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TEACHERS' PERCEPTIONS OF SEX EDUCATION AND ITS EFFICIENCY IN PREVENTING SEXUAL ABUSE AMONG STUDENTS WITH LEARNING DIFFICULTIES (LD)

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Abstract

The sex education of children with LD (learning difficulties) has been researched less than that of typically developing children, which shows that more research is needed on the issue of sex education in children with LD (Barnard-Brak et al., 2014; Grove et al., 2018). Because children with LD do not know what to do and how to protect themselves when they are exposed to sexual abuse, it is necessary to provide those who are vulnerable with sufficient education (Lumley et al., 1998; Blake, 2013). Examining the opinions of the people and teachers who are closest to these children and educate them will contribute to this field. Interviews with 5 teachers based in the UK who work with children with learning difficulties aged 4-19 were conducted in 2020/2021. This qualitative research provides an overview of sex education and protection from sexual harassment, with a focus on sex education programmes such as RSE (Relationships and Sex Education) in special education schools, emphasizing their importance and developing programmes especially for children with LD. There is a review of the relevant literature and a section explaining the methodological approach chosen. The findings and analysis of the themes that emerged as a result of the interviews with the teacher participants are discussed, and recommendations for best practice in schools are identified, along with directions for future research on a larger scale.

Keywords : sex education, special education, teachers' perceptions, sexual abuse

Abstrak

Pendidikan seks anak-anak dengan kesulitan belajar (*Learning Difficult/LD*) telah diteliti lebih sedikit daripada anak-anak yang berkembang secara normal, yang menunjukkan bahwa lebih banyak penelitian yang diperlukan mengenai isu pendidikan seks pada anak-anak dengan LD (Barnard-Brak et al., 2014; Grove et al., 2018). Karena anak-anak dengan LD tidak tahu apa yang harus dilakukan dan bagaimana melindungi diri mereka ketika mereka terpapar pelecehan seksual, perlu untuk memberikan mereka yang rentan dengan pendidikan yang cukup (Lumley et al., 1998; Blake, 2013). Mengkaji pendapat orang-orang dan guru yang paling dekat dengan anak-anak ini dan mendidik mereka akan berkontribusi pada bidang ini. Wawancara dengan 5 guru di Inggris yang bekerja dengan anak-anak dengan kesulitan belajar usia 4-19 tahun dilakukan pada tahun 2020/2021. Penelitian kualitatif ini memberikan gambaran tentang pendidikan seks dan perlindungan dari pelecehan seksual, dengan fokus pada program pendidikan seks seperti RSE (Relationships and Sex Education) di sekolah-sekolah pendidikan khusus, menekankan pentingnya dan mengembangkan program khusus untuk anak-anak dengan LD. Ada tinjauan literatur yang relevan dan bagian yang menjelaskan pendekatan metodologis yang dipilih. Temuan dan analisis tema-tema yang muncul sebagai hasil dari wawancara dengan para peserta guru dibahas, dan rekomendasi untuk praktik terbaik di sekolah-sekolah diidentifikasi, bersama dengan arah untuk penelitian masa depan dalam skala yang lebih besar.

Kata kunci: pendidikan seks, pendidikan khusus, persepsi guru, pelecehan seksual

Introduction

Child sexual abuse has short- and long-term negative effects on the social, emotional, and sexual development process, quality of life, and mental health of individuals (Ozbaran et al., 2009; Murray, Nguyen and Cohen, 2014). The exposure of children with learning difficulties (LD) to sexual abuse is a problem on a global scale (WHO, 2003; Walsh et al., 2015; Murray, Nguyen and Cohen, 2014; Helton, Gochez-Kerr and Gruber, 2018). Research shows that children with LD are more likely to be sexually abused than children without LD (Sullivan and Knutson, 2000; Briggs, 2006; Reiter, Bryen and Shachar, 2007; Cederborg, Hultman and Rooy, 2012; Jones et al., 2012; Barnard-Brak et al., 2014; Grove et al., 2018; Helton, Gochez-Kerr and Gruber, 2018). In particular, a study conducted in the UK on the relationship between disability and child maltreatment found that children with disabilities are around three times more likely to be sexually abused than their peers without LD (Jones et al., 2012). One reason is that these children are more vulnerable than their peers, as they are not capable of clearly identifying their sexual abuse situation and reporting it (Stalker and McArthur, 2012; Tirtawinata, 2016; Franklin and Smeaton, 2017).

