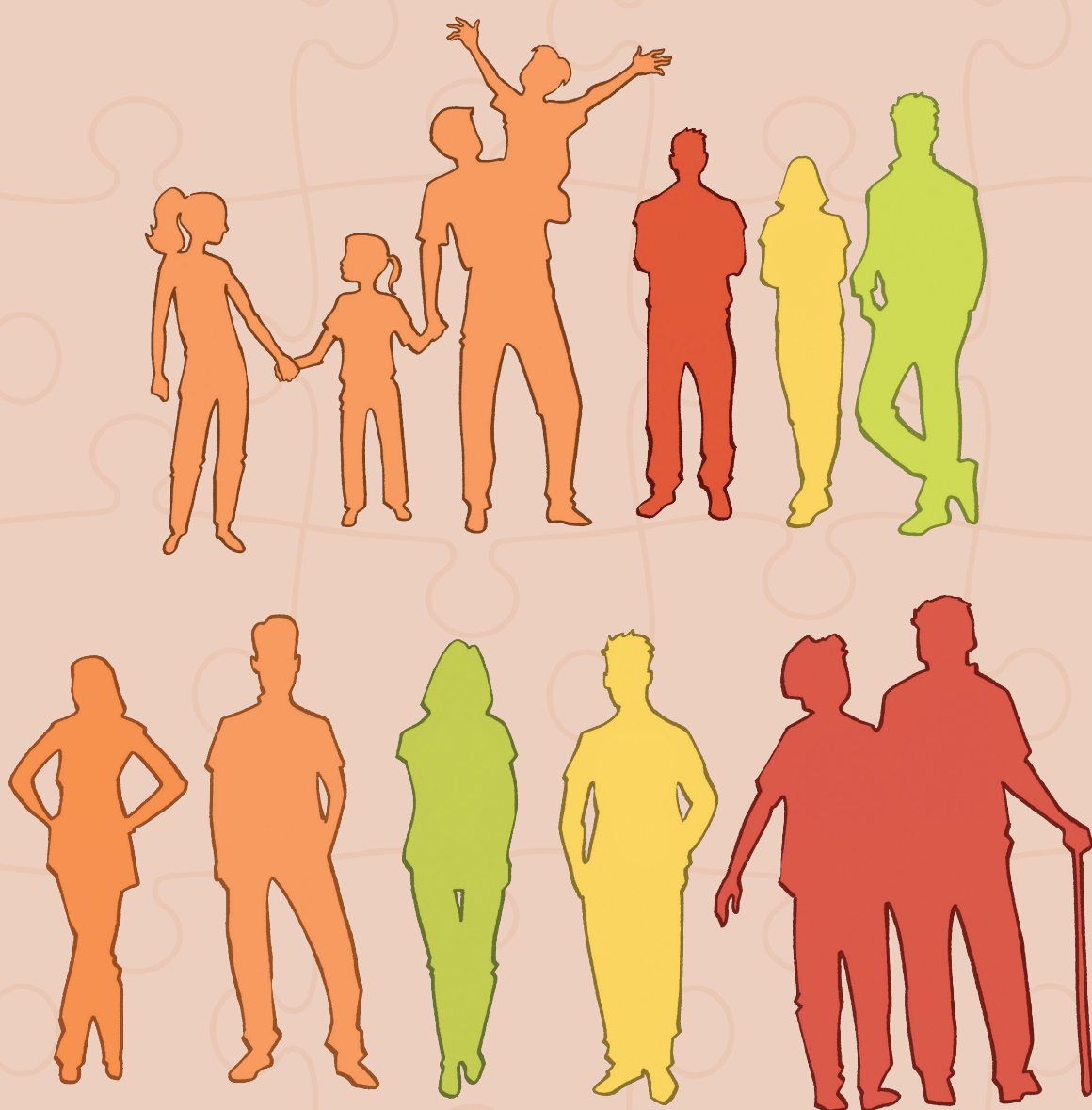


SEXUAL HEALTH – REDUCING THE RISK OF STIS



Ресурсни центар за специјалну едукацију

INTRODUCTION

This lesson plan is for educators and support people working with young people with intellectual disability and/or on the autism spectrum. It focuses on understanding *Sexual health – reducing the risk of sexually transmitted infections* (STIs) and follows the International Technical Guidance on Sexuality Education (ITGSE) framework under the theme *Sexual and reproductive health*. The lesson teaches students how STIs can be passed from one person to another, what the symptoms might be, and how to prevent them. It includes clear information about using condoms, getting regular STI tests, and talking openly with partners. This lesson helps students stay safe, take care of their sexual health, and make respectful, informed choices in their relationships.

This lesson plan uses evidence-based practices (EBPs), which are recognised as best practice for teaching students with intellectual disability and/or on the autism spectrum. It supports teacher delivery through structured resources, scenario-based activities, and age-appropriate educational videos developed by [Amaze.org](https://amaze.org).

