

SEX AND DISABILITY: DISCOURSES OF YOUNG PEOPLE DIAGNOSED WITH INTELLECTUAL DISABILITIES AND THEIR FAMILIES

SEXO E DEFICIÊNCIA: DISCURSOS DE JOVENS DIAGNOSTICADOS COM DEFICIÊNCIA INTELECTUAL E DE SEUS FAMILIARES

SEXO Y DISCAPACIDAD: DISCURSOS DE JÓVENES DIAGNÓSTICADOS CON DISCAPACIDAD INTELECTUAL Y SUS FAMILIAS

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ABSTRACT: Researches in special education is a complex area, crossed by several themes. One of the emerging discussions in the current scientific scenario is the intersection between the studies of disability and sex. The general objective of this research was to explore the discourses and experiences of young people with intellectual disabilities and their families about disability and sex. Semi-structured interviews were conducted with nine young people diagnosed with intellectual disabilities and their families, which were qualitatively analyzed based on Foucault's archaeogenealogy. The results showed that young people have emancipatory desires, aspiring to establish loving relationships, however their discourses are permeated by prejudiced ideas about sex, which are transmitted and reaffirmed by their guardians. The discourses analyzed showed that the relationship between disability and sex in both their lives is marked by myths of asexuality, hypersexuality and abjective notions. The realization of sex education groups that promote reflections on the crystallized discourses that involve disability and sex can contribute to change this scenario, promoting the affective development and social inclusion of people with disabilities.

KEYWORDS: People with disabilities. Sexuality. Special education.

RESUMO: *A pesquisa em educação especial é uma área complexa, transpassada por variados temas. Uma das discussões emergentes no cenário científico atual é a intersecção entre os estudos da deficiência e do sexo. O objetivo geral desta pesquisa foi explorar os discursos e as experiências de jovens com deficiência intelectual e de seus familiares sobre deficiência e sexo. Foram realizadas entrevistas semiestruturadas com nove jovens diagnosticadas/os com deficiência intelectual e com seus familiares, as quais foram analisadas qualitativamente a partir da arqueogenealogia de Foucault. Os resultados mostraram que as/os jovens possuem desejos emancipatórios, aspirando estabelecer relações amorosas, contudo seus discursos são permeados por ideias preconceituosas sobre sexo, as quais são transmitidas e reafirmadas por seus familiares. Os discursos analisados mostraram que a relação entre deficiência e sexo na*

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vida de ambos os grupos é marcada por mitos de assexualidade, hipersexualidade e noções abjetivantes. A realização de grupos de educação sexual que promovam reflexões sobre os discursos cristalizados que envolvem deficiência e sexo podem contribuir para a mudança desse cenário, promovendo o desenvolvimento afetivo e a inclusão social de pessoas com deficiência.

PALAVRAS-CHAVE: *Pessoa com deficiência. Sexualidade. Educação especial.*

RESUMEN: *La investigación en educación especial es un área compleja, atravesada por varios temas. Una de las discusiones emergentes en el escenario científico actual es la intersección entre los estudios de discapacidad y sexo. El objetivo general de esta investigación fue explorar los discursos y experiencias de jóvenes con discapacidad intelectual y sus familias sobre la discapacidad y el sexo. Se realizaron entrevistas semiestructuradas a nueve jóvenes diagnosticados con discapacidad intelectual y sus familias, que fueron analizados cualitativamente a partir de la arqueogenealogía de Foucault. Los resultados mostraron que los jóvenes tienen deseos emancipatorios, aspirando a entablar relaciones amorosas, sin embargo sus discursos están permeados por ideas prejuiciosas sobre el sexo, las cuales son transmitidas y reafirmadas por sus tutores. Los discursos analizados mostraron que la relación entre discapacidad y sexo en la vida de ambos está marcada por mitos de asexualidad, hipersexualidad y nociones abyectivas. La realización de grupos de educación sexual que promuevan reflexiones sobre los discursos cristalizados que involucran discapacidad y sexo puede contribuir a cambiar este escenario, promoviendo el desarrollo afectivo y la inclusión social de las personas con discapacidad.*

PALABRAS CLAVE: *Persona con discapacidad. Sexualidad. Educación especial.*

Introduction

Research in special education is a complex area, crossed by several themes. The inclusion of people with disabilities (PwD), the right to life, to coexistence, and to access are currently discussed topics, both in the school and organizational spheres and in the social sphere.