Sex education, like other developmental areas, is a field in which all children need to develop and be involved in the school curriculum. Comprehensive sexuality education (CSE) is a curriculum-based cognitive learning process prepared by UNICEF (2020) and planned to be implemented all over the world. Comprehensive sexuality education aims to make children aware of their own well-being, social and emotional relationships by providing them with sufficient knowledge and values, while at the same time aiming to help them protect themselves and defend their rights (Treacy, 2016). Safeguarding based on effective collaboration is important for all children, in particular children with LD, to make them feel safe and protect them from situations of potential risk (Blake, 2013).

The studies reviewed above have revealed a clear lack of research into teachers' views of RSE for children with LD, whilst also highlighting the importance of including the child's whole environment in the safeguarding process. The present study therefore aims to bridge this gap by investigating the issues faced by teachers of students with LD when attempting to provide RSE and to recommend some principles of best practice and directions for future research.

There is a significant gap that needs to be focused on, which is teachers' key knowledge and experience when it comes to children with LD in relation to sexual abuse and how well safeguarding services work in the UK (Stalker and McArthur, 2012; Scottish Gov, 2014b; Fyson, 2020). The purpose of this study is to investigate teachers' perceptions of sex education for children with learning difficulties and to determine various options for activities for preventing sexual abuse. In this regard, this study aims to contribute to the research conducted in the field of sex education of children who have difficulty in learning by examining teachers' perceptions of how sex

education programs and sexual abuse prevention programs are delivered.

It is very important to note that exploring the ideas of special education teachers has a huge impact in this area because they are qualified people who spend a lot of time learning about students with LD (Kang and Martin, 2018). They spend a significant amount of time with students because of their professionalism, and most importantly, they can identify areas and detect problems that need to be addressed due to their daily relationships with students. Another reason for choosing this topic is that there is scarce material explaining teacher perceptions, which is probably the most important factor to be considered, and that will allow us to approach the topic from a more appropriate perspective. The objectives of this research are as follows: 1) To explore teachers' perceptions on the efficiency of sex education for students with LD; 2) To identify teachers' role in preventing sexual abuse among students with LD.

In order to achieve these aims, two research questions on the subject of special education teachers' perceptions of sex education for preventing the sexual abuse of students with LD in the UK were examined. The research questions are as follows: 1) How is sex education taught in a special school classroom environment?; 2) To what extent can special school students be safeguarded through sex education?.

Method

In this study, experienced special education teachers would provide a great deal of beneficial information on the role of special education in the prevention of sexual abuse of children with LD. The participants in this study were determined by maximum variation sampling using purposeful sampling methods. The idea behind maximum variation sampling is to look at a topic from as many different perspectives as possible, thereby reaching a broader understanding. This method is also known as 'heterogeneous sampling' and involves identifying a wide range of candidates related to the subject of study, which is useful when the sample pool is very small (Cresswell, 2014). The topic of the present research is examined from the perspective of various teacher participants in programs of sex education and harassment prevention. The criteria of maximum diversity used in qualitative research, regarding social variables such as occupation, the institution where the participants work, and individual variables such as gender, nationality, geographical location, and duration of experience with children with LD, were used in this study (see Table 1). No more than two teachers were selected from the same school, as schools typically ask their teachers to apply common teaching strategies, because developing a wide perspective is beneficial for generalizing the findings of this study.

