

TEACHERS' AND PARENTS' ATTITUDE TO RELEVANCE OF SEXUALITY EDUCATION OF ADOLESCENTS WITH MILD INTELLECTUAL DISABILITIES

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Abstract

The article deals with teachers' and parents' attitudes towards sexuality education of adolescents with mild intellectual disabilities. It is indicated that teachers treat sexuality education as a relevant problem of education of adolescents with mild intellectual disabilities due to pupils and parents' insufficient knowledge about sexuality education. Informants are particularly concerned about pupils' active sex life, which often results in early pregnancy, sexually transmitted diseases, etc. Problems are determined by pupils' emotional and behavioural problems, lack of social skills, and deepened by the negative impact of the family and environment. During the research, the prevalence of different attitudes of participants of the educational process (parents and teachers) towards sexuality education of adolescents with mild intellectual disabilities in social and educational environment was observed. Teachers state that sexuality education is a relevant problem due to pupils' early sexual interactions, lack of social skills, emotional and behavioural problems and demonstration of destructive sexual behaviour.

Keywords: *sexuality education, disability, adolescents with mild intellectual disabilities, social skills.*

Introduction

The pupil with mild intellectual disabilities is a member of a certain community; he/she is surrounded by *social environment*: family, its members, friends, peers, etc. (Ustilaitė 2001; Obelenienė & Pukelis, 2004, etc.) and *educational environment*: communities of the class, school (Westheimer & Stanford, 2005; Veglia, 2004; Ustilaitė, 2008, etc.). Sexuality education is inseparable from the concept of gender, which is consciously or unconsciously conveyed by *social, educational and cultural environment*. Every person is born with a particular sex, these innate biological differences are given a social meaning in the cultural environment, social differences are constructed; i.e., “feminine” or “masculine” roles, behaviour, character traits. Purvaneckienė & Purvaneckas (2001) notes that gender formation is influenced by the attitude of the very parents, teachers and surrounding persons to the construct of gender, to masculine and feminine roles. These attitudes become the basis for treating children's and pupils' sexuality education and its content, particularly when the educational process, its implementation, control, grounding of its effectiveness are not regulated. Conceptions of

gender with regard to adolescents with mild intellectual disabilities constructed by social and educational environment and the analysis of the attitude to sexuality education provide the basis for selection of principal approaches, conceptions, content and methods of sexuality education. Interaction of these environments is particularly important for successful sexuality education.

Sexuality education is particularly important for pupils with mild intellectual disabilities due to lack of social skills, communication abilities, too big credulity, affection, emotionality in interpersonal relationships (Eastgate, Scheermeyer, & Driel, 2012; Nangle & Hansen, 1993; Wilkenfeld & Ballan, 2011). This endangers learners' safety because in modern information society, increasingly using mobile, computer technologies, persons with intellectual disabilities can become victims of sexual abuse (Murphy, 2005; Gill, 2010; Cambridge & Mellan, 2000; Yacoub & Hall, 2009) and be involved in prostitution, pornography or sex tourism (Scott, 2013). Inadequacy of communication becomes a significant factor influencing development of gender of people with disabilities and formation of the society's attitude to gender identity of the disabled person. According to Westheimer & Stanford (2005), persons with intellectual disabilities often cannot establish a close relationship.

The research subject: teachers' and parents' attitude towards sexuality education of adolescents with mild intellectual disabilities at school and its relevance.

The research aim: to disclose teachers' and parents' attitude towards sexuality education of adolescents with mild intellectual disabilities at school and its relevance.

Principles of data interpretation and analysis. The chosen qualitative research approach enables to create knowledge reflecting an integral whole of the phenomenon of sexuality education, which is constructed based on the analysis of teachers' attitude. Reconstruction of experience, applying the analysis of interview data, is interpreted employing the comparative content analysis method, the essence of which is distribution of data and coding by category. Later categories are defined and their interrelation is searched for.

The research was attended by 100 informants (66 teachers, 34 parents), who took part in the educational process of adolescents with mild intellectual disabilities.