The Statute of the Person with Disability (BRASIL, 2015) defines a person with disability as the one who has physical, mental, intellectual or sensory impairments that hinder their full participation in society. The types of disabilities are: physical, intellectual, hearing, visual, and multiple disabilities. According to the 2010 Census (BRAZIL, 2012), more than 45 million Brazilians report having some kind of disability.

Many topics arouse the interest of researchers in the field of special education. It is notable the incidence of Brazilian research that investigates the relationship of PwD with education, schooling, employability, and social interaction. However, research that discusses

the intersection between disability and gender studies is emerging on the Brazilian scientific scene (OLIVEIRA, 2016).

According to Foucault (2017a; 2017b; 2017c), sex corresponds to the use of the body and its pleasures. This phenomenon, in this way, is inherent to all human beings, not limited only to the sexual act, but encompassing bodily and affective experiences, the "conduct, its duties, pleasures, feelings, sensations, and dreams" (FOUCAULT, 2017b, p. 8). Also according to Foucault, the term sexuality corresponds to the knowledge produced and disseminated about sex, both the knowledge coming from the government and from institutions such as schools and health services, as well as the everyday and trivial discourses.

Even though sex is present in everyone's life, it is subject to social control by the knowledge and power of several institutions, such as the church, the government, and the school. These institutions seek to control bodies through the dissemination of knowledge about correct sex, or capable sex, directly related to the notions of beautiful and capable body (MCRUER, 2006; MCRUER; MOLLOW, 2012; FOUCAULT, 2017d).

In this game of knowledge and power, PwD have their body, sex and sexuality invalidated, directed to a level of abject. The abject, according to Mello and Nuernberg (2012), is the opposite of human, the opposite of correct, something that causes repulsion and suffers exclusion from social life. Abjection is when a person or group is placed on this level, a phenomenon that is materialized by abjectivating discourses and powers.

For Wilkerson (2012), society has developed several ways to reinforce models of able sex and abjectivate other sexual experiences, such as the knowledge coming from schools and health institutions, the production of bodies considered attractive and unattractive in movies, series, soap operas and other media, ease in changing the name in heterosexual marriages and the loss of aid directed to PwD when they get married. The manifestations of these models in the lives of PwD can be harmful, cause psychological suffering and contribute to the idea that, in order to have access to sex, one must get as close as possible to the models of the able-bodied sex and the beautiful and functional body.

The exclusion of disabled bodies from knowledge and discourses about sex contributed to the construction of two large groups of myths and prejudices: the myths of asexuality and hypersexuality. It is common for PcD to be seen as asexual, disconnected from bodily arousal and sexual desires or, when they have them, unable to demonstrate or live them. These myths contribute to the prejudices and misconceptions that PwD are eternal children, devoid of sexuality, especially when it comes to people with intellectual disabilities (DESJARDINS, 2012).

The myths of hypersexuality translate into the discourses that PcD have exacerbated and uncontrolled sexual desires and bodily excitements, and are unable to demonstrate their sexuality in an "adult" and respectful manner (DENARI, 2011). These two groups of myths, asexuality and hypersexuality, form the duality that Giami (2004) called the angel and the beast. About this duality:

During the past two hundred years, this literature posits, two rival images have been used to legitimize the containment of the sexuality of these people: the seraphic idiot and the Mephistophelic idiot [...]. The seraphic idiot is a person labeled intellectually disabled who is believed to be an eternal child: pure and asexual, guileless and fragile, and unable to face the dangers of sexuality [...]. In contrast, the Mephistophelic idiot is a wild and diabolical being, half-beast and half-demon, dominated by instincts, without morals or law, concupiscent and libidinous, whose hyper-sexuality jeopardizes the security of the social order (DESJARDINS, 2012, p. 69).

The psychological, affective, social and sexual development of PwD is marked by normalizing knowledge and powers of sex, which disseminate prejudiced myths and ideas. Based on these prerogatives, the overall objective of this research was to explore the discourses and experiences of young people with intellectual disabilities and their families about disability and sex.

Method

The research was qualitative, descriptive and exploratory. As a data collection procedure, semi-structured interviews were conducted with nine young people diagnosed with intellectual disabilities and with their families and guardians. The youngsters are students from a special education institution as Association of Parents and Friends of the Exceptional (Apae) in the countryside of the state of São Paulo.