Table 1: Participants

	<i>Gender</i>	<i>Nationality</i>	<i>Location</i>	<i>Occupation</i>	<i>Experience</i>	<i>Population Participants Work With</i>	<i>Age of Population Participants Work With</i>
<i>Participant 1</i>	Female	Turkish	Essex	SEN Teaching Assistant	7 months	A mixed group of Learning Difficulties	Ages 4-15
<i>Participant 2</i>	Female	British	Essex	Learning Support Assistant	2 years	Severe Learning Difficulties	Ages 5-19
<i>Participant 3</i>	Female	Romanian	London	SEN Teaching Assistant	1 year	Autism Spectrum Disorder (ASD) & Profound and Multiple Learning Difficulties (PMLD)	Ages 5-14
<i>Participant 4</i>	Female	Greek	London	SEN teacher	6 years	ASD & PMLD	Ages 7-11
<i>Participant 5</i>	Male	British	Nottingham	Art & SEN Teacher	7 years	Severe Learning Difficulties	Ages 16-19

In this study, which aimed to examine teachers' views on sex education and safeguarding perceptions, reflective research diary and semi-structured interview techniques were used (Yildirim and Simsek, 2016).

At the start of the data analysis process, the semi-structured interview audio recordings made during data collection were transcribed. This transcription process was done separately for each participant, written without adding or subtracting anything, and then these transcripts were verified by the researcher.

To make the transcription more accurate, the researcher used a dictation tool in the Microsoft Word program during the interview. NVivo software, accessed through Anglia Ruskin University network, was used for a second transcription of the participants' answers, and the researcher examined the transcripts to ensure that no private information would appear in the final publication. Using word analysis software such as NVivo is important for both accurate transcription and time efficiency. Using the same software to analyse the data also ensures additional data privacy because moving the records to another software platform for analysis exposes them further to data theft and manipulation. The researcher opted to use thematic analysis, utilizing NVivo to support the analysis of the qualitative data and using Braun and Clarke's (2013) six-stages of analysis; namely familiarization, coding, generating themes, reviewing themes, identifying themes, and writing out. The researcher used the NVivo software to transcribe the interviews and organize the notes and other resources. Then the data was reviewed, and initial codes were formed after which the

codes were modified or grouped by theme (Saldana, 2011). The main theme and five subthemes were selected by the researcher. Finally, the theme was summarized in a clear and understandable way. Each of the subthemes is presented in the results and discussion chapter.

Results and Discussion

The purpose of this research is to explore teachers' perceptions of relationship and sex education for students with LD. The data used for this purpose were a review of relevant research literature, data collected from semi-structured interviews with teachers, and the diary kept by the researcher during the research process. The findings are analysed and discussed below using an Ecological-Transactional theoretical framework (Bronfenbrenner, 1979; Cicchetti, Carlson and Dante, 1989). The main outcomes of the interviews were selected and grouped according to the main theme and five sub-themes by the researcher. The theme presented below (see table 2).

Table 2: Theme: Teacher's Perceptions

Theme: Teachers' Attitudes / Perceptions / Experiences
Views on Sex Education
The Safeguarding Process
Potential Challenges
Working with Parents
Qualifications of Teachers

Views on Sex Education

The researcher asked the participants about their views on sex education for children with LD. All the participants stated that this is a very important issue. Some of the participants (Participants 1 and 2) described the provision of sex education as a way to prevent problem behaviour in children with LD. Others (Participants 4 and 5) considered it necessary in order to protect children from sexual harassment. Participant 2 highlighted the role of sex education in preventing both inappropriate behaviour and sexual abuse.

This is demonstrated the Participant 2's statement that *"I think it's important because they need to be aware of certain situations that they may find themselves in in order to be able to protect themselves from abuse or an inappropriate behaviour taking place whether from them or from other people so if we educate them about it, they can be more aware of what's right and what's wrong."*

Research has revealed that attitudes towards sex education affect the behaviour of educators and the way they present this education (Pop and Rusu, 2015). In the light of these studies, the researcher argues that it may be most effective for educators to provide sex education even when there is no specifically identified reason for doing so.

