



Current Status of Sex Education Curriculum Implementation for Disabled Students in China

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Abstract. Sex education for the disabled community refers to comprehensive sex education that focuses on disabled individuals as the primary audience. Its purpose is to protect and promote the sexual and reproductive health and rights of disabled individuals by providing them with high-quality information and services related to sexual and reproductive health. Regardless of whether individuals have psychological, physical, or emotional disabilities, they are all sexual beings with the same rights to enjoy sexuality. This includes receiving high-quality sex education and sexual and reproductive health services [1]. This study conducted a survey using questionnaires among 260 special education professionals in the Chinese provinces of Henan, Shandong, Sichuan, and Guangdong. Data analysis was performed using SPSS 23.0. The aim of the study was to understand the level of necessity and acceptance among Chinese special education professionals regarding the implementation of sex education for disabled students. Based on the survey results, the hope is to contribute to the development of sex education for disabled students in China.

Keywords: Disabled students; Sex education; Special education; Curriculum implementation.

1 Introduction

On June 1, 2021, the revised *Law of the People's Republic of China on the Protection of Minors* clearly stipulated that “schools and kindergartens shall provide sex education suitable for minors of their age,” officially incorporating “sex education” into the law. Additionally, the *Outline for the Development of Children in China (2021-2030)* also emphasizes the integration of sex education into the basic education system. In recent years, an increasing number of scholars have recognized that education for disabled students should not be limited to basic needs but should also focus on special education and their physical and mental well-being, making sex education essential. Furthermore, disabled students go through a puberty development phase that is essentially the same as that of regular students. They face a range of sexual concerns and challenges just like their non-disabled peers. However, due to the various types of disabilities they may

have, their cognitive abilities, including judgment and understanding, might be comparatively lower. This can result in limited access to external information related to sexuality, leading to a lower level of sexual knowledge. Consequently, disabled students might be at a higher risk of sexual exploitation compared to their non-disabled peers.

Sex is a natural instinct for every individual, and sensory, visual, intellectual, or physical disabilities do not diminish their sexual desires. Disabled individuals are often misunderstood by people as not having sexual needs. This misunderstanding can stem from the fact that in their real lives, they often lack the conditions and environment to fully express their sexual needs. Moreover, society sometimes wrongly assumes that physical disabilities naturally equate to a lack of sexual capability. Modern studies in sexual medicine and physiology have confirmed that the complete or partial loss of reproductive organ function does not signify the end of sexual life. This is because sexual climax is, in fact, a holistic response that encompasses both physiological and psychological aspects, and it is not limited solely to reproductive organ participation. It has been found in research, for instance, that individuals with varying degrees of cerebral palsy, despite their disabilities, still experience sexual desire and can achieve sexual climax or conceive [2].

Furthermore, individuals have a need for love and belonging, which includes receiving care and acceptance from others. Due to variations in an individual's hormone levels, there can be significant individual differences in the psychological need for sex among disabled individuals. Different types of disabilities may also result in varying degrees of psychological needs and interest in sex. For most disabled individuals, the degree of their disability does not directly affect their reproductive organs or sexual function. It does not diminish their psychological feelings and desires related to sex, nor does it hinder their emotional need for intimate relationships with others. However, some studies have shown that disabled individuals may intentionally distort their sexual cognition to suppress their interest in sex [3]. The *Law of the People's Republic of China on the Protection of the Rights and Interests of Persons with Disabilities* (2018 Revision) clearly specifies the basic rights protection for disabled individuals, including the right to receive education on an equal basis. The *Law of the People's Republic of China on the Protection of Minors* (2020 Revision) also states that suitable sex education should be provided to minors according to their age [4]. This implies that disabled students should also receive sex education appropriate for their age. In recent years, the issue of sex education for disabled students has garnered the attention of many researchers and practitioners, gradually becoming an important component of school education.