Semi-structured interview, according to Duarte (2004), is a data collection tool that uses a guiding script with open issues, questions or discussion points, from which the participants may freely discuss. The interviews with young people and family members were applied individually and were based on a guiding script prepared by the researchers with questions and discussion themes about daily life, disability, sex, and sexuality. All the interviews were recorded and transcribed respecting the confidentiality of the participants and the other ethical precepts in research with human beings³.

The participants of the interviews were characterized in the following figures:

³ This research was approved by the Human Research Ethics Committee of the Federal University of São Carlos (UFSCAR), opinion number 3,538,718 (CAAE: 14668719.4.0000.5504).

Figure 1 – Table with the characterization of the young participants

Name	Age	Diagnosis⁴
Eduardo	16	Mild Intellectual Disability
Barbara	16	Mild Intellectual Disability
Kelly	17	Moderate Intellectual Disability and unidentified Hydrocephalus
Walter	18	Severe Intellectual Disability
Heitor	18	Mild intellectual disability, infantile cerebral palsy and epilepsy
José	19	Mild intellectual disability
Neide	19	Moderate Intellectual Disability and Down Syndrome
Larissa	20	Moderate Intellectual Disability and Down Syndrome
Danielle	20	Moderate Intellectual Disability and Spastic Tetraplegia

Source: Prepared by the authors

Figure 2 – Table with the characterization of participating family members ⁵

Name	Profession	Kinship
Luiza	-	Kelly's Mother
Mirian	Housewife	Walter's Mother
Patrícia	-	Heitor's Mother
Roberta	Pastry maker	Larissa's Mother
João	Civil servant	Neide's Father
Sara	Housewife	José's Mother
Ulisses	Unemployed	José's Father

Source: Prepared by the authors

The transcribed material from the interviews was analyzed based on Foucault's Archaeogenealogy. Archaeogenealogy is a possibility of qualitative analysis proposed by Foucault (2008; 2017d) that seeks to investigate the play of knowledges and powers that permeate a given phenomenon through discourse analysis, understanding it in all its complexity, historicity, locality, and potency:

While archaeology is the method proper to the analysis of local discursivity, genealogy is the tactic that, starting from the local discursivity thus described,

⁴ Diagnoses provided by the multiprofessional team of the educational institution the youngsters attend. The intellectual evaluation of the students is performed by the team of professionals working at the institution and is attached to the student's file.

⁵ All the youths' guardians were contacted during the beginning of the research. Although all of them authorized the participation of their children or guardians, only seven guardians were available to be interviewed.

activates the knowledges freed from subjection that emerge from this discursivity (FOUCAULT, 2017d, p. 270).

The archegenealogical analysis performed in this research occurred through the following steps: initially the transcribed material of the interviews was read, that is, the speeches found. This initial reading allowed the researchers to perceive the speeches that are similar, complementary, or disagree among the speeches of the participants.

Next, the material was divided into meaning units. These units were built from the grouping of the speeches that are similar or complementary. The meaning units were: "Contact with sex", "Conversations about sex", and "Relationships". These units were then analyzed qualitatively. The participants' speeches were described and discussed with the literature on disability and sex, identifying the social relations that formed the speeches and the implications of the means of production, knowledge and power relations in the discursive formation.

Results and Discussion

The interviews conducted with guardians and young people brought speeches about their experiences related to disability, sex and social relations permeated by these phenomena. The speeches brought by the young people made it clear that their lives permeate the school environment and the family environment. Many attend school in the morning and afternoon periods, staying home after school and on weekends. The first meaning unit that emerged in the analyzed speeches corresponds to "Contact with sex". All the family members interviewed affirmed that the youngsters use cell phones to watch videos, play games, talk to colleagues and family members, and participate in social networks. According to them, Walter, Larissa and Neide also have the habit of watching television every day, usually soap operas or cartoons aimed at the children's audience.

Nowadays, there is an increase in images involving sex and the body in the media, a phenomenon that Foucault (2017d) calls control-stimulation of sex. Together with the control-repression, inherited from antiquity, both forms of control repress experiences of sex that are considered wrong, or not very capable, and stimulate the experience of sex when it corresponds to the interests of capitalist society and body models: "Get naked..., but be thin, beautiful, tan!" (FOUCAULT, 2017d, p. 236). With the increasing access of adolescents and young people to the internet, there is also ease in the contact with information, images and videos about sex and sexuality (ALVES, 2019). But how do family members approach the contact of young people with sex through cell phones and television?