The Safeguarding Process

Participants were asked what safeguarding meant and how much they knew about the process. All the participants reported that they had training on safeguarding and how to deal with any concerns or signs of sexual abuse, and the necessary steps they needed to take, from reporting to supervisors and safeguarding teams to contacting family members. They all agreed that it is important to recognize and report early signs.

This is well described by Participant 3, who observed that *"I'm aware about that and I know how important it is for kids to learn how to communicate what's happening around them. We as a teacher we need to be so attentive that if we observe that something is going wrong, and the child is giving us a message we need to pass it to the safeguarding team."*

An interesting point to note is that, despite all participants being aware of the steps involved in safeguarding, some research has shown that it can be challenging to recognize the signs of sexual abuse in children with LD, as they may exhibit inappropriate behaviours (Murray, Nguyen, & Cohen, 2014). Therefore, it is highly recommended to implement an inter-agency approach to safeguarding that involves collaboration and awareness of potential good or bad situations in the child's environment. This can be the most fundamental step in protecting the child.

Potential Challenges

The participants were asked about the potential challenges they faced when implementing a sex education and abuse prevention program. The participants mentioned many difficulties, the most common of which were problems with communication, cognitive level, taboo, and generalization. As we know from the literature, all areas of development are interconnected, and if there are any difficulties in one area, such as cognitive level, they can also affect communication (Leung et al., 2019).

Communication involves both receptive and expressive language. One of the participants (Participant 3) stated that they were not able to communicate directly with one particular child, and providing education became more difficult because it had to be provided through other persons, such as the child's caregiver. This type of communication difficulty encompasses both receptive and expressive language.

Cognitive level. The participants stated that learning difficulties caused by the nervousness of children with LD at their cognitive level was a barrier to delivering sex education. Since comprehension, perception, and discrimination skills fall within cognitive development, difficulties experienced in these areas play an important role in the effectiveness of education. One participant (Participant 3) mentioned the difficulty of repeating the concepts of sex education every day due to students' memory problems.

Taboo refers to societal attitudes toward a subject, thought, or concept. The participants mentioned that students or teaching assistants were not able to conduct the lesson efficiently due to laughing while the subject of sex education was being explained in the classroom. The participants added that children with LD have particular trouble focusing in such circumstances. The reason why people behave in this way while providing sex education is connected to taboos, such as sexuality being seen as an embarrassing and laughable topic.

This is stated in Participant 3's narrative in their observation that *"They are not able to focus this started to laugh as soon as you showed mannequin it's kind of a taboo subject for them, they start to laugh and it's hard to make them focus especially with my boys, it was really difficult to make them attentive and make them take this seriously came to our class."*

Generalization skills. One common observation made by the participants was that it is crucial to generalize the concept of sex education because children with LD are vulnerable to problematic behaviours and sexual abuse in any environment. However, it is more challenging for children with LD to learn this than typically developing children.

An interesting point shared by one of the participants (Participant 4) is the preferences of families and educators regarding the gender of the teacher. These preferences mean that female students are taught by female teachers, and the same is true for males.

Participant 4 explained that *"Another barrier is the sex of the educator. I want to add that, just remember, because I remember that a lot of parents is pretty much it relies on the also the hygiene stuff, but we do get a lot of parents with, for example, that they have girls they don't want the girls another lecture to go with the members of staff, but we do have the sex of the educator of the teaching assistant as well could be potentially yeah"*.

Working with Parents

The RSE program has been included in the curriculum as a compulsory course since September 2020. The participants were asked what approach they took with families and how they went about gaining parental approval for sex education for children with LD. Two participants (Participants 1 and 2) stated that they did not communicate with parents because they were teaching assistants. They said that the classroom teachers did this, so they had no experience working with parents.

One participant (4) stated that she sent out the consent form to be completed by families before the lesson, and that children with LD were included in the course if the parents gave their consent, but the teacher did not intervene when parents did not give their consent.