In China, compared to the research on sex education for regular students, there is limited research on sex education for disabled students. This scarcity of research directly impacts the development of sex education programs. While some schools acknowledge the importance of sex education in their teaching, they face numerous challenges when implementing it. Currently, China lacks standardized curriculum guidelines, teaching plans, design, implementation, and evaluation for sex education specifically tailored to disabled students. Teaching materials for sex education targeting disabled students are also in short supply, sometimes limited to the adaptation of sex education materials designed for non-disabled students. Consequently, China's current

state of sex education is still a challenging one, with issues such as a generally low level of sexual knowledge dissemination and a lack of sexual knowledge [5]. Therefore, in order to understand the perceived importance of implementing sex education for disabled students and the acceptance of sex education curriculum content among special education professionals in China, this study employed a self-designed questionnaire titled *Attitudes of Special Education Professionals Towards the Implementation of Sex Education*. It surveyed 260 special education professionals in Henan, Shandong, Sichuan, and Guangdong provinces. The aim is to contribute to the development of sex education in special education schools in China.

2 Conclusion

The survey results indicate that respondents aged 50 and above have a lower level of gender awareness, willingness to accept sex education, and perceived necessity of course content compared to respondents in other age groups. Among non-education majors and education majors (including special education and other education-related majors), non-education majors have a lower level of gender awareness. However, there is no significant difference in the willingness to accept sex education between the two groups. However, based on the mean values, it is evident that the willingness to accept sex education is slightly higher in the education-special education group compared to education-other majors, and the willingness to accept sex education is slightly higher in non-education majors compared to education majors in other fields. Furthermore, the perceived necessity of the content of sex education courses is significantly higher in non-education majors compared to education-other majors.

In the survey on the impact of school types on sex education, it was found that special education schools had a significantly higher level of gender awareness and acceptance compared to inclusive education schools. Furthermore, in terms of the willingness to accept sex education, special education schools also showed a significantly higher level of acceptance compared to inclusive education schools. However, when it came to the perceived necessity of the content of sex education courses, inclusive education schools exhibited a significantly higher level of perceived necessity compared to special education schools.

Additionally, the participation in sex education-related teacher training showed a significant difference in gender awareness and acceptance. Specifically, those who had participated in sex education-related teacher training had a significantly higher level of gender awareness and acceptance compared to those who had not participated in such training. However, the group that had participated in sex education-related teacher training had a slightly lower perceived necessity of the content of sex education courses compared to the group that had not undergone such training. Among the surveyed participants, 72.3% stated that they had attempted to conduct sex education courses for students. Approximately 65.4% of the respondents indicated that they primarily accessed course content through relevant published books, and 49.8% reported delivering sex education courses through lectures. Moreover, 43.3% of the respondents mentioned that they conducted sex education courses during regular class hours.

Furthermore, the survey revealed that the majority of respondents considered hearing impairment (21.1%) to be the most suitable disability for participating in sex education courses, followed by visual impairment (18.9%). A smaller proportion of respondents (13.4%) believed that individuals with physical disabilities were the most appropriate candidates for sex education courses.

Lastly, in terms of the methods for conducting sex education courses, 29.3% of the respondents believed that sex education courses could be integrated into mental health classes. Additionally, 28.1% of the participants thought that sex education courses could be facilitated through collaboration with relevant social organizations, seeking professional expertise, and conducting online sex education courses via live streaming. Furthermore, 18.4% of the respondents believed that sex education courses could be delivered through cooperation with relevant social organizations, seeking professional expertise, and conducting offline sex education courses.

3 Suggestions

(1) Strengthening the Protection of Disabled Students' Sex Education Rights.

As society has progressed, countries around the world have made significant advancements in strengthening the protection and promotion of the human rights of disabled individuals. An important principle in many laws and regulations is to prevent discrimination and the stigmatization of the rights of disabled communities. This principle extends to various areas of life, including education and healthcare. However, obstacles still persist in political, social, and personal aspects, which, to some extent, hinder disabled communities from fully exercising their rights and obtaining equal opportunities in their lives. In this context, the needs of disabled students related to sexual health are of particular concern. Regardless of whether individuals have psychological, physical, or emotional disabilities, they are all sexual beings and have the same rights to enjoy their sexuality while also having access to high-quality sex education and sexual and reproductive health services [6].

