aged between 40 and 50 years old with 2 participants being between 20 and 30 years old. All except 1 participant had over 15 years experience in teaching although this did not include the topic of RSE.

Measures

Two processes were utilised: online questionnaires, followed by semi-structured interviews. Both were devised specifically for this study. The online questionnaire aimed to obtain information about the school, including approximate percentages of the pupils in relation to particular characteristics such as pupil age, gender, diagnosis, ethnicity, and behavior displayed by students.

The 1:1 interview, which lasted 45–60 min, occurred after completion of the initial questionnaires. The interviewer was the lead researcher (MB) a nurse trained in intellectual disabilities and in qualitative research methods. Interviewees were either headteachers or designated RSE coordinators in the participating schools. Interviews were held in the school and utilised a range of questions, based upon main themes highlighted by a previous literature review performed by the researchers. These included:

RSE Development

- What is the school policy relating to sex education?
- What is the program based upon, how was it developed, who was involved in the planning?
- Age of students for sex education.
- What liaison is there with parents, and what is the procedure should parents object?
- What happens if one individual has difficulties dealing with the topic?
- What happens if the teacher is worried about ongoing abuse (between pupils, family, and risky behavior).

- Are there any grounds for pupil exemption and how is the decision made.
- How does the RSE coordinator evaluate the effectiveness of programs?

Staffing/Training

- Who teaches the sex education program?
- Does the school get outside assistance and advice?
- Does the RSE coordinator know where they can get advice.
- Does the RSE coordinator receive any specific training.

Program

- How is the program coordinated, who takes responsibility?
- How is it taught?
- Is there any adaptation to teaching methods, including length of time and methods used.
- Content of curriculum, is there a sex education pack, and are any topics left out. If so, why.
- How is reproduction taught in biology and how is it coordinated with sex education?

Each interview was recorded, and notes taken throughout by the researchers to guide the process.

Ethical Issues

Ethical Approval was sought from the Tizard Centre, University of Kent's Ethics Committee, followed by approval from each school for inclusion in the study. The latter occurred through the pre-interview questionnaire and subsequent discussions about the study. Participants were provided with information sheets about the study prior to being interviewed and were asked to sign a consent form prior to the interview.

Procedure and Data Analysis

The questionnaires were provided to head teachers on-line and they preceded the interviews. Data obtained from the questionnaires were analyzed using Statistical Package for Social Sciences (SPSS) analytical software, to provide demographic details about the schools (these data were missing for 4 sites, due to technical issues and personnel changes). The on-line questionnaire asked questions relating to the demographics of the school (e.g. gender of students, ages, ethnicity, student diagnosis), and occurrences of behavior that challenges including sexually inappropriate or abusive behavior.

The interviews followed the on-line questionnaires and were conducted face to face in schools. The interviews were semi-structured in nature and explored areas relating to how RSE was implemented within the school, including looking at school policies and programs being used, staff involvement in the programs, and any barriers to program implementation. The audio recordings from the interviews were transcribed and analyzed utilizing an applied

thematic approach [9]. The analysis involved a three-stage process [10]: data preparation for analysis (achieved via transcribing), thematic analysis of the data, and presentation of the data. Each interview was transcribed, and transcriptions read alongside recordings to ensure they represented the interviews. This was followed by a more detailed analysis focused upon identifying overarching themes [11] utilising NVIVO analysis software.

Results

School Details

The number of schools contacted totaled 15, however some were unable to complete the information and so 11 schools completed the on-line questionnaire. The total number of SEN pupils across the 11 schools providing data ranged from 64 to 220 with an average number of students being 132.7, most of whom were male. The age ranges can be seen in Table 1.

Regarding ethnicity, pupils were predominantly white (7 schools reporting 51% or above). The four schools reporting higher percentages of minority groups were in inner London; the remaining 8 were in outer London, Kent or Surrey and were less diverse.

The reporting of behaviors centered upon six behavior types. These were:

- Physical Aggression towards others, including hitting, biting, kicking, throwing objects at people,
- Verbal Aggression towards others, including swearing/insulting others, shouting at others, spitting at others,
- Self-Injurious Behavior, including banging own head either with a hand or against an object, biting self, kicking self, picking skin, cutting self,
- Property Damage, including smashing items.
- Refusal to participate, including trying to leave the class, sitting on the floor and refusing to get up, attempting to leave the school premises,
- Sexually inappropriate or abusive behavior, including issues of age of consent, behavior defined as illegal.

The results indicated that four of the six types of behavior had occurred across all the schools involved. All of the schools reported the occurrence of physical abuse of others, verbal abuse of others, damage to property. and refusal to participate. These occurrences were identified by all participating schools as having been displayed by up to 50% of the pupils, although in one school physical abuse of others and verbal abuse of others were displayed by over 51% of the pupils. Regarding the remaining 2 behaviors (self-injurious behavior and sexually inappropriate or abusive behavior), these were only reported by two schools. In both cases, these behaviors were only displayed by up to 20% of the pupils.