Analysis of Results

In teachers' opinion, pupils with intellectual disabilities "have the same needs, sensations and wishes as non-disabled people and information, sexuality education are equally important. Sexuality education can improve communication, solution ... and other skills." [teacher 1], therefore, it has to be implemented so that the adolescent "properly understands the man's and woman's differences, knows how to maintain normal relationships" [teacher 4], so that "premature and unsafe sexual behaviour" is avoided [teacher 20], and "people with disabilities have the right to education on family life and to sex education" [teacher 38]. However, it is often thought that sexuality education is particularly important due to "increased sexual desire" [teacher 2], "their emotions and actions are much more strongly expressed than by their non-disabled peers" [teacher 6], "... children lack knowledge of sex education. They are excessively interested in that. They are often not able to adequately express their feelings" [teacher 3].

Research results demonstrated (see Table 1) that teachers treat sexuality education as a relevant problem of education of adolescents with mild intellectual disabilities due to pupils' and parents' *insufficient knowledge of sexuality education*. Informants are particularly concerned about *learners' active sex life*, resulting in early pregnancy, sexually transmitted diseases, etc. Teachers also face the problem of sexual exploitation of teenagers ("... girls, even when their parents know, communicate with adult men ..." [teacher 17]) and adolescents' homosexual behaviour. Problems are caused by pupils' *emotional and behavioural problems*, *lack of social skills*, and deepened by *negative impact of family and environment*. Ustilaite (2001) notes that adolescents' early sexual interactions are a compensation for insufficient

spiritual relationship with their parents, lack of love and confidence. It is believed that parental love, trust in adolescents as personalities can reduce the number of adolescents with sexual life experience and related painful sexual experiences. Early sexual interactions affect the emergence of emotional and psychological problems (Rector, 2002) and create conditions for appearance of manifestations of other risky behaviours.

Table 1. Teachers' Attitude to the Need of Sexuality Education at School (N= 66)

Categories	Illustrating statements	Number of statements
Insufficient knowledge of gender	"Families get very little knowledge" [teacher 65], "Gender isn't discussed in families. They themselves don't understand changes in their organism"[teacher 48].	59
Learners' active sex life	"both girls and boys live in the school dormitory, their friendship is not always controlled" [teacher 60], "persons with intellectual disabilities are sexually more active and (often) have uncontrolled sexual desire [teacher 16], "... live sex life, "share experiences" with other pupils. I think there should be an alternative to that" [teacher 44], "teenage girls are looking for friends and start sexual life early, we have 3 cases when 10 form schoolgirls became pregnant" [teacher 2], "even when parents know, girls communicate with adult men; there are also cases when they hide from teachers so that boys could communicate with girls" [teacher 17], "interest in the person of the same sex" [teacher 14; 15].	20
Emotional and behavioural problems related to gender manifestation	"... don't understand certain things, don't know norms, how to deal with their feelings, desires, emotions" [teacher 29], "lack of self-control, more quickly surrender to negative influence" [teacher 42], "usually don't realize consequences and so on" [teacher 19], "...assess themselves and others inadequately ... [teacher 21], "... doesn't realize what is going on with him. What is normal, and what is not" [teacher 41], "it is more difficult for the child to independently realize changing needs of the maturing body" [teacher 45], "finds it difficult to understand the essence of cultured relationship: affection, attention is often perceived as an incentive for the sexual act" [teacher 59].	9
Lack of social skills	"They find it more difficult to orient themselves in life situations, are more vulnerable" [teacher 23], "children should be taught to suitably accept their gender, to socially implement it" [teacher 39], "are unable to think critically and independently, tend to imitate, due to suggestibility inherent to them cannot select appropriate patterns of behaviour" [teacher 55], "it is easy to seduce them, they don't know where to address for help" [teacher 17].	6
Negative attitude of the family for the formation of gender identity	"teenagers learn from dysfunctional families, where they see only an inappropriate example" [teacher 19], "the majority of children don't have families where they could get first knowledge"[teacher 23], "Many of them come from dysfunctional families, where they see negative things, negative examples" [teacher 23], "there is no education on this issue in the families, or, on the contrary, they see and hear bad things" [teacher 41], "most often pupils come from dysfunctional and problematic families" [teacher 46].	7
Negative impact of the environment on the formation of gender identity	"there are problems in all areas: TV programmes, computers, acquaintances – all "are of service"" [teacher 46], "pick up a lot of bad things from friends" [teacher 48], "children have to be protected from unexpected attacks on them somewhere in the alien environment. Where someone can make use of them" [teacher 64].	4

Thus, as stated by teachers, learners' emotional and behavioural problems, lack of social skills are still complicated by negative impact of social environment (family, friends, the media, etc.), which may determine adolescents' early sex life, destructive manifestation of gender (e.g., publicly displayed nudity, etc.).