This lesson is part of *Sex education for students with intellectual disability and on the autism spectrum: A practical methodology guide*, a resource that supports educators to deliver accessible, inclusive, and trauma-informed sex education to students aged 15 and over with intellectual disability and/or on the autism spectrum. Grounded in evidence-based practices, the Guide promotes the rights of students to sexual autonomy, safety, and well-being, aligning with the UN Convention on the Rights of Persons with Disabilities and the Sustainable Development Goals, which call for inclusive education, gender equality, and good health for all. The lesson content also reflects the key concepts outlined in the International Technical Guidance on Sexuality Education (ITGSE), ensuring that teaching is comprehensive, rights-based, and responsive to the learning needs and aspirations of students with disability.

[Full Guide](#)

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Sexual health – reducing the risk of STIs



What does it mean?

Sexual health refers to physical, emotional, mental, and social well-being in relation to sexuality. Key examples include practicing safe sex through the use of condoms and contraception, regular health check-ups and STI screenings, and fostering emotional well-being regarding one's sexual orientation and identity. Additionally, it involves being informed about sexual health, having access to reproductive healthcare services, and understanding and exercising sexual rights, such as making decisions about one's own body and accessing necessary health services without discrimination.

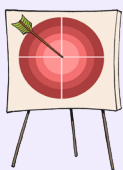
Reducing the rates of STIs is a critical component of promoting sexual health. This includes educating students about the transmission, symptoms, and prevention of STIs, such as the correct and consistent use of condoms, regular STI testing, and open communication with sexual partners.



Why is it important?

People with intellectual disability and/or on the autism spectrum have higher rates of STIs than people without disability^{1, 2, 3}. Some research has indicated that their rates of contracting STI is eight times higher than that of people without intellectual disability¹. The lack of education about sexual and reproductive health is believed to contribute to these statistics, and that it exacerbates people with intellectual disability and/or on the autism spectrum's vulnerability to contracting STIs^{1, 3}. By providing comprehensive information and fostering a non-judgmental and supportive environment, education about sexual health helps students develop responsible attitudes and behaviours, reducing the prevalence of STIs and promoting overall sexual health. This education also emphasises the importance of seeking medical advice and treatment when necessary, thereby ensuring students are well-informed and empowered to protect their health and the health of others.

Learning outcomes based on teacher's and student's perspectives

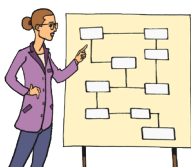


Learning outcomes

Students can recall the definition of STIs.
Students can explain the importance of practicing safe sex to prevent STIs.

Accessible learning outcome

I know what STI means and what they are.
I know that practicing safe sex can prevent STIs.



EXAMPLE LESSON PLAN

Topic: **Sexual health: reducing the risks of STIs**

Note for teachers:

People who have contracted sexually transmitted infections, especially HIV, face significant stigmatisation. This topic should be presented by teachers in a way that does not deepen this stigmatisation.

It is important that teachers provide students with accurate information about prevention and about where to go for testing. Teachers should prepare telephone numbers and links to local clinics that offer sexually transmitted infection testing. Teachers should discuss support options with students if they need them.

It is important to mention that in Eastern Europe, there is an increase in sexually transmitted infections including HIV. Preventive measures are crucial, including accurate education about the importance of using condoms and dental dams during sexual activities.

Learning outcomes	EBP/teaching strategy	Resources needed
Students can recall the definition of STIs.	Scenarios	Video player
Students can explain the importance of practicing safe sex to prevent STIs.		Red, orange and green cards Appendix 1: Distinguishing risk in sexual activities

Lesson sequence

Introduction: Ask students what they know about STIs

Prompts:

- Do you know what STIs are?
- What does STIs stand for?
- Can you name any of the types of STIs?
- Can you think of how to avoid or reduce the chances of getting STIs?



Activity 1: What are STIs?

As a class, watch the [What are STIs?](#) video on Amaze.org.

What did we learn from this video?

Prompts:

- What are STIs?
- Can you get STIs from any sexual activity?
- What are some of the symptoms of STIs?
- How frequently should you get tested for STIs if you are sexually active?
- What are the two things you should do if you are sexually active?



Activity 2: Risk levels of sexual activity

The teacher uses [Appendix 1: Distinguishing risk in sexual activities](#). Students have different coloured cards that related to the risk of catching an STI, red card: high risk, orange card: medium risk, green card: no risk.

The teacher distributes and reads the scenarios aloud to the class. As the teacher reads through the scenarios students are to think of the type of risk for each scenario and use their coloured cards to explain the risk.

Red card: High risk,

Orange card: Low risk,

Green card: No risk.

No risk ✓

Low risk !