Table 1 Total numbers of pupils in each age group across all schools

Age group	Number of pupils
0–4 years	41
5–11 years	387
12–16 years	827
17+ years	206

Table 2 Support services accessed by schools to support pupils' behaviors

Types of Support service	Percentage of schools accessing these
Counsellors	11%
Family support	11%
Child and Adolescent Mental Health Services (CAMHS)	11%
Therapists (e.g., drama/art/music)	11%
Teaching Staff with specific behavioral training	11%
School Nurse	3%
School-based approaches	3%
Parent groups	8%
Educational Psychologist	8%
Behavior Management Group	3%
Social Skills Training	3%
Early Help Support	3%
Learning Disability Services	3%
Emotional Support Team	3%
Emotional Literacy Support Assistant (ELSA)	3%
Safeguarding	3%
Behavior Specialist	5%

One of the limitations with the data provided regarding behavior may have been the under recording of such behaviors, potentially due to under reporting by staff. Additionally, the data provided were based upon the interpretation by the individual completing the survey regarding the overall percentage of occurrences.

The final set of information acquired from the on-line questionnaire centered upon the general support services available to pupils, parents/carers, and teaching staff (see Table 2 for results). There were a number of common services highlighted, both in-house and external local services.

As well as generic services, there was a range of support approaches that were either school specific or an alternative to statutory services. These included:

- Parent Groups, including specific training for parents and support groups for parents to regularly meet with others.
- Pupil specific behavior/emotion groups to support pupils in dealing with issues.
- Family support workers/Resilience workers to help with home issues.
- Emotional Literacy Support Assistant (ELSA) to develop pupils' understanding of their emotions.
- Behavior Specialist.
- Teaching staff were identified in 11% of cases. Although teaching staff would have been involved with all pupils, this related to staff specifically trained in behavioral support and intervention.

Overall, the data obtained provided some background information in order to gain some understanding about the pupils and practices of the schools involved.

Interview Results

There were three overarching themes (1) RSE Battleground, (2) Resource and support abyss, (3) Attempts to provide positive RSE.

OverArching Theme– The RSE Battleground

Throughout the interviews, an overarching theme became apparent regarding the conflict between the coordinators and the various infrastructures in and beyond the school, e.g., senior leadership team, other teaching staff, and Ofsted the UK regulator for educational services.

Other things come far higher up the list because they're things that Ofsted inspectors look at all the data. They don't want to see the data for how children are progressing with their sexual knowledge.

Deputy Head Teacher, School C

Such conflicts were not just related to the school infrastructure, but also additional factors such as societal, moral, and cultural views and attitudes, since some education staff did not believe that sexuality and relationships were appropriate topics for pupils with ASD. This attitudinal barrier has been discussed within a previous study [12] where staff did not believe RSE programs were beneficial for such students. The impact of such conflict resulted in RSE program implementation difficulties. This reduced the chance for an effective knowledge-based foundation for the pupils. Having to constantly be faced with such battles led to several of those interviewed expressing how frustrated they had become, but they continued to battle on for the sake of the pupils as they recognized the importance of RSE.

The data highlighted several difficulties relating to the consistent implementation of the programs. Participants discussed issues relating to teaching staff's reluctance to teach the necessary subject due to both belief systems, and factors more personal to individual staff. A study in South Africa also emphasised the difficulties that occurred when topics being discussed conflicted with staff beliefs [13]. Regarding the latter, many concerns were linked to lack of skill and knowledge possessed by the wider teaching staff concerning RSE. This resulted in the wider teaching staff feeling unskilled regarding teaching RSE 'correctly' due to lack of effective guidance and training commitment from the senior leadership team. Often teaching staff expressed concern that they were not teaching the correct information or in an appropriate fashion, and so were reliant upon the coordinator to guide them. This proved difficult when the coordinator role was not well resourced or supported by senior leadership team. The lack of curricula and guidance has been raised as an issue for many years [14], especially teaching strategies and content [15].

As well as the teaching process, there were difficulties highlighted in relation to staff's views about whether pupils should be taught such a subject. Often such decisions were based upon the perceived needs and ability levels of the individual pupil from the staff perspective. Additionally, there were issues regarding staff's own attitudes about sex education, including whether pupils with Autism Spectrum Disorder should be taught anything about RSE [16, 17]. Such conflict impacted upon the implementation of the RSE programs from

both the viewpoint of staff and parents. Meanwhile, difficulties associated with religious and cultural beliefs were particularly relevant to schools based in the London areas where there was a more diverse mix of staff, pupils and parents. Often the clashes regarding cultural and religious views were more prominent within the staff team in these areas, impacting upon the quality of the RSE teaching, particularly the depth of information provided to the pupils.

“Every class teacher delivers it to their group, pretty much um, and so there, there, there lies in a bit of a difficulty which is that we’re not policing it.... so we just go, we, so here’s the topic, maybe FGM ok, and I’m (teacher) comfortable with this bit of it and I’m not so comfortable with this.”

Head Teacher, School H

Previous studies have also highlighted the difficulties in staff attempting to not cross cultural boundaries [18]. These issues were more pronounced when the RSE coordinator was not directly involved with the program teaching. This placed pressure upon the RSE coordinator as they would have to arrange for an appropriate person to deliver the sessions. This proved difficult as it could impact upon consistency and appropriateness of information being provided by staff, something previously raised by other studies [19].

Additional issues occurred when the topic of RSE would clash with other subjects on the timetable as staff would highlight how their subject (e.g., Math and English) were far more important than RSE.

It’s either coming in and um just saying right ok can you (release students) and then taking them off the timetable, which never is never kind of doesn’t always go down well with other teachers, especially in core subjects.

PSHE lead, School A

In contrast, in schools where a member of the senior leadership team provided direct input into the RSE program, the issues of staff development and resources were more positive. Often this would include the senior team actively encouraging the development of skills by the person teaching, in recognition of the importance of providing adequate RSE to the pupils.