Providing sex education to disabled students is one of the key intervention measures to promote their health and development. Therefore, it is essential to enhance awareness of the importance, necessity, and rights of providing sex education to disabled students. Relying solely on the disabled community to obtain their sexual expression rights is far from sufficient. Moreover, when faced with information barriers or deficiencies, and a lack of proper guidance in sex education, their modes of expression may not necessarily align with societal ethics. Therefore, it is particularly important to enhance the protection of the sex education rights of disabled students by enacting or optimizing relevant laws and regulations. This will improve public awareness of the importance of sex education and create a more inclusive social environment.

Family and social resources play an important role in promoting the development of sex education for students with disabilities. To enhance parents' knowledge, attitudes and skills in sex education, schools can also enhance the understanding of parents of students with disabilities about sex education through various means, such as organis-

ing classes on sex education for parents, publicity seminars, and organising participation in relevant activities, in addition to policy and legal literacy and socio-cultural publicity. In addition, social organisations are also an important force and supplement in the development of the education system, and can provide abundant resources for the development of sex education for students with disabilities, such as: producing community bulletin boards; developing online courses; and distributing sex education manuals. In various forms, they can raise the attention and enthusiasm of various departments and schools for sex education for students with disabilities, thereby promoting the continuous development and improvement of relevant policies.

(2) Develop Targeted Sex Education Curriculum for Disabled Students.

Sex education encompasses various aspects, such as gender awareness, gender identity, sexual psychology, prevention of sexual abuse, puberty education, and HIV/AIDS prevention knowledge. If inappropriate sexual behavior among disabled students is not corrected in a timely manner and if they are not provided with the right educational guidance, it can affect their social adaptation and even pose a threat to the safety of the public environment.

Sex education for disabled students should begin from an early age and should continue during their attendance at special education schools. However, due to the physical and mental differences between disabled students and regular students, as well as variations in the development of students with different types of disabilities, disabled students exhibit differences in their expressions of sexual behavior compared to regular students and among students with different types of disabilities. Therefore, special education schools should develop sex education curriculum content that is more suitable for disabled students based on their disability type and severity before implementing sex education programs. Each disabled student's situation varies significantly, so during the curriculum development process, attention should be given to the common needs of different types and severity levels of disabled students, and individualized sex education should be conducted based on the varying developmental levels and specific needs of each disabled student.

(3) Enhance Special Education Workers' Sex Education Competencies through Various Means.

The survey shows that fewer than 10% of the respondents have participated in training related to puberty education, and most of them feel inadequately equipped to handle student sexual behavioral issues. In the process of practical sex education, special education teachers often suffer from a lack of expertise, embarrassment, and feelings of incompetence. To address this issue, improvements can be made through diverse and multi-faceted approaches. For example, special education schools can offer sex education-related courses or lectures for teachers. Teaching materials are the main form of presenting curriculum content in teaching, and are one of the essential curriculum resources for teaching. At present, most of the content of sex education in Chinese schools is contained in the form of scattered fragments in the education curriculum, and there are no standardised and systematic educational materials [7]. It is therefore recommended that the relevant authorities further review and standardise the content of sex education for students with disabilities on the basis of sex education guidance programmes or guidelines, and provide appropriate, high-quality educational materials for

teachers' reference and use. Additionally, universities can introduce relevant courses to establish a strong foundation for future professionals to better handle sex education programs.

Although special educators currently have a positive outlook on sex education for students with disabilities, not many of them are actually implementing it effectively due to limitations and deficiencies in various areas. Teachers do not have a good understanding of their own responsibility to carry out sex education and are not sufficiently motivated to do so, and there is a gap between the ideal and the reality of sex education for students with disabilities. With the increasing awareness of sex education among students in all sectors of society, sex education is no longer simply education on physiological hygiene or prevention of sexual abuse; it is personality development based on a better life for students, and it is a lifelong education for students with disabilities to better adapt to life. Therefore, it is necessary to further explore the issue from different perspectives in the future, so as to jointly promote the development of sex education for students with disabilities, and to better promote the healthy growth of students with disabilities.

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