The discourses of family members converged in actions that seek to prevent, even prohibit, the contact of young people with scenes that involve sex and body exposure, even in young people who are over 18 years old. It became evident that there is a system of surveillance of the media that young people have access to and an incentive to consume images destined for the child-youth public, such as soap operas and cartoons:

[...] when he is watching, if something starts, he already looks at us, like this, I don't know, then my husband goes and changes the channel (PATRICIA).

[...] it is difficult for us to watch soap operas that contain these scenes, because I prefer to deprive him of these things. I don't think it's convenient, right? (MIRIAM).

[...] the soap opera she watches is a children's one, it doesn't have any. The most there will be is a little kiss, a little smooch (ROBERTA).

Even with this surveillance system in full operation, the youths reported having contact with images of sex, usually in movies, soap operas, internet or cell phones. Many young women, like Danielle, affirmed that their guardians forbid them to access such material, but it is accessed in the same way with the help of third parties, as Heitor, Eduardo, and Kelly affirmed:

[...] in the soap opera (HEITOR).

[...] on television [...] it was on suddenly (KELLY).

I watched just a little bit and then I changed the channel [...] Tatiana's boyfriend, my sister, was there. Her boyfriend watched a little bit with me and after watching TV I went to sleep. I didn't watch the whole movie, I went to sleep (EDUARDO).

Regarding the images that their children have access to, while there are guardians who forbid access to such material, there are guardians who allow and even encourage contact with sex through cell phones, like Ulisses with his son José:

[...] on my cell phone, sometimes people send something pornographic, I leave it there, they look at it too. [...] The cell phone is on top of the sofa there, [...] I always told her, "if they send it, don't delete it, it's there, they are men, do you want to see it? Let them see" (ULISSES).

Some contacts with images are valued, such as heterosexual pornography. But when the son witnesses a scene of romance between two men, his father's reaction is different:

[The only thing is that one day he saw a man hugging another, he said, "gee, Dad," he said. "These things happen too, don't they? I end up explaining it too, because... [Once in a while, I tell him, "you have to kiss women," I say.

[...] I told him one day, you can't stop... no man hugging him, I also said, "if you have to hug the women, the men you avoid" (ULISSES).

In much of the discourse of this meaning unit, infantilizing ideas of intellectual disability prevail (DESJARDINS, 2012). Family members interpret their children as people devoid of sexual desires and direct their contact with the media to images produced for children, prohibiting contact with images of sex. A dynamic of control-repression of sex became visible (FOUCAULT, 2017b), a range of powers that seek to watch the body and avoid its contact with the production of images about sex. These discourses were common in much of the interviews with the guardians, with the exception of one. In the case of Ulisses and his son João, a control-stimulation of sex can also be observed. The father values the contact that his son has with the images produced about sex, and even stimulates this contact, as long as these images transmit the heteronormative sex model.

Research (GIAMI, 2004; DENARI, 2011) shows that contact with sex in adolescents and youth with disabilities is directly related to gender dynamics. Young females are victims of an intense system of control-repression of sex, valued in their childishness and in caregiving characteristics required of the female gender, with their social contact hindered, or even prevented, and directed to house cleaning and care activities. Young males are also victims of control-repression and the idea of childishness, however, according to Simões (2017), to them can also be directed the control-stimulation of sex, being valued in their contact with sex, with the consumption of pornography as an adolescent and the use of the service of sex professionals as an adult. But this stimulation only occurs when the image consumed corresponds to the heteronormative sex model.

It can be noticed in the speeches of the research participants that the images and speeches about sex directed to young people with ID can serve a normalizing and segregationist character, reproducing crystallized norms of sexuality and heteronormative gender and, in this way, demanding similar performances from these students in their daily lives. Sex enters the lives of PwD only when it is: “[...]Heterosexual, Married, Monogamous, Procreative, Non-commercial, In pairs, In a relationship, Same generation, In private, No pornography, Bodies only [no sex toys], [and] Vanilla (WILKERSON, 2012, p. 186).