Senior management, you know, the deputy head is really supportive in the RSE... since day one since we started writing the curriculum, she’s been involved in dipping in, and the head teacher’s also. He’s very interested in getting everything implemented.

Co-Ordinator, School B

In contrast to previous studies [20, 21], interviewees highlighted how they felt parental attitude was more positive than staff attitude. This included parents wanting to be actively involved with the teaching. Also, most participants reported that they could not recall any pupil being withdrawn altogether from participating in RSE by his/her parents. On the occasions that such withdrawal occurred, the families had felt that it was their responsibility to

provide the information to the child. This meant it was difficult for the RSE coordinator to ascertain the accuracy of what was being taught within the home environment. On a small number of occasions when pupils had been withdrawn from parts of the program this was for cultural or religious reasons.

The last, do you know, what it is 10 years, I looked, since the last time someone (parent) withdrew and that was a Jehovah's Witness family.

Safeguarding & Prevention Officer, School F

Frustration can originate from a myriad of places and the interview results reflected this. Being frustrated was often seen as being a natural part of the RSE coordinator role regardless that implementation of RSE programs within schools was part of government legislation. Much frustration grew from the ongoing conflicts that occurred and hindered how the coordinators effectively implemented the RSE programs. A lack of clarity surrounding how sexuality curricula was developed for this group, has been a concern for with studies [22] demonstrating the lack of socio-sexual aspects to such programs. However, often participants highlighted frustration that went beyond the boundaries of the school and organizational conflicts. At the time of the interviews, there was a lack of clarity within the legislation regarding the format and structure of such programs. This meant the prioritization of RSE programs by schools did not necessarily match that of the needs of the pupils. Program development was reliant on the RSE coordinator providing some form of comprehensive program within limited resources. In the majority of cases, the coordinator's role was filled by a staff member who had an interest in the topic of RSE regardless of experience and training. In some cases, the coordinator was a senior leadership team member, but mostly they were a class/subject teacher. Once in the role it was often expected that their normal teaching roles continued. This reduced the time coordinators had to implement programs. In some cases, interviewees felt that this was a reflection of the organizational commitment regarding RSE. This was further exacerbated by budgetary limitations leading to the coordinator having to prioritize what happened in RSE program. This included ensuring appropriate training was available for the coordinator and staff, or that relevant resources were available for use with the pupils.

OverArching Theme—the Resource and Support Abyss

Regarding the implementation of RSE programs, participants highlighted how the biological aspects of RSE were easier concepts to teach, as identified by previous studies [19]. The 'black and white' nature of this part of the RSE topic was either incorporated into the school biology lesson or covered in both Biology and RSE.

Well, it's taught through science as well. The reproduction side I mean, we also do like in erm you know you start in year 2 and 3 we hatch eggs, chicks from eggs, and things like that. The biology aspect of science erm is something that goes throughout the curriculum.

Head Teacher, School M

Regardless of how the subject was taught, the RSE coordinator was faced with issues regarding the consistency and appropriateness of the teaching, including linking with wider RSE topics. These latter topics involved more abstract socio-sexual aspects of everyday life which proved more difficult to teach. Such difficulties were frequently reported as occurring due to the fluid nature of social rules and interactions that occur in everyday life. These have an impact upon how friendships and more intimate relationships grow and develop. A limited number of interviews ($n=4$) highlighted how the participants had researched some of the RSE programs for individuals with intellectual disabilities that had previously been developed and published. They subsequently attempted to utilize such programs within their own schools. This often proved difficult to effectively implement due to the wide range of abilities and needs of the pupils involved. The availability of more appropriate RSE programs for autistic individuals has been a constant issue raised in studies [19, 23]. For most participants, a considerable amount of time was spent searching for appropriate teaching materials for pupils with Autism Spectrum Disorder. Additional time was subsequently taken up in attempting to develop what was required. This further increased the frustration experienced by coordinators who were committed to providing a comprehensive program.

The need to adapt approaches within the general school environment was recognized as a necessity for individuals with Autism Spectrum Disorder, as with previous studies [23]. Within those schools that provided specifically for this group of students, such adaptation was part of the overall approach. Staff had been trained in a range of approaches that were appropriate for individuals with Autism Spectrum Disorder, such as TEACCH, Picture Exchange Communication System (PECS) and appropriate levels of structure.

“There is lots of differentiation going on but, in the classes, where it’s predominantly Autism Spectrum Disorder, we’ve become, we’re becoming a communication friendly school.” Deputy, School C

It varies so everything from the very basic things like individual timetables, everything visualized down to very very specific assessments.

Safeguarding & Prevention Officer, School F

Regarding materials for the RSE programs, interviewees felt that what was available was lacking the necessary rights-based approaches that was required for the situation. As previously highlighted within this study and also highlighted in other studies [24], many participants felt that the emphasis of available material was upon the mechanical side of RSE.

Where further elaboration in the material occurred, this only centered upon safety and legal issues. Many participants felt there was a need to utilize an approach that explored the socio-sexual aspects and how it related to the individual’s rights and needs. This is a consistent issue raised by previous studies [23] where a lack of emotional and relationship perspective has been missed within programs. Although aspects, such as relationships, were often taught separately, such an approach led to pupils having difficulties in making connections between the different lessons and teaching methods. In practice, this often involved pupils attending separate social skills/relationship classes, away from the RSE program instead of as an integrated program. This separation caused pupils difficulty that then reduced the potential for pupils to generalize their knowledge and skills further. Addi-

tionally, there were issues relating to program implementation due difficulties in providing appropriately individualized methods which took into account varying levels of understanding amongst the pupils. This was felt to be imperative regarding the pupils with a diagnosis of Autistic Spectrum Disorder, given the varying additional issues that can occur due to their diagnosis.