Describing gender related social skills of adolescents with mild intellectual disabilities in interpersonal relations, teachers also pointed out the impact of the environment and family environment (see Table 2). Scientists (Eastgate, Scheermeyer, & Driel 2012; Nangle & Hansen, 1993; Yacoub & Hall, 2009, etc.) emphasize social skills as one of the essential conditions for successful manifestation of gender, interpersonal relationships. This is particularly important bearing in mind the development of information technologies, when persons with intellectual disabilities experience an even greater danger of being sexually exploited due to *lack of social skills, credulity, indifference of family and environment* or their negative impact. As demonstrated by research results, the family is particularly important for the formation of social skills because it is closest to the child, adolescent; therefore, it is necessary to educate family members, promote their activity, consciousness educating adolescents with mild intellectual disabilities.

Table 2. Pupils' Social Skills in Interpersonal Relationships from Teachers' Standpoint (N = 66)

Categories	Illustrating statements	Number of statements
Lack of social skills	"Interpersonal relationships are aggravated by disorders of cognitive activity. They lack moral images and concepts while analyzing behaviour with other persons, projecting consequences of behaviours, properly evaluating moral consequences" [teacher 1], "Social skills are primitive; they are fighting for their welfare by any means; they don't have compassion, pity; behaviour is impolite" [teacher 2], "Social skills of pupils with mild intellectual disabilities have to be continuously developed and improved" [teacher 3], "the inability to adequately assess situations. ... the inability to properly express feelings, ..." [teacher 4], "there is a lack of social skills" [teacher 25].	33
Negative impact of the family and environment	"Get a lot of the experience in the family. Lack sanitary-hygienic skills. Are more interested in the opposite sex, desire. Frequent partner change." [teacher 65], "The attitude and skills a lot depend on the family, on the immediate environment. Social skills are different among pupils. Maybe more superficial" [teacher 12], "Social skills are weak because they are not educated at home. Their understanding ends when they close the school door" [teacher 16], "Their concept of life is distorted, they have negative view towards themselves. Drinking parents next to them ..." [teacher 18], "share experiences acquired in families, among peers" [teacher 31].	12
Positive impact of the family and environment	"The teenager comes to school from the family. Most often communication in the family is reflected in children's skills" [teacher 43], "Social skills most often depend on education in the family or care institution. And this is very visible in interpersonal relationships ("state children" and "home kids"). First of all, this depends on relationships and upbringing in the family" [teacher 62].	4
Credulity in interpersonal relationships	"Are careless, easily establish relationships with strangers, are very trustful, don't value and protect their body, sexually provoke the opposite sex representatives" [teacher 38], "they very quickly establish contacts with strangers, are too trustful and affectionate, inadequately assess their and other people's behaviour" [teacher 44].	4

Analysing parents' attitude towards sexuality education (see Table 3), it was noticed that parents distinguish themselves by passivity; some state that *sexuality education is irrelevant*. Parents tend not to speak with children and believe that adolescent can *learn everything from the environment*: friends, online forums; they also often tend to *pass* this issue to school teachers and (or) employees. Parents' passivity developing gender and the belief that adolescents can learn behaviour reflecting gender in the media, only worsen the problem. Juodraitis & Pocevičienė (2008) note that the media become a particularly important element of personality socialization because they shape the conception of the outside world, attitude to various phenomena, norms of behaviour, the system of values. Ustilaitė (2001) points out that adolescents who are interested in erotic and pornographic films more often have sexual interactions than those that are not.

Table 3. The Source of Parents' Information about Sexuality Education (N=34)

Categories	Illustrating statements	Number of statements
Information from the environment	"Most often he learns about sexual interactions himself from on-line forums, magazines and friends" [parent 23], "He will learn everything himself, no need to rush. It is most important to take it easy" [parent 26]	2
Information from school	"I wish it were explained at school" [parent 24], "will speak about these topics with a teacher" [parent 11], "it would not be possible to explain in the family that you are a boy" [parent 24], "At home I am unable to explain to children about gender" [parent 24].	6
Information about sexuality education is irrelevant	"He is still small" [parent 15], "My child is still small" [parent 2], "So far irrelevant" [parent 25], "Completely irrelevant" [parent 1], "Not very important" [parent 27], "I don't know" [parent 15], "Somehow I still haven't thought" [parent 11].	7
The source of information is not indicated	"Very important" [parent 5; 8], "Everything is important from A to Z." [parent 7], "Sexuality education is important" [parent 30].	9