High risk ✗

Scenario 1: No risk, masturbation	Scenario 2: No risk, abstinence	Scenario 3: High risk, sex without protection
Ema and David have been dating for six months. They like to touch and kiss each other. Sometimes when they are alone in a bedroom, they masturbate in front of each other.	Andrea is a 17-year-old girl. Andrea decided that she won't have sex with anyone. Andrea is abstinent. This means she will not have any sexual activity with another person.	Pavel is a 19-year-old young man. Pavel likes to go to nightclubs on weekends. When he is at a nightclub, he will often go home with a woman he just met. Pavel will have unprotected sex, this means he does not use a condom.
Scenario 4: No risk, sexting	Scenario 5: High risk, signs of infection	Scenario 6: Low risk, sex with protection
Alex started dating Jana. Alex and Jana are texting each other. They talk about sex in their text messages.	Patrick is 16 years old. He had sex with his friend Barbara at a party. They did not use any contraception when they had sex. Patrick's penis burns when peeing. His penis has red bumps on the shaft. A few weeks later, Patrick gets a new girlfriend called Anna. He wants to have sex with Anna.	Alice likes to socialise. She meets new men at bars. Alice enjoys sex. She often changes sexual partners. Alice regularly uses condoms.



Activity 3: What to do if I am worried?

The teacher reads a scenario aloud to the class, students are to think of solutions to the problem in the scenario.

Scenario: Before we have sex

Thomas is 20 years old. Thomas had sex with a friend. He didn't use a condom. His penis itches when he urinates. Thomas thinks that he might have contracted an STI. What can Thomas do now?

Prompts:

- Do you think Thomas needs help?
- Who could Thomas go to for help?
- Can Thomas confide in someone?
- Where could Thomas go to get a checkup and test?

It is important to emphasise to students that they should see a doctor (their GP or a gynecologist) if they think they need help. They can also go to a sexual health clinic. If they are over the age of 14 (this changes country to country), they don't need to go with their parents. Everything discussed with a doctor is confidential, which means it is their private information and will not be shared with other people.

Students can also confide in someone they trust (e.g. parents, social worker, teacher).

Most infections can be treated, and most symptoms can be managed with medication.

Conclusion: Recap what was taught in this lesson.

Ask students if they can explain what an STI is and how they are transmitted.

Remind students of where they can go and who they can talk to if they need support.



Teacher reflection

Reflect on the lesson asking yourself:

- Did the lesson cater to the diverse learning preferences and needs of the students?
- How can I build on this lesson to support students to continue to develop their knowledge, understanding and skills of reducing the chances of contracting and STI?
- Where the scenarios relevant to my students? Do they need to be adjusted to be more relevant to my class?
- Were there any parts of this lesson that should be recapped or repeated to help students consolidate their learning?

References

- 1 Frawley, P., & Wilson, N. J. (2016). Young people with intellectual disability talking about sexuality education and information. *Sexuality and Disability*, 34(4), 469–484. <https://doi.org/10.1007/s11195-016-9460-x>
- 2 Gil-Llario, M. D., Morell-Mengual, V., Ballester-Arnal, R., & Díaz-Rodríguez, I. (2017). The experience of sexuality in adults with intellectual disability. *Journal of Intellectual Disability Research*, 62(1), 72–80. <https://doi.org/10.1111/jir.12455>
- 3 Organization for Autism Research. (2022, October 27). *Dating 101*. <https://researchautism.org/self-advocates/sex-ed-for-self-advocates/dating-101/>

Appendix 1: Distinguishing risk in sexual activities

[BACK](#)
No risk ✓

Low risk !

High risk ✕

Scenario 1: no risk, masturbation

Ema and David have been dating for six months.
They like to touch and kiss each other.
Sometimes when they are alone in a bedroom, they masturbate in front of each other.

Scenario 2: no risk, abstinence

Andrea is a 17-year-old girl.
Andrea decided that she won't have sex with anyone.
Andrea is abstinent.
This means she will not have any sexual activity with another person.

Scenario 3: high risk, sex without protection

Pavel is a 19-year-old young man.
Pavel likes to go to nightclubs on weekends.
When he is at a nightclub, he will often go home with a woman he just met.
Pavel will have unprotected sex, this means he does not use a condom.

Scenario 4: no risk, sexting

Alex started dating Jana.
Alex and Jana are texting each other.
They talk about sex in their text messages.

Scenario 5: high risk, signs of infection

Patrick is 16 years old.
He had sex with his friend Barbara at a party.
They did not use any contraception when they had sex.
Patrick's penis burns when peeing.
His penis has red bumps on the shaft.
A few weeks later, Patrick gets a new girlfriend called Anna.
He wants to have sex with Anna.

Scenario 6: low risk, sex with protection

Alice likes to socialise.
She meets new men at bars.
Alice enjoys sex.
She often changes sexual partners.
Alice regularly uses condoms.