They'd access the same content of the curriculum and they're not taught separately... they are involved because we believe that the picking (up) of the skills of socialization and relationships and interactions is fundamental for their development.

Head Teacher, School E

In some situations, attempts were made to cope with the variance in abilities amongst the pupils by utilizing graded target levels based upon assessed ability levels of pupils.

In the post 16 we have like an assessment checklist of all kinds of life skills, and it covers relationships as a part and sex ed as another part.

PSHE Coordinator, School O

In one case this centered upon a three-tiered measure of each pupil's knowledge acquisition as set by staff. However, this did not measure knowledge beyond the "black and white" level. In other situations, grading was done in regard to the class abilities. This would involve individual classes being divided into subgroups based upon pupil abilities as perceived by staff:

When it's time for PSHE they're split into slightly different groupings. So, they've moved from their class groups where their multi mixed ability to a more, a more able discussion group. Another group sort of limited verbal communication and who need a lot of support.

PSHE Co-Ordinator, School N

This methodology was not necessarily based upon any formalized decision-making process, but more to the staffs' judgement in regard to the needs and abilities of each pupil. Where pupils were deemed as not having the capacity to consent, the subject of sexual interaction would be limited to what they were not 'allowed' to do. These smaller groups would require differing levels of teaching including the content of what was discussed.

One particular school discussed how they adapted the RSE program to accommodate students with some social skills, but who were still struggling to keep themselves safe. Often these pupils spent considerable time with neuro-typical people outside of the school environment. This had placed them in difficult positions due to a lack of understanding of some of the coercive techniques being used by others.

The impact of having to provide differing levels of teaching was reported as being problematic due to the time needed to adapt materials, especially given the distinct lack of autism specific RSE programs. In fact, the use of a multidimensional approach to the delivery RSE

programs have been previously highlighted as a need in order to ensure student needs are met [25, 26]. However, the process of developing and obtaining appropriate materials for pupils with Autism Spectrum Disorder often took up a huge proportion of the coordinator's time which proved difficult when the interviewee also had ongoing teaching commitments. Even when specific programs developed for individuals with intellectual disabilities were used, participants discussed how further adaptation was required, especially concerning the more abstract areas of social and sexual life.

When you said what could be improved I bet there could be a fantastic visual pack erm that could be created erm that would really be beneficial to er autistic kids in particular over on the step side erm so something like that because at the moment teachers have to make their own resources or find their resources that erm but if there was a real you know autism friendly erm pack with various different levels differentiating would be fantastic and then those kids that couldn't manage and needed that individual input, actually support workers could work with them but most of them would probably go, ew you know I'll leave it to the teacher.

Headteacher, School L

Even when schools utilized known programs for students with intellectual disabilities, such as the EQUALS program [27], the additional needs of those with Autism Spectrum Disorder proved difficult. The area of greatest concern for individuals with Autism Spectrum Disorder related primarily to the socio-sexual aspects of sex and sexuality, such as establishing and maintaining relationships, rules surrounding the use of social media, issues relating to coercion and consent. These proved problematic to teach due to the varying boundaries and unclear parameters that occur within individual social interaction.

It's (social rules and relationships) really hard to teach it though cos so many of our youngsters are driven by rules and there are no rules in relationships, and you know there's always differences. It's helping them to understand that.

Deputy Head Teacher, School D

Additional to attempting to develop appropriate programs, interviewees discussed changes that occurred within schools due to individual incidents that may occur amongst the pupils. For example, incidences of inappropriate sexualized behavior often resulted in additional material being sought or the topic being repeated due to students' processing difficulties. The recognition and need for subsequent changes has been recognized in literature [3] but with limited results.

I think as they're growing up and getting older and you know they see more adult film.... And things with sex and they get weird ideas about things.... They misunderstand things so you often constantly revisit things to do with relationships and appropriate behavior.

Assistant head, School G

Occasionally, further adaptation and work was necessary when there was a recognition that some individuals with Autism Spectrum Disorder required additional one-to-one intervention. This approach was implemented when an individual pupil had displayed additional difficulties, or when group work proved difficult. Dependent upon the severity or complexity, some participants reported that such work included the involvement of appropriate outside agencies, especially when legal boundaries were involved.

Where we do have a sexual behavior.... then we we would do an intervention for a particular child if they were, you know, lots of these behaviors and we would include it in a behavior support plan.

Assistant Head, School B

That kind of stuff (sexting) or exposing themselves erm they might, do, well social stories around that kind of thing as well as working with you know our school police officer as well.

PSHE Lead, School I

In attempting to deal with such difficulties and so more effectively support students, participants discussed the necessity to frequently repeat and revisit topics. This ensured that students with Autism Spectrum Disorder were given the opportunity to further explore and clarify the information provided.

The idea is to be ongoing and revisit...and then add more and then revisit, add more because the nature of the learning and you know you have to keep recapping the parts of the body. I mean the teachers are the judges of that and we find that.... The idea is covered.

PSHE Curriculum Leader, School J

As well as repetitive exploration of issues, it was reported that students with Autism Spectrum Disorder seemed to want more information beyond what was taught in the classroom than their non-Autistic peers. Similar approaches have been written about in order to ensure that autistic students have every opportunity to develop their understanding [25, 28]. This often involved greater amounts of detailed questioning in order to gain further clarification about the everyday aspects of the topic.

