

Top Five Tips for Including People with Disabilities in STI Care and Education

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Reflect on and challenge biases or myths your organization might hold.

People with disabilities are often misrepresented in the sexual health field, frequently portrayed as either not interested in sex or incapable or having safe, consensual relationships. In reality, people with disabilities do engage in sex and relationships, and can thrive when they have accessible, accurate information (Frawley et al., 2020, Hole et al., 2022). Reflecting on these myths helps ensure your work does not reinforce stigma nor perpetuate harmful ideas.

While people with disabilities are at higher risk for abuse and mistreatment than their abled peers (Hole et al., 2022), this does not mean their sexual health information should focus solely on risk and protection. Use positive, affirming language that focuses on agency and affirms self-worth. Make sure your materials are supportive of individuals' rights to make healthy choices for themselves.

What you can do:

- Review literature and [guidance on disability bias](#) and consider how it applies to sexual health.
- Conduct an internal audit: How does your organization talk about people with disabilities in materials, presentations, and team discussions?
- Ask staff to reflect on assumptions they may hold by incorporating brief reflection questions into team meetings or trainings to make this an ongoing practice.



Make sure your clinic or office—and the materials you share—are accessible.

Accessibility includes both your physical space and the information you provide. Check that the entrance to the building, as well as any offices, waiting areas, and restrooms, are accessible for people who use wheelchairs, walkers, or other mobility aids. Ramps, automatic doors, and appropriately wide doorways are

essential so all clients can enter and move through your space. A truly accessible space also considers more than just movement—sensory needs are important to take into account, too. Consider having a quiet space with minimal light or sound stimulation, or separate areas depending on people’s sensory needs.

Accessibility also applies to communication. Use easy-to-understand, plain language so everyone can comprehend their sexual health options. Keep language concrete, specific, and direct, avoiding jargon. Additionally, provider training and curriculum materials created by people with disabilities already exist, and integrating these helps ensure your services reflect real community needs.

What you can do:

- Review [ADA accessibility standards](#) and move through your office or clinic to identify physical barriers.
- Invite local disability organizations or advocates to provide feedback on your physical space and written materials.
- Use tools like a [plain language guide](#) to revise your pamphlets, directions, and memos.
- Look for materials created by and with individuals with disabilities.



Collaborate with schools to reduce barriers to accessing sexual health information.

Schools are a great place to reach a large population of youth with sexual health information. However, young people with disabilities can be excluded from sex education classes, and information often isn’t provided at the appropriate developmental time frames, such as puberty and young adulthood. Collaborate with local schools and universities to ensure that students with disabilities are receiving the information they need in a timely manner. For example, attend school board meetings and other curriculum discussions to advocate directly for students with disabilities.

What you can do:

- Develop relationships with school boards, post-secondary education leadership, and community organizations to advocate for inclusion of students with disabilities in sexual education classes. Consider this [community action toolkit](#) for more information.



Include people with disabilities in decision making.

Having an advisory board or representatives from the disability community can help to ensure that all of your messaging and materials are useful for people with disabilities. Include people with a variety of disabilities such as intellectual or developmental disabilities and physical disabilities. Make sure that the suggestions from people with disabilities are taken seriously and integrated into programming. Listening to the voices of people with disabilities and enacting their recommendations not only makes your work more accessible, but it also makes sure you avoid common mistakes or errors that need corrective action later.

What you can do:

- Establish an advisory board or working group of people with a range of disabilities and identities to ensure multiple perspectives are represented.
- Use best practice [guides on creating advisory boards](#) to define roles, expectations, and compensation.
- Build a process to document, respond to, and implement feedback so contributions translate into action.



Get feedback from the disability community.

If forming an advisory board or hiring a consultant is not feasible, make sure to ask members of the community for input on your materials and programming. Community members can provide valuable feedback to guide your programming and assess whether your materials are understandable, respectful, and meeting their needs. Additionally, many resources and tools created by people with disabilities already exist and can help you adapt or refine your programs.

What you can do:

- Create a brief community survey for feedback on new materials. Share it with local organizations that serve individuals with disabilities.
- Contact your local [centers for independent living](#) to connect with local resources and community members that can advise on your work.
- Hold short listening sessions or virtual focus groups to gather deeper insights.
- Review existing disability-led resources to align your approach with community-identified best practices.

Resources

- [Your Sexual Health Toolkit](#) by Project SHINE
- [Our Lives, Our Choices, Our Rights!](#) by the Rainbow Support Group
- [Clinician's Guide to Disability-Informed Care](#) by the National Coalition for Sexual Health
- [Refining a Sex Education Curriculum for Young Adults with Intellectual Disabilities](#) by Child Trends
- [Sexuality and Developmental Disabilities Workshops](#) by Elevatus Training
- [The Arc: For people with intellectual and developmental disabilities](#) by the Arc

References

Frawley, P., & O'Shea, A. (2020) "Nothing about us without us": Sex education by and for people with intellectual disability in Australia. *Sex Education*, 20(4), 413-424. DOI: 10.1080/14681811.2019.1668759

Hole, R., Schnellert, L., & Cattle, G., (2022). Sex: What is the big deal? Exploring individuals' with intellectual disabilities experiences with sex education. *Qualitative Health Research*, 32(3), 453-464.

Contact

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