One participant (5) said that children with LD are in constant contact with their parents, and when they are told that their children should receive sex education, the families immediately accept this. The participant stated that he communicates with the

parents about the activities performed at the end of each day through online or physical diaries. The participant stated that there was no problem with the completion of the consent form due to the feeling of trust between families and the teacher.

Another participant (3) stated that although the parents with whom the participant worked did not want to sign the consent form, she convinced them that the matter was important. This participant explained the criticality of this issue as best she could, showing the families the statistics of sexual abuse cases.

Participant 3 said that *“in the beginning they do not want to hear about that they were like no, it's not necessary, it's not important. After we showed them some case studies specific on sexual abuse and we explain them look your child can experience that do you want him to do that, and we give them especially examples from the school and from the cases that happened before really according of the people as well and they understood OK look you teach them in this way. I can help you we need to make a thing as advise the child is never going to learn anything from this and if it's going to be a certain situation, he's not going to be able to respond. That is going to happen. Would you like do your child to have sexual abuse? And they were like Oh no no these things are more serious, and we present a lot of statistics in front of them, and we showed them exactly the materials that we're going to use with their children in which period of time also. [...] Every lesson we speak with them. We have that system ERIC in which we upload videos and pictures that parents can see and can help us. Even they can upload the movies and features with the children doing something at home and they were really happy about it. We basically we create another connection with us and parents, but it was a tough subject, and we need a few parents meeting, maybe ten, before we start everything and written agreement as well that they are a key for that child to learn everything about sexual and positive relationships.”*

Cooperation with parents is also emphasized by the Ecological-Transactional theory, which explains that everyone should work towards the same goal for the child (Bronfenbrenner, 1979; Cicchetti, Carlson, and Dante, 1989). Since children, especially those with learning difficulties, cannot be considered independent of their environment, care should be taken in all aspects of the child's development, including sexual development, RSE, and safeguarding areas in line with this model (Cicchetti and Valentino, 1989).

The researcher recorded in her diary at the time a strong impression that *“Some participants do not communicate directly with parents, so it may be difficult to generalize what is needed for the development of some of the children's skills, and this can also affect their understanding of the child and their collaborative work on the same goal for the child.”*

Qualifications of Teachers

The participants were asked whether they felt qualified to deliver sex education. 2 participants (Participants 1 and 4) did not feel qualified in this regard, and 3 participants felt themselves to be qualified.

Participants who did not feel qualified.

One participant (1) stated that she did not feel qualified due to insufficient training and practice. The other participant (4) said that because of the Jewish school policy in her workplace, sex education was not included in the curriculum, and therefore the participant was not up to date on current information. In fact, when the researcher mentioned that the RSE program was made mandatory in September 2020, the participant stated that she was not aware of this situation. Studies show that many teachers do not feel qualified because they do not receive sufficient training and support from their schools or families (Walker et al., 2020).

Participants who felt qualified.

One participant (2) felt qualified, as she has a lot of practical experience as well as theoretical knowledge. The other (3) felt qualified due to having a large amount of educational and theoretical knowledge. However, she thinks that she needs to practice more in order to feel more qualified and believes that she will feel better about it in the future. Another participant (5) said that while explaining the issues related to sex education, he expressed himself comfortably without experiencing any discomfort, and therefore felt qualified.

Overall, the greatest challenge faced by teachers is taboo, which often impedes sex education in special education schools. The concept of taboo affects many elements such as teachers, parents, and even children's perspectives. For instance, although the RSE course is compulsory in all schools, parents who have taboos regarding this concept may withdraw their children from this session.