A child that's got Autism Spectrum Disorder the other day was completely confused and the mum talked to me...said he's really confused because he's not sure that if you like somebody why you would kiss some people and you wouldn't kiss others. We just did a sort of on-the-spot social story.

Deputy Head Teacher, School D

Additional issues arose regarding the need for staff to make what they thought of as a “legal” judgement as to whether a pupil was able to understand consent and engage in intimate relationships. In most cases, interviewees highlighted the minefield that staff were confronted with as it impacted upon the level of information and teaching that took place. Concerns were raised that there were times when such decisions were potentially based upon interpretation of a situation rather than factual information. Also, the potential for an individual to develop the ability to consent, once knowledge had been obtained, was not considered, as many teachers focused upon the short-term consequences.

Although not necessarily an area identified within other studies, the ability and need to access appropriate support from external agencies proved to be an important element of providing a comprehensive program. This was particularly relevant as new situations and topics arose, including legal issues, and topics such as Female Genital Mutilation (FGM). These were areas the coordinators had to include but they were not confident about their own knowledge. Such situations would lead to the need to access either relevant sources of information or arrange for external agencies to take the lead in such work. Unfortunately, although there were occasions when participants had successfully accessed external agencies, the relative lack of local statutory services made this difficult. This resulted in the need to access services from either the voluntary or independent sector with additional cost implications. In some circumstances, the need for more specialized input far outweighed the cost. However, there were some circumstances when the coordinator had to consider whether they were skilled enough to perform the task themselves and so save money. This latter approach could be successful if there were relevant, often free, materials available which the more confident staff could utilize. However, a lack of confidence in the delivery of a program has proven to be a barrier to students accessing the knowledge [19]. Even when appropriate agencies and support were commissioned, the participants were frequently faced with implementation difficulties. Often this was linked to some of the attitude difficulties previously discussed under theme 1. Many of the interviewees felt that there was a never-ending need to battle for and justify the importance of RSE, particularly when planning special events involving outside speakers.

Even when such need to justify the processes did not exist, enabling all pupils to access the support could prove logistically impossible. This meant the coordinator had to prioritize which pupils received the input based upon a range of elements, including the school year in which the pupils were. For those not included, it was often hoped that both the budget and external agency would be available to facilitate a repeat.

To ensure that programs being used kept up with the ever changing modern world, the need to evaluate the approaches used in implementing such programs is imperative. However, a number of participants highlighted a lack of such processes within their schools due to a range of difficulties.

Being honest, no (response to whether they evaluate the effectiveness of programs).
I mean it's very difficult in this present climate because the focus is on the academic.

Headteacher, School L

Reflective practices were highlighted by participants as being the only form of evaluation being utilized by the school and these were dependent upon observations made by staff.

These observations were based upon changes in pupil behavior, often performed on an ad hoc basis and open to an individual staff member's perspective and interpretation.

We don't have any official framework of evaluation, we just, I guess, it's just kinda ongoing in talking to the students and addressing situations and looking at their behavior and seeing how their behaviors change.

Assistant Head Teacher, School G

There were some attempts at utilizing formal assessment methods, but these tended to only explore pupil's knowledge, post program implementation without any pre-program measures to compare with. Such methods also did not assess the pupil's ability to practically utilize the knowledge gained in everyday life.

Well, it would be sort of questions and answers, or you know, matching if there's, say for instance, something on private parts, you know, just getting them to point to different things that I'm naming.

Lead Practitioner, School N

The lack of effective evaluation process was reported as being a shortfall which staff recognized and regretted.

Overarching Theme– Developing Positive RSE

Regardless of the difficulties and barriers faced by the participants, at the heart of it was their wish to provide RSE programs to their pupils.

Staff Competence

The role of program coordinator was often taken by an individual who had an interest in the topic. To take on the role, the coordinator needed to be able to cope with the various difficulties faced from others, including being confident and competent in delivering such programs [19]. Regardless of the participant's overall school position, the need to adapt and negotiate was imperative as the co-ordinators were very much the gatekeepers to accessing RSE programs [21]. This was due to many of the issues previously highlighted concerning prioritization of RSE by schools. Often this led to coordinators having to plan specialist events carefully so they could maximize the input whilst minimizing the overall impact upon the school timetable.

Negotiator and peacemaker were roles that coordinators frequently had to step into regarding program implementation and the tensions present within the wider school culture. However, often the tension was unseen but very real for the coordinators. This related to pressures many coordinators were under as they balanced their general teaching responsibilities with the role of RSE coordinator. Often the latter would involve taking time away from the former whilst the coordinator trained for the role or developed the program. This led to having a limited amount of time, and occasionally having to delegate either task to teaching

assistants. In most cases, these were experienced assistants but not being the teacher could have an impact upon the teaching and support being provided. This was the thin line faced by the coordinators who were class-based on a regular basis.

Good Practice

In spite of the pressures, conflicts and difficulties faced by participants, they continued to do their best to provide and develop a program. For some, this quest involved extensive research and training in specific programs that were being used with pupils who had intellectual disabilities. In these instances, participants described how there was still a need for further adaptation, including developing new approaches and thinking ‘outside of the box’. Such creativity was a necessity, because material needed to be further adapted for pupils with Autistic Spectrum Disorder, with a wide range of abilities and processing skills amongst pupils. Previous reviews have highlighted the wide range of “thinking outside of the box” that was required to provide all that was needed [3].

