Exploring sexuality and affection of adults with intellectual disabilities in a healthy way

Exploring a Complex Reality

The Complexity of Sexuality in ID

Exploring sexuality in intellectual disability poses a twofold problem due to the generic and uneven nature of the terms

Giving Language to the Body

The proposed adoption of Augmentative Alternative Communication tools to provide a linguistic and communicative device for people with ID

Navigating the Web of Technology

A reflection on how new technologies can be both helpful and a trap for people with ID

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INTRODUCTION

Sexuality is a natural part of life, yet for many adults with intellectual disabilities (PIDs), it remains an unspoken topic—overlooked, misunderstood, and surrounded by stigma. This project dares to change that. It champions the right of PIDs to explore and express affection and sexuality in healthy, safe, and supported ways. At its heart, the project empowers not only PIDs but also the families and professionals who walk alongside them.

By providing tailored learning opportunities, fostering inclusive dialogue, and strengthening cross-border cooperation between Italy and N. Macedonia, we are building bridges between knowledge and compassion, rights and responsibilities, independence and connection. The project responds directly to key European priorities on disability inclusion, lifelong learning, and independent living—and aims to spark real change across communities.

Above all, this is a story about dignity, autonomy, and inclusion. Because when people are given the tools to understand their emotions, their rights, and their relationships, they are better able to shape their lives with confidence and joy.

With this in mind, **L'Arcobaleno