The research has also demonstrated that some parents realise *relevance of sexuality education*, therefore, teachers should try to involve these parents in sexuality education, while cooperating to ensure successful formation of gender identity of adolescents with mild intellectual disabilities. Formation of the attitude to relevance of sexuality education and involvement of even a small share of parents into the educational process could be an incentive for other parents to develop awareness of the problem and encourage their participation in sexuality education.

State Family Policy Concept (2008) emphasizes close cooperation of the family, school and society, helping the family to educate a person who is capable to understand the world, independently and together with others solve his/her own and society's life problems. As it was mentioned earlier, the importance of cooperation is declared in documents regulating education and in the programme *Preparation for Family Life and Sexuality Education* (2007). The research aimed to find out aspects of parents' cooperation with teachers on sexuality education. During the research it was noticed that developing gender, parents are little inclined to cooperate with teachers, they are often satisfied only with formal participation in the meetings. The analysis of informants' answers resulted in the following categories (see Table 4): *lack of cooperation*, *active exchange of information with teachers*, *formal communication in school meetings*. Parents' *lack of cooperation* with the teachers on sexuality education issues distinguishes

itself by parents' reluctance to talk with teachers on this issue because they are more inclined to solve problems in the family or they address only when problems occur. However, some parents *actively exchange information with teachers* about gender issues, jointly try to find the most suitable variants of their solution, while others limit themselves with *participation in general meetings*, in which, according to them, gender issues are not always thoroughly discussed.

Table 4. Cooperation with Teachers on Sexuality Education Issues, Declared by Parents (N=34)

Categories	Illustrating statements	Number of statements
Lack of cooperation	"Don't communicate on this topic" [parent 1], "I still haven't talked on this topic" [parent 6], "I haven't communicated on this topic" [parent 7], "I don't talk about this" [parent 17], "Teachers – their way, I – my way" [parent 8], "We communicate with teachers little, most often we try to solve everything at home in the family" [parent 10], "Somehow I still haven't thought, I will speak about such topics with a teacher" [parent 11], "Don't communicate at all" [parent 24], "As long as there are no problems on these issues we don't talk about it" [parent 25].	15
Active exchange of information with teachers	"Telephone calls, meetings" [parent 26], "Occasionally we talk on these issues by phone with teachers" [parent 27], "I ask about the child's behaviour at school, among friends" [parent 29], "to speak about this" [parent 2], "We speak about this" [parent 3], "We speak" [parent 5], "We speak with each other" [father 18], "I consult" [parent 19], "Sometimes we speak about this" [parent 34], "Conveying our opinions, requests, experiences" [parent 4], "With the educator we try to find the best variant" [parent 9], "In a concrete case we try to give advice, clearly explain" [parent 9], "We talk over, talk on this subject" [parent 31].	10
Communication in school meetings	"I talk with teachers when I go to the meetings" [parent 15], "I participate in school meetings" [parent 16; 26], "Cooperation is very minimal, these issues are usually not tackled in the meetings" [parent 21], "Sometimes there are some mentions about these issues in the meetings" [parent 23], "We cooperate with specialists of our institution" [parent 20], "Lectures, talks" [parent 32], "We talk, read books, magazines on this subject" [parent 14]	6

Parents' questions to teachers regarding sexuality education of adolescents with mild intellectual disabilities. A small share of parents willing to cooperate with teachers indicated questions about sexuality education that are of interest to them (see Table 5): *problems of communication with the child on the gender topic, the need for information on sexuality education issues.* They are interested in issues of communication with the child; e.g.: "...when and how to start a conversation so that she doesn't become reserved and remains open..." [parent 9], "how to react to children's interest in the opposite sex?" [parent 31], "when does the child begin to mature, the voice is changing, etc." [parent 14]. Some parents also lack comprehensive information on sexuality education issues; e.g.: "How to get literature on this subject" [parent 24], "It is often noticed that there is a lack of lectures on sexuality education in schools and so on." [parent 21]. Obelenienė & Pukelis (2004) emphasise that effective programmes on prevention of pupils' early sexual interactions and sexually transmitted diseases should be based not on promotion of contraceptives but on enhancement of parent-child relationships. School should pay more attention to parents' as educators' role (Giedraitienė & Vaičekauskaitė, 2002; Obelenienė & Pukelis 2004, etc.).