Well, with some of them with autism, as you know, might go well that’s that bedroom not my bedroom. So, things like parents sending in photographs of public and private. So bathroom, bedroom at home, using real photographs in school, and that’s a slight difference to other students.

Safeguarding and Prevention Officer, School F

At the time of the interviews occurring, there were a number of occasions when participants had reflected upon the needs of the pupils and effectiveness of the programs utilized. On these occasions, a review of the program was either in progress or was felt to be a necessity. Depending upon the school, such a review was possible, especially if the coordinator was part of or had the backing of senior leadership. Where such support was not present, the participant did their utmost to provide for the needs of their pupils.

Overall, the enthusiasm displayed by participants to develop a program that effectively met pupil needs was high. The rewards for participants were to provide an RSE program based upon a comprehensive framework which provided for everyone’s socio-sexual health needs. By achieving this, participants aimed to increase the knowledge and safety of pupils so that pupils could potentially experience effective and appropriate relationships.

So, therefore, our aim is always to make sure how we can empower, how can these young people get the choice to say yes as well as no. So we are, well the approach I take is very much they have the same rights as everyone else and it is how we enable them to have a normal sexual relationship when they grow up.

Safeguarding and Prevention Officer, School F

Discussion

The study results highlighted several similarities with previous studies, whilst also highlighting some new areas for consideration. As with previous studies utilizing interviews [29], there is a consistent recognition that present RSE programs do not adequately meet the socio-sexual needs of individuals with Autism Spectrum Disorder. The abstract nature of the topic requires more specific teaching beyond biology and general relationship areas. Also, there is a need to not make assumptions about whether the individual with Autism Spectrum Disorder draws the correct conclusions in relation to the information compared to their neuro-typical peers. Many staff drew attention to the need for better resources and for programs designed specifically for children with Autism Spectrum Disorder.

Unlike previous studies, the interview results have further increased the knowledge surrounding barriers to implementation by highlighting in more detail the impact of staff attitudes, particularly that of senior leadership, upon the ability to provide adapted programs within the limited time allocated to the RSE coordinator role. The commitment issues often led to programs being hastily compiled in between other teaching responsibilities and difficulties surrounding inconsistency, staff training and evaluation tools for the program. Such issues led to difficulties in the teaching process due to the fears of staff about participating in the subject and providing 'wrong' information or approaches.

In contrast to the attitudes present in some staff and senior leadership, it was reported by participants that the parental attitude toward the RSE programs seemed to be more positive. This contradicted previous studies [20, 21] which had highlighted the concerns raised by parents regarding the need for RSE. There were reports in this study relating to only very limited parental refusal in a child's participation in the program. This may be an indication of general social change surrounding the issues but could also be a reflection of the cultural and religious composition of the participating schools.

There have been suggestions in the literature that autistic individuals frequently misjudge sexual relationships [30] and it seems possible that this may begin in the school years. Where incidents of inappropriate sexualized behavior were highlighted within the interviews, there were indications of potential gaps in the knowledge base of the pupils. Often this has been because the students have not had a "safe place" to discuss the gaps as well as explore their perceptions of the information [26]. When such difficulties occurred, it would often lead to a reactive strategy, involving external services (such as local safeguarding agencies) and the potential labelling of pupils as "sexually problematic". These situations highlighted the inappropriateness or inflexibility of the program, or sometimes reflected an assumption that the pupil had understood what had been taught without any confirmation of this by staff.

Methodological Limitations

There were a number of methodological limitations that could have impacted upon the results and subsequent interpretation. Firstly, the recruitment of adequate numbers of schools that met the inclusion criteria and wished to participate proved difficult. This was only increased through the researcher widening the geographical locations sought. This brings into question whether the results could be generalized into the wider educational arena. The issue of generalizability [31] in reference to qualitative research findings has often been queried, with varying views. These have included the view that qualitative research's purpose is not

necessarily to generalize but to inform [32], and if such results are generalized then caution must be used in doing so, often due to limited numbers. The alternative issue concerning recruitment could also relate to staff attitudes about RSE, as highlighted within this study, where staff/schools have not seen the need to explore such a sensitive area.

Secondly, the recruitment of participants and their characteristics could have impacted upon the results of the interviews. Due to the limited number of respondents and their location, factors such as ethnicity and religion were not necessarily balanced. Reflecting upon the mix of teacher participants that were interviewed, the majority would have been classed as white middle class women. This may have meant they potentially had differing views of the subject than those from other ethnic backgrounds. This was particularly poignant considering that a small number of schools, specifically those in the London areas, had a multicultural mix of pupils not reflected in the staff who were the participants in this study. Additionally, it is important to note that all the schools were based in southern England, considering that the views on sex education can differ in parts of the country, such as Northern Ireland.

In relation to the schools included, the pupil skill and attainment levels were biased toward more able students. This could impact upon the ability to compare and generalize the various sex education programs used. This is particularly true regarding those schools providing for students who also have some pupils with more severe intellectual disabilities, requiring a very different program.

Conclusion

Overall, the study findings have further explored the issue of RSE and autistic students. The findings have reinforced the suggestion that the socio-sexual needs of individuals with Autism Spectrum Disorder are not consistently being met within RSE programs. This may often result in behavioral difficulties and a more reactive approach toward the issue. There is a need to be more proactive in the realms of RSE in order to reduce the misunderstandings that can occur in real life.