Faced with what the guardians and the youngsters reported about contact with sex, they were asked about the conversations they had already had about the themes of sex, puberty, body, and relationships in the family environment. The set of speeches that were listed by these questions formed the meaning unit called "Conversations about sex".

All the girls and boys affirmed that they had few conversations with their parents or teachers about issues related to sexuality and sex, and when these conversations occurred, they approached vague issues related to human reproduction, like biology: "Do you know where babies come from? From the belly" (BARBARA, DANIELLE, EDUARDO, HEITOR, JOSÉ), or rigid rules about the experience of sexuality: "You can't, mom and dad won't let you" (DANIELLE).

All the young people noticed the changes in their bodies after puberty, however, they said they didn't receive any orientation from their families. All the caretakers affirmed not having talked to their children about themes like sex, puberty, relationships, among others. When these conversations did take place, it was by initiative of the youngsters, who sought out their families with doubts or comments, which were answered in a cautious manner. It is noticeable the family members' fear of working with these issues because, in their view, their daughters and sons don't demand this work since they are still children:

Her head is very childish, [...] there are times that I don't even... I don't even listen to what she says sometimes (LUIZA).

[...] Larissa's world is what? Or it's the cars or dominoes or she goes out with us or she's watching a movie, her little world is this (ROBERTA).

There are times when I see the head of a child who is still 9, 10 years old (SARA and ULISSES).

Both the surveillance that family members exert, described above, either by control-repression or control-stimulation, as well as the few conversations that occur in the family environment, become barriers to the contact of young people with sex, both in terms of images and information. Mendes and Denari (2019) point out the importance of quality sex education for young people with disabilities, which involves conversations and guidance held in family and school environments about sex and all related topics. Quality sex education contributes positively to psychological, affective, and social development, the establishment of healthy relationships, and the prevention of sexual violence (SANCHES, 2019; VILAÇA, 2019). However, insufficient sex education, which apparently was directed at the young people interviewed here, can make them more vulnerable to psychological distress and situations of sexual violence (OTTONI; MAIA, 2019).

Of the few conversations about sex that the guardians claimed to have with their children, masturbation was a subject that stood out mainly involving young males. Miriam brought up reports about her son's masturbation and his fears:

He gets that stuff and releases that cum of his on the bed.

Masturbation?

É. He does that in bed, you know? Once in a while, he does these things. [...] I asked the doctor about this, and she said it's normal at his age, but ... she always told me to always keep an eye on him, [...] for things like that, with his sister's side, [...] I said no. And also if there is another child at home, as he is in this period, because he doesn't understand, avoid being alone with the child, in case he wants to do something.

[Ah, I was scared, right? I was afraid. At first, I thought a lot about my daughter, that he wanted to, like... because he felt like it, right, not understanding that she was his sister and wanting to, you know, grab her (MIRIAM).

Continuing with the discourse, Miriam seems to have difficulty talking to her son about the subject of masturbation because her interpretation circulates between notions of deviation and normality:

This I have already talked to the doctor, she says it is normal, that I can't mess with him, I can't fight with him because of this that happens, as he is at this age, young, he feels the same desire as a normal young man. His disability doesn't interfere, his feeling of sexual desire. And that is it. His problem, that I find annoying, is just this, but the doctor says it is normal, right?

Miriam stated that she didn't give her son any orientation about masturbation, according to her speeches the fear that her son would practice violent acts against his sister or other children is more present.

If the compulsory childishness of intellectual disability was manifested in some speeches, here the other side of the myths related to sexuality and disability, the myth of hypersexuality, is remarkable. Miriam's fear about her son coming with "grafting" to his sister relates to this myth, which expresses misconceptions that PwD possess an uncontrolled and animalistic sexuality, and that they can compulsorily commit violence (DESJARDINS, 2012). The myth of the hypersexuality of PwD relates to the knowledge about the rational control of the body and sexual desires. As the diagnosis of intellectual disability is an abjectivating factor, which comes loaded with various preconceptions about rational and social capacities, the capacities of control over the body and sexual desires also become invalidated (FOUCAULT, 2017b; 2017c).

On the one hand, masturbation was a prominent topic involving young men, while menstruation and pregnancy, on the other hand, stood out in the discourses about young women.

These subjects are also approached with fear in the family environment. Both João and Roberta stated that their daughters take hormonal drugs to prevent menstruation, but that this subject was not discussed with them.