In this study, some important points were highlighted by the opinions and answers of the participants. There are notably good practices in sex education and protection from sexual abuse that teachers use, and which can be shared so that more teachers may apply them in their educational process. It is a remarkable example that the participants use interactive concrete materials, such as mannequins and videos, in order to deliver sex education whilst respecting children's bodies (Dent and Harden, 2001). The fact that this approach can be utilised by other teachers and schools has an important place in sex education going forward. Providing sex education at school by professionals trained in the field of special education is more beneficial than when it is given by families and caregivers who may be inadequate in this regard. This assertion is supported by Leung et. al., 2019. Another positive implication is that since September 2020, the RSE course has been compulsory in special education schools (DfE, 2019). The recognition of this situation by the government and its being perceived as a necessity is an important step towards reducing the vulnerability of children with LD. It can be demonstrated in good practice that participants generally embark on RSE at an early age and consider the cognitive levels of children when they start teaching sex education (Blake, 2013; Tirtawinata, 2016).

The interviews with the teachers revealed some issues that need to be improved with regard to the process of delivering sex education to children with LD. Firstly,

weak parent-teacher interaction negatively affects the child's development and leads to factors affecting the child's individual development being ignored, even when a child-centred educational approach is used. In Ecological-Transactional theory, support is provided for the development of the child by taking into account all the elements that affect the child (Cicchetti, Carlson and Dante, 1989). It is possible to increase the positive factors that affect the child's wellbeing and decrease the negative ones by including the people in the microsystem in the training process (Bronfenbrenner, 1979). Therefore, collaboration with parents needs to be better. Schools also have a great responsibility to inform parents about the importance and function of sex education. Working in cooperation with families increases the quality of education and provides more benefits for the child (Goodall and Vorhaus, 2011; Taylor et al., 2014).

While discussing the delivering of sex education to children with LD, some negative points emerged, with some teachers viewing sex education as a lower priority than academic education. However, it is more important for a child to feel safe and be protected from possible abuse through sex education than to acquire academic skills. It may be that sex education was not mentioned at first, despite teachers prioritising it in the classroom, because they are embarrassed to speak about it or because they are not used to verbalising it while speaking about teaching children with LD (Iyer and Aggleton, 2012).

One of the conditions that limits the quality and effectiveness of sex education is that teachers sometimes feel inadequate in this regard (Stalker and McArthur, 2012; Scottish Gov, 2014b; Fyson, 2020). Considering the participants, it was seen that those who felt themselves competent had a good relationship with two thirds of the parents they worked with, which is higher than other participants. This may indicate an increase in family communication and education as teachers' competence and self-confidence increase. On the other hand, parents who have some taboos regarding this concept (Kalra and Bhugra, 2013) due to their religious, socio-economical or cultural background; are allowed to withdraw their children from this course (DfE, 2019). For instance, an ultra-Orthodox Jewish school mentioned by one of the participants does not teach sex education at all, with the result that many children may be missing out on vital safeguarding.

Conclusion

Regardless of whether the country is a developed or a developing country, sexual abuse is a global problem and has been a frequent occurrence according to WHO (2003), Murray, Nguyen and Cohen (2014), Walsh et al. (2015) and Helton, Gochez-Kerr and Gruber (2018). It is impossible to know the true number of cases of child sexual abuse because the unreported figures are higher than the reported figures (NSPCC, 2021). The inadequate sex education that children with LD receive is also not well designed in terms of individual development needs (Schaafsma et al., 2015; Grove et

al., 2018). While offering a sex education program for children with LD, collaboration is as important for safeguarding as the key theoretically and practically aspects of sex education (Bronfenbrenner, 1979; Cicchetti and Valentino, 1989; The Children Act 2004; Working Together to Safeguard Children, 2018).

The results presented in this article highlight that all the participants stated that sex education is an important subject to deliver to children with LD as they are more vulnerable. There were a number of potential challenges raised under the theme of teachers' perceptions, including communication, cognitive level, taboos as well as generalisation skills. It is also critical for teachers to emphasize the importance of collaborating with parents, since parents are the closest adults to the child.

There were some limitations to this study. There only five participant teachers were interviewed, and all of them were deliberately selected. However, since this was an initial qualitative study, the number of participants was sufficient to gather useful preliminary information on teachers' experiences and perceptions of this topic.

Further research on a wider scale is needed, perhaps incorporating caregivers, social workers and young people as well as teachers in order to gather additional data that could not be accessed in this study. In addition to further research in this field, the researcher recommends that teaching RSE start at an earlier age, that teachers receive special training in this area, and that more effort is spent on further collaboration between home and school life in this area.

References

- Barnard-Brak, L. et al., 2014. Predictors of Access to Sex Education for Children with Intellectual Disabilities in Public Schools. *Intellectual and Developmental Disabilities*, 52(2), p. 85.
- Blake, S., 2013. *Sex and Relationships Education: A Step-By-Step Guide for Teachers*. 2nd ed. London; New York: Routledge.
- Braun, V. and Clarke, V., 2013. *Successful Qualitative Research: A Practical Guide for Beginners*. SAGE Publication, London.
- Briggs, F., 2006. Safety issues in the lives of children with learning disabilities. *Social Policy Journal of New Zealand*, (29), pp.43-60.
- Bronfenbrenner, U., 1979. *The ecology of human development*. Harvard university press.
- Cederborg, A.-C., Hultman, E. and Rooy, D.L., 2012. The quality of details when children and youths with intellectual disabilities are interviewed about their abuse experiences. *Scandinavian Journal of Disability Research*, 14(2), pp.113-125
- Cicchetti, D., and Valentino, K., 2015. An Ecological-Transactional Perspective on Child Maltreatment: Failure of the Average Expectable Environment and Its Influence on Child Development. *Developmental Psychopathology*, 129-201.
- Cicchetti, D., Carlson, V. and Dante, C. eds., 1989. *Child maltreatment: Theory and research*

- on the causes and consequences of child abuse and neglect. Cambridge University Press.
- Creswell, 2014. Educational research: planning, conducting, and evaluating quantitative and qualitative research.
- Dent, J.A. and Harden, R.M., 2001. A Practical Guide for Medical Teachers.
- Equality Act 2010. [online] Available at: <http://www.legislation.gov.uk/ukpga/2010/15/contents> [Accessed 11 February 2021].
- Franklin, A. and Smeaton, E., 2017. Recognising and responding to young people with learning disabilities who experience, or are at risk of, child sexual exploitation in the UK. *Children and Youth Services Review*, 73, pp.474-481.
- Fyson, R., 2020. Young people with learning disabilities who sexually abuse: Understanding, identifying and responding from within generic education and welfare services.
- Goodall, J. and Vorhaus, J., 2011. Review of best practice in parental engagement.
- Grove, L., Morrison-Beedy, D., Kirby, R. and Hess, J., 2018. The Birds, Bees, and Special Needs: Making Evidence-Based Sex Education Accessible for Adolescents with Intellectual Disabilities. *Sexuality and Disability*, 36(4), pp. 313-329.
- Helton, J. J., Gochez-Kerr, T. and Gruber, E., 2018. Sexual Abuse of Children with Learning Disabilities. *Child Maltreatment*, 23(2), pp. 157-165.
- Iyer, P. and Aggleton, P., 2012. Sex education should be taught, fine...but we make sure they control themselves': teachers' beliefs and attitudes towards young people's sexual and reproductive health in a Ugandan secondary school. *Sex Education*, 13 (1), pp. 1-14.
- Jones, L., Bellis, M.A., Wood, S., Hughes, K., McCoy, E., Eckley, L., Bates, G., Mikton, C., Shakespeare, T. and Officer, A., 2012. Prevalence and risk of violence against children with disabilities: a systematic review and meta-analysis of observational studies. *The Lancet*, 380(9845), pp.899-907.
- Kalra, G., and Bhugra, D., 2013. Sexual violence against women: Understanding cross-cultural intersections. *Indian journal of psychiatry*, 55(3), pp. 244-249.
- Kang, D.Y. and Martin, S.N., 2018. Improving learning opportunities for special education needs (SEN) students by engaging pre-service science teachers in an informal experiential learning course, *Asia Pacific Journal of Education*, 38(3), pp. 319-347.
- Lanzarote Convention, 2007a. Article 18, Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse
- Leung, H., Shek, D.T.L., Leung, E. and Shek, E.Y.W., 2019. Development of Contextually relevant Sexuality Education: Lessons from a Comprehensive Review of Adolescent Sexuality Education Across Cultures, *Int. J. Environ. Res. Public Health*, 16(4), pp. 621.
- Murray, L. K., Nguyen, A., and Cohen, J. A. 2014. Child sexual abuse. *Child and adolescent psychiatric clinics of North America*, 23(2), pp. 321-337.

- NSPCC, 2021. [online] Available at: <<https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/child-sexual-abuse/>> [Accessed 1 December 2020].
- NSPCC, 2021. *Sexual Abuse*. [online] Available at: <<https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/child-sexual-abuse/>> [Accessed 12 January 2021].
- Ozbaran, B. *et al.* (2009) 'Social and Emotional Outcomes of Child Sexual Abuse: A Clinical Sample in Turkey', *Journal of Interpersonal Violence*, 24(9), pp. 1478–1493.
- Pop, M. V. and Rusu, A. S., 2015. The role of parents in shaping and improving the sexual health of children– lines of developing parental sexuality education programmes. *Procedia-Social and Behavioral Sciences*, 209, pp. 395-401.
- Reiter, S., Bryen, D.N. and Shachar, I., 2007. Adolescents with intellectual disabilities as victims of abuse. *Journal of Intellectual Disabilities*, 11(4), pp.371-387.
- Saldaña, J., 2011. *Fundamentals of Qualitative Research: Understanding Qualitative Research*.
- Stalker, K. and McArthur, K., 2012. Child abuse, child protection and disabled children: A review of recent research. *Child Abuse Review*, 21(1), pp.24-40.
- Sullivan, P. M. and Knutson J.F., 2000. Maltreatment and disabilities: a population-based epidemiological study. *Child Abuse & Neglect*, 24(10), pp. 1257-1273
- Taylor, J., Stalker, K. and Fry, D. and Stewart, A., 2014. *Disabled Children and Child Protection in Scotland: An investigation into the relationship between professional practice, child protection and disability*.
- The Children and Young People (Scotland) Act 2014. [online] Available at: <<http://www.legislation.gov.uk/asp/2014/8/section/57/enacted> [Accessed 26 January 2021] >.
- The Relationships Education, Relationships and Sex Education and Health Education (England) Regulations, 2019, department of education.
- Tirtawinata, C. M., 2016. Importance of Sex Education Since Early Age for Preventing Sexual Harassment. *Humaniora*, 7(2), pp. 201-209.
- Treacy, A.C., 2016. A Mixed Methods Study of Sexual Health Education for Students with Disabilities. PhD Dissertation. University of Nevada, Reno.
- UNICEF, 2020. Action To End Child Sexual Abuse And Exploitation: A Review Of The Evidence 2020 [pdf] Available at: <<https://www.unicef.org/media/89096/file/CSAE-Report-v2.pdf>> [Accessed 23 December 2020].
- Walker, R., Drakeley, S., Welch, R., Leahy, D. and Boyle, J., 2020. Teachers' perspectives of sexual and reproductive health education in primary and secondary schools: a systematic review of qualitative studies. *Sex Education*, pp.1-18.
- Walsh, K., Zwi, K., Woolfenden, S. and Shlonsky, A., 2015. School-based education programmes for the prevention of child sexual abuse. *Cochrane database of systematic reviews*, (4).
- World Health Organization (WHO), 2003. *Guidelines for Medicolegal Care for Victims of*

Sexual Violence. World Health Organization. [Pdf] Available at: from:
<http://www.who.int/publications/2004/924154628x.pdf>. [Accessed 25
December 2020].

Yıldırım, A. & Şimşek, H., 2016. Sosyal bilimlerde nitel araştırma yöntemleri. Ankara:
Seçkin.