The study has explored beyond the material utilized in programs and have looked at some of the external factors that teachers describe as part of the battle to provide RSE, partly due to the attitudes of other staff but also due to the lack of resources. Consequently, the study has reinforced the need for the development of a program for pupils with Autism Spectrum Disorder, which explores the wider socio-sexual aspects of relationships and which would potentially reduce the risks and mistakes that can occur. Such a program would aim to minimize the inconsistencies that occur in the programs used, whilst enabling resources to be utilized more effectively.

This study has provide one perception of RSE programs in schools. However, following on from this study, it would be beneficial to gain insight from individuals with Autism Spectrum Disorders themselves, as to what they feel they need. Gaining an understanding about the actual needs of such pupils, rather than making assumptions, could enable the exploration of more specific questions such as:

- In what areas do individuals with Autism Spectrum Disorder actually need more support?

- Which teaching methods and materials best suit the learning styles of pupils with Autism Spectrum Disorder?

Such person centered exploration would improve understanding and could lead to the provision of a more effective and comprehensive RSE program.

Author Contributions All authors contributed to the study conception and design. Material preparation, data collection and analysis were performed by Mark Brown, and Glynis Murphy. The first draft of the manuscript was written by Mark Brown and all authors commented on previous versions of the manuscript. All authors read and approved the final manuscript.

Funding There was no funding available as it was done via M Brown PhD and supported by the Tizard Centre.

Data Availability Data and material held by lead researcher M. Brown.

Code Availability Data, codes and material held by lead researcher M. Brown.

Declarations

Ethics Approval Ethical approval was gained from The Tizard Ethics Committee as per procedure.

Consent to Participate Informed consent was obtained from all individual participants included in the study.

Consent for Publication All data was anonymised and no identifying details were included within the report.

Conflict of Interest The authors have no relevant financial or non-financial interests to disclose. The authors have no conflicts of interest to declare that are relevant to the content of this article. All authors certify that they have no affiliations with or involvement in any organization or entity with any financial interest or non-financial interest in the subject matter or materials discussed in this manuscript. The authors have no financial or proprietary interests in any material discussed in this article.

Open Access This article is licensed under a Creative Commons Attribution 4.0 International License, which permits use, sharing, adaptation, distribution and reproduction in any medium or format, as long as you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons licence, and indicate if changes were made. The images or other third party material in this article are included in the article's Creative Commons licence, unless indicated otherwise in a credit line to the material. If material is not included in the article's Creative Commons licence and your intended use is not permitted by statutory regulation or exceeds the permitted use, you will need to obtain permission directly from the copyright holder. To view a copy of this licence, visit <http://creativecommons.org/licenses/by/4.0/>.

References

1. Department for Education: *Relationships and sex education (RSE) and health education* DOE (2021)
2. Bloor, S., Ballantyne, C., Gillespie-Smith, K., Wilson, G., Hendry, G.: Investigating the challenges of teaching sex education to autistic learners: A qualitative exploration of teachers' experiences Research in Developmental Disabilities **131** Dec 2022 (2022)
3. Strnadová, I., Danker, J., Carter, C.: Scoping review on sex education for high school-aged students with intellectual disability and/or on the autism spectrum: Parents', teachers' and students' perspectives, attitudes and experiences. Sex. Educ. **22**, 3 (2021)
4. Vizard, E., Hickey, N., McCrory, E.: Developmental trajectories associated with juvenile sexually abusive behavior and emerging severe personality disorder in childhood: 3-year study. Br. J. Psychiatry. **190**(49), 27–32 (2007). <https://doi.org/10.1192/bjp.190.5.s27>