The use of medications on people diagnosed with intellectual disabilities without their awareness and consent is unfortunately a common phenomenon in today's society. The remedies range from medications to prevent pregnancy, contraceptives, to sterilization procedures without the person's awareness (GAVÉRIO, 2016; SIMÕES, 2019).

Forced or non-consented medicalization is discussed by several authors as a violation of a person's basic rights over their own body. Situations like this mobilize the struggles of social movements:

The stakes concern questions about fundamental rights expected by all citizens in a democratic society: freedom of association and intimate companionship, authority over their own body, protection from violence, abuse, and oppression, and the right to pursue a sexual future of their own choosing. Because every citizen will become sooner or later a disabled citizen, the struggle of people with disabilities for sexual rights belongs to everyone (SIEBERS, 2012, p. 52).

Luiza also reported that she had never talked to her daughter Kelly about menstruation, but said that it was necessary to have this conversation to teach her to change her own diaper. This task was performed by her mother, but was interrupted due to an accident:

Because she did not feel good to see blood, in the beginning, I deprived her. [...] This year, right, because of the difficulty I had, I fell, I couldn't walk for three months, so I started to teach her to change her diaper. [...] Then I started to say, "You will start to take a bath by yourself, you will start to change your diaper by yourself, because you can do it. In the first week it was difficult because I had to stay on top of her, but today, she changes her diaper all by herself (LUIZA).

In the case of Luiza and Kelly, it is interesting to see the possibility of dealing with some issues necessary for the self-care and health of their daughters diagnosed with intellectual disability. According to the responsible, there were difficulties with diapering, bathing, and contact with blood in the beginning, but the situation was positively transformed. As the abjection of disability goes beyond their own intellectual abilities, but is fed by the myths that surround this condition, the case of Luiza and Kelly shows how the myths can be overcome in search of autonomy, independence and respect for the rights of PwD.

Finally, the last unit of meaning that emerged from the interviews, entitled "Relationships", contains discourses about love relationships and dating. A good part of the young women interviewed affirmed that they participated in flirtations in the school

environment. Some have the desire to date, like Barbara and Danielle, but are forbidden to do so by their guardians:

*Have you ever dated?
No, I can't. Because my mom and dad won't let me.
What did they tell you?
That you can't, that I am... still... you can't! (DANIELLE).*

[...] a boy from here at school. [...] I think they will only let me date when I turn 18 (BARBARA).

Barbara said that her guardians would allow her to date from the age of 18, whereas in Danielle's case the prohibition was more intense and assertive. Eduardo stated that he already has a girlfriend, his classmate, but that they both behave only as friends.

Neide and José stated in their interviews that they are boyfriend and girlfriend. They have known each other since they were children, but they have never been to each other's homes. Their relationship is limited to the school space and the activities performed there, such as dancing on commemorative days, holding hands, cuddling and hugging:

*[...] I've been told this in class. They asked me that. I said yes, I have dated Neide here at school. I've known her since I was a kid, I was about seven years old.
I told my mom about it, and she liked the idea. She said that I am a little young to date and all that. I am still too young to date (José).*

[He kisses my hand. On the face he can't, only on the hand [...] because my mother doesn't let him kiss my mouth. We are going to get married (NEIDE).

About dating, the young person's guardians stated:

Here, at school, there is a girl, a girl who likes him from when he started at school, Neide, right? So everyone says that he is Neide's boyfriend. The other day a boy talked to him about him kissing Neide. And he said no, because he was too young, [...] that he has to get older to kiss, to date, that he can't kiss now (SARA).

Then they even joke here at school that she is his girlfriend. Her mother comes because she is his mother-in-law. Because then I don't know what he thinks of her, I know that she likes him a lot. She demonstrates that she likes him a lot, but I think he is more of a friendship [...] I don't know if he has any notion of what a girlfriend is (ULISSES).

She has a problem with the little boyfriend here. Here, right? [...] She doesn't say anything too much, I am not going to criticize her either. She says, "I have a boyfriend, I will tell my boyfriend". [...] I think this is normal because they don't have that much contact (JOÃO).