Table 5. Content of Parent-Teacher Cooperation on Sexuality Education Issues (N = 34)

Categories	Illustrating statements	Number of statements
Problems of communication with the child on the gender topic	“Most often the question is when and how to start a conversation so that she doesn’t become reserved, remains open; this is not always possible” [parent 9], “Children are not inclined to speak openly on this issue with adults” [parent 9], “I rarely ask the child about gender, he doesn’t speak” [parent 23], “how to react to children’s interest in the opposite sex?” [parent 31], “Communication” [parent 5], “To communicate with the child” [parent 3].	6
The need for information on sexuality education issues	“How to get literature on this subject” [parent 24], “there is a lack of lectures on sexuality education in schools and so on.” [parent 21].	2

The research disclosed the prevalence of different attitudes of participants of the educational process (parents and teachers) to sexuality education of pupils with mild intellectual disabilities in social and educational environment. Teachers state that sexuality education is a relevant problem due to pupils’ early sexual interactions, lack of social skills, emotional and behavioural problems and demonstration of destructive sexual behaviour. Parents are usually passive with regard to sexuality education; they tend to pass this function to teachers and the media. This may be determined by the fact that a considerable share of pupils come from families and environment that have negative impact on them, where unsuitable standards of conduct and value orientations are taken over. It should be noted that parent-teacher cooperation is particularly important for successful process of sexuality education, since only coherence of educational goals, search for common solutions of problems can lead to successful (self-) formation of the pupil’s gender identity. Teachers should strive for parents’ bigger involvement in the sexuality education process, enhancement of their perception about the importance of gender.

Conclusions

The analysis of parents’ and teachers’ attitude to sexuality education of adolescents with mild intellectual disabilities resulted in different insights into sexuality education of these persons:

- Teachers treat sexuality education as a relevant problem of adolescents with mild intellectual disabilities due to pupils’ and their parents’ insufficient knowledge of gender, impact of learners’ active sexual life, pupils’ emotions and behavioural disorders, lack of social skills, negative impact of the family and social environment on learners.
- It was noticed that parents distinguish themselves by passivity; some state that *sexuality education is irrelevant*. Parents do not tend not to talk with children and believe that the very adolescent can learn *everything from the environment*: friends, online forums; they are also often inclined to *pass this issue to school teachers and/or staff*.
- The lack of parent-teacher interaction in the process of sexuality education was envisaged: parents are insufficiently involved in the formation of gender, cooperation culture is insufficiently developed, parent-teacher interaction is often limited with formal participation in meetings.
- It is noticed that those wishing to cooperate with teachers are interested in *problems*

of communication with the child on gender issues; they need information on issues of sexuality education.

- The research disclosed prevalence of different attitudes of participants of the educational process (parents and teachers) to sexuality education of pupils with mild intellectual disabilities in social and educational environment. Teachers state that sexuality education is a relevant problem due to pupils' early sexual interactions, lack of social skills, emotional and behavioural problems and demonstration of destructive sexual behaviour. Parents are usually passive with regard to sexuality education; they tend to pass this function to teachers and the media. This may be determined by the fact that a considerable share of pupils come from families and environment that have negative impact on them, where unsuitable standards of conduct and value orientations are taken over.

References

1. Cambridge, P., & Mellan, B. (2000). Reconstructing the sexuality of men with learning disabilities: Empirical evidence and theoretical interpretations of need. *Disability & Society*, 15, 293-311.
2. *Dėl Rengimo šeimai ir lytiškumo ugdymo programos patvirtinimo* (2007 m. vasario 7 d. švietimo ir mokslo ministro įsakymas Nr. ISAK-179). Retrieved from: <http://www.smm.lt/ugdymas/docs/2007-02-07-ISAK-179.pdf>.
3. Eastgate, G., Scheermeyer, E., & Driel, M. L. (2012). Intellectual disability, sexuality and sexual abuse prevention. A study of family members and support workers. *Bones*, 41, 3, 135-139. Retrieved from: <http://www.racgp.org.au/afp/2012/march/intellectual-disability-sexuality-and-sexual-abuse-prevention/>.
4. Giedraitienė, E., & Vaičekauskaitė, R. (2002). Vaikų su negalia lytinio ugdymo mokykloje problema. *Pedagogika*, 57, 44-49.
5. Gill, M. (2010). Rethinking Sexual Abuse, Questions of Consent, and Intellectual Disability. *Sexuality Research and Social Policy*, 7, 201-213.
6. Yacoub, E., & Hall, I. (2009). The sexual lives of men with mild learning disability: A qualitative study. *British Journal of Learning Disabilities*, 37, 5-11.
7. Juodraitis, A., & Pocevičienė, R. (2008). Paauglių požiūris į ankstyvus lytinius santykius. *Jaunųjų mokslininkų darbai*, 2(18), 116-121.
8. Lietuvos Respublikos Seimo 2008 m. birželio 3 d. nutarimas Nr. X-1569 „Dėl valstybinės šeimos politikos koncepcijos patvirtinimo“. *Valstybės žinios*, 2008, Nr. 69-2624.
9. Murphy, N. (2005). Sexuality in children and adolescents with disabilities. *Developmental Medicine & Child Neurology*, 47, 640-644.
10. Nangle, D. W., & Hansen, D. J. (1993). Relations Between Social Skills and High-Risk Sexual Interactions Among Adolescents. *Behavior Modification*, 17, 2, 113-135.
11. Obelenienė, B., & Pukelis, K. (2004). *Lytinis švietimas Lietuvoje ir pasaulinė reprodukcinė ideologija*. Retrieved from: <http://www.gvybe.lt/files/File/straipsniai/lytinissvietimas.pdf>.
12. Purvaneckienė, G., & Purvaneckas, A. (2001). *Moteris Lietuvos visuomenėje*. Vilnius: Danielius.
13. Rector, R. (2002). The effectiveness of abstinence education programs in reducing sexual activity among youth. *Backgrounder* 1533. Washington: Heritage Foundation.
14. Scott, A. O. (2013). 'Paradise: Love': a raw look at sex tourism and 'sugar mamas' Retrieved from: <http://seattletimes.com/text/201235031.html>.
15. Ustilaitė, S. (2001). *Paauglių lytiškumo raiška ir jos psichopedagoginės korekcijos prielaidos*. Daktaro disertacija. Vilniaus pedagoginis universitetas.
16. Ustilaitė, S. (2008). *Lytiškumo ugdymas*. Vilnius: Vilniaus pedagoginio universiteto leidykla.
17. Ustilaitė, S., Poškuvienė, R., Juškelienė, V., & Kalinkevičienė, A. (2008). Rengimo šeimai ir lytiškumo ugdymo programos įgyvendinimo galimybės: tyrimo ataskaita. Retrieved from: http://www.smm.lt/svietimo_bukle/docs/tyrimai/kiti/Tyrimo_RSLUprorgama_ataskaita.pdf.
18. Veglia, F. (2004). *Mental disability and sexuality*. Retrieved from: <http://www.styrktarfelag.is/files/1999882279mental%20disability%20and%20sexuality.doc>.

19. Westheimer, R. K., & Stanford, L. (2005). *Human Sexuality*. Philadelphia: Lippincott Williams & Wilkins.
20. Wilkenfeld, B. F., & Ballan, M. S. (2011). Educators' Attitudes and Beliefs Towards the Sexuality of Individuals with Developmental Disabilities. *Sexuality and Disability*, 29, p. 351-361.

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The research disclosed that parents distinguish themselves by passivity; some of them argue that *sexuality education is irrelevant*. Parents do not tend to speak with their children and think that the very adolescent can *find out everything from the environment*: friends, online forums; also often they tend to *pass this issue to teachers and/or staff*. During the research it was noticed that parents were little inclined to cooperate with educators with regard to sexuality education, they were often satisfied with formal participation in the meetings. Analysing the informants' answers, the following categories were distinguished: *lack of cooperation, active exchange of information with teachers, formal communication in school meetings*. During the research, the prevalence of different attitudes of participants of the educational process (parents and teachers) towards sexuality education of adolescents with mild intellectual disabilities in social and educational environment was observed. Teachers state that sexuality education is a relevant problem due to pupils' early sexual interaction, lack of social skills, emotional and behavioural problems and demonstration of destructive sexual behaviour.