5. Silovsky, J.F., Hunter, M.D., Taylor, E.K.: Impact of early intervention for youth with problematic sexual behaviors and their caregivers. *J. Sex. Aggress. Vol.* **25**(1), 4–15 (2019). <https://doi.org/10.1080/13552600.2018.1507487>
6. Reichow, B., Volkmar, F.R.: Social Skills Interventions for Individuals with autism: Evaluation for evidence-based practices within a best evidence synthesis Framework. *J. Autism Dev. Disord.* **40**(2), 149–166 (2010). <https://doi.org/10.1007/s10803-009-0842-0>
7. Department for Education: Inclusive schooling: Children with Special Educational Needs DOE (2001)
8. Whitaker, P.: Provision for youngsters with Autism Spectrum disorders in mainstream schools: What parents say- and what parents want. *Br. J. Special Educ.* **34**(3), 170–178 (2007). <https://doi.org/10.1177/2396941519886475>
9. Braun, V., Clarke, V.: Using thematic analysis in psychology. *Qualitative Res. Psychol.* **3**(2), 77–101 (2006)
10. Creswell, J.W.: *Qualitative Inquiry and Research Design: Choosing among Five Approaches*. SAGE, Thousand Oaks, CA (2007)
11. Guest, G., MacQueen, K.M., Namey, E.E.: *Applied Thematic Analysis*. Sage, Thousand Oaks, CA (2012)
12. Frank, K., Sandman, L.: Supporting parents as sexuality educators for individuals with intellectual disability: The development of the Home B.A.S.E Curriculum. *Sex. Disabil.* **37**(3), 329–337 (2019). <https://doi.org/10.1007/s11195-019-09582-7>
13. Chappell, P., Johns, R., Nene, S., Hanass-Hancock, J.: Educators' perceptions of Learners with Intellectual Disabilities' sexual knowledge and Behaviour in KwaZulu-Natal, South Africa. *Sex. Educ.* **18**(2), 125–139 (2018). <https://doi.org/10.1080/14681811.2017.1405801>
14. Klett, L.S., Turan, Y.: Generalized Effects of Social Stories with Task Analysis for Teaching Menstrual Care to three young girls with autism. *Sex. Disabil.* **30**(3), 319–336 (2012). <https://doi.org/10.1007/s11195-011-9244-2>
15. Hanass-Hancock, J., Nene, S., Johns, R., Chappell, P.: The impact of contextual factors on Comprehensive Sexuality Education for Learners with Intellectual Disabilities in South Africa. *Sex. Disabil.* **36**(2), 123–140 (2018). <https://doi.org/10.1007/s11195-018-9526-z>
16. Parchomiuk, M.: Specialists and sexuality of individuals with disability. *Sexuality Disabil.* **30**(4), 407–419 (2012). <https://doi.org/10.1007/s11195-011-9249-x>
17. Graff, H.J., Moyher, R.E., Bair, J., Foster, C., Gorden, M.E., Clem, J.: Relationships and sexuality: How is a young adult with an intellectual disability supposed to navigate? *Sexuality Disabil. June.* **36**(2), 175–183 (2018). <https://doi.org/10.1007/s11195-017-9499-3>
18. Nelson, B., Odberg, K., Pettersson, Emmelin, M.: Experiences of Teaching Sexual and Reproductive Health to students with intellectual disabilities. *Sex. Educ.* **20**(4), 398–412 (2020). <https://doi.org/10.1080/14681811.2019.1707652>
19. Aderemi, T.J.: Teachers' perspectives on sexuality and sexuality education of Learners with Intellectual Disabilities in Nigeria. *Sex. Disabil.* **32**(3), 247–258 (2014). <https://doi.org/10.1007/s11195-013-9307-7>
20. Stokes, M.A., Kaur, A.: High-functioning autism and sexuality: A parental perspective. *Autism.* **9**(3), 266–289 (2005). <https://doi.org/10.1177/1362361305053258>
21. Pownall, J.D., Jahoda, A., Hastings, R.P.: Sexuality and sex education of adolescents with intellectual disability: Mothers' attitudes, experiences, and support needs. *Intellect. Dev. Disabil.* **50**(2), 140–154 (2012). <https://doi.org/10.1352/1934-9556-50.2.140>
22. Blanchett, W.J., Wolfe, P.S.: A review of Sexuality Education Curricula: Meeting the Sexuality Education needs of individuals with moderate and severe intellectual disabilities. *Res. Pract. Persons Severe Disabil.* **27**(1), 43–57 (2002). <https://doi.org/10.2511/rpsd.27.1.43>
23. Schaafsma, D., Kok, G., Stoffelen, J.M.T., Curfs, L.M.G.: People with intellectual disabilities talk about sexuality: Implications for the development of Sex Education. *Sex. Disabil.* **35**(1), 21–38 (2017). <https://doi.org/10.1007/s11195-016-9466-4>
24. Lehan Mackin, M., Loew, N., Gonzalez, A., Tykol, H., Christensen, T.: Parent perceptions of sexual education needs for their children with autism. *J. Pediatr. Nurs.* **31**(6), 608–618 (2016). <https://doi.org/10.1016/j.pedn.2016.07.003>
25. Visser, K., Greaves-Lord, K., Tick, N.T., Verhulst, F.C., Maras, A., van der Vegt, E.J.M.: A randomized controlled trial to examine the effects of the tackling teenage psychosexual training program for adolescents with Autism Spectrum Disorder. *J. Child Psychol. Psychiatry.* **58**(7), 840–850 (2017). <https://doi.org/10.1111/jcpp.12709>
26. Frawley, P., Wilson, N.J.: Young people with intellectual disability talking about Sexuality Education and Information. *Sex. Disabil.* **34**(4), 469–484 (2016). <https://doi.org/10.1007/s11195-016-9460-x>
27. EQUALS 14–19 EsSENTials: Sex and Relationships Education: Supplementing Moving On Third Edition Schemes of Work for Students with Learning Difficulties EQUALS (2010)

28. Corona, L.L., Fox, S.A., Christodulu, K.V., Worlock, J.A.: Providing Education on Sexuality and relationships to adolescents with Autism Spectrum Disorder and their parents. *Sex. Disabil.* **34**(2), 199–214 (2016). <https://doi.org/10.1007/s11195-015-9424-6>
29. Hatton, S., Tector, A.: Sexuality and Relationship Education for young people with autistic spectrum disorder: Curriculum change and staff support. *Br. J. Special Educ.* **37** No. 2 (2010)
30. Stokes, M.A., Newton, N., Kaur, A.: Stalking, and social and romantic functioning among adolescents and adults with autism spectrum disorder. *J. Autism Dev. Disord.* **37**(10), 1969–1986 (2007). <https://doi.org/10.1007/s10803-006-0344-2>
31. Falk, I., Guenther, J.: *Generating from qualitative research: case studies from VET in contexts*, AXE-TRA, Crows Nest, paper presented at the 10th Australian Vocational Education and Training Research Conference (2007). <http://hdl.voced.edu.au/10707/162542>
32. Myers, M.: Qualitative research and the generalizability question: Standing firm with Proteus. *Qualitative Rep.* **4**(3), 1–9 (2000). March 2000 <https://doi.org/10.46743/2160-3715/2000.2925>

Publisher's Note Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.