For family members, love relationships are tolerated to the extent that they remain in an infantilized fantasy of relationship. Coupled with infantilizing ideas of disability, family members also brought up abjectifying discourses:

He has a girl at church, my pastor's daughter, and he winks at her a lot, you know? Then people ask him, "Hey, Heitor, do you have a girlfriend? He says, "I have my blinker," right? So, I don't know if I see him with little kids a lot, you know? [...] and I always joke with him, you know, I say, "Hey, you belong to Mom, you know? You'll never get married, you'll always take care of your mother, right? We don't see them getting married, having a sex life, getting pregnant. So we don't even have this kind of subject (PATRICIA).

Sometimes I think that, I don't know, but I think that for him to date, I think that only if it was a person that was also handicapped like him. [I think that it is difficult for a normal person to want a person that has disability, it is difficult, even more like his, right? It is different when you have a physical disability or a visual disability, a hearing disability, other things are totally different than his, which is a mental illness, right? I think it's hard for anyone to be interested. [...] It could happen because of what he is, right, his mind is already compromised, right, so it could, for a son, pass on his genetics, right, because of the disability, but not coming from the parents, right? Sometimes we ask him, "Are you going to get married, Walter? Then, sometimes, I say, "no, you will stay with your mother" (MIRIAM).

Love relationships among the youth are allowed to the extent that they boil down to apparent friendship, reinforced by the idea that they have a childish mentality. At the same time, the constant fear that they will get involved with their peers is observable, and this fear motivates the prohibition of dating and physical contact. With more intensity in the female gender, interaction in environments other than school is discouraged, where surveillance is greater and where physical contacts beyond what is expected by the idea of "childlike friendship" can be easily repressed. The control and surveillance leaves John relaxed about his daughter's courtship. The myth of childishness influences family members' views on PcD love relationships, at the same time that they exercise power in controlling their children so that they remain in this "eternal child" status (GIAMI, 2004; DESJARDINS, 2012; OLIVEIRA, 2016).

Along with the myth of childishness, Patricia and Miriam's speeches also reveal abjectifying notions of disability. According to Mello (2019), people diagnosed with intellectual disabilities suffer the most from abjectivizing discourses and relationships. For caregivers, the diagnosis of intellectual disability corresponds to complete abjection, as no "normal" person, in their words, will show interest in their children. The body, the affection and the other capacities are automatically invalidated in a condition of intellectual disability, at the same time that the caretakers show a desire for their children to remain in this condition. As

Miriam and Patrícia brought up: "You're never going to get married, you're always going to take care of mom, right?"

Final considerations

Discussing disability and gender is a complex challenge. Both areas are permeated by interdisciplinary productions, each one with its own particularities, but also with themes that converge, such as body, accessibility, independence, and inclusion.

The scientific research carried out in this article brought relevant data to the discussions about disability and sex. Even with a surveillance system exercised by those responsible for the images consumed by their sons and daughters, a control-repression to bar contact with sex and direct them to the consumption of images destined for the child-youth public, young people have direct access to images about sex, generally with the help of third parties. These images motivate doubts and questions, which are brought up for discussion in the family nucleus, but are answered with caution and fear, which characterizes an insufficient family sex education.

Hierarchical gender dynamics have been taught to the young people, while the young females are valued in their childishness and ability to care for others and with the domestic environment, some young males are exalted in their performances of heteronormativity, these manifested by the consumption of heteronormative pornography.

Young people have emancipatory desires, they seek adult activities and loving relationships, but this search is hindered by their guardians, who reaffirm the asexual, infantilizing, hypersexualized, and abjectivating discourses directed at PwD. It is noted that the perspectives of a different conceptual understanding about disabilities are very incipient and cautious, or else they do not happen. Prejudiced ideas about sex and sexuality remain entrenched, causing PwD to continue to be considered angels or beasts.

Talking about inclusion also involves talking about social inclusion, independent living, social, loving, and sexual relationships for a full life, conditions that are guaranteed by the legislation in force. However, contradictorily, the discourses of family members are still based on obsolete paradigms that consolidate asexuality and/or abjection. The family plays the role of reproducing hegemonic discourses on sex and disability. A possible way to transform this scenario would be to hold sex education groups with these youngsters and orientative groups with their guardians, both with the purpose of questioning crystallized notions about sex and disability, to build new ideas and promote health, autonomy, and good development.

There is still more research to be done and areas of knowledge to be explored. It is hoped that this article can contribute to the scientific discussions about disability and sex and allow new reflections on the themes, opening the possibility for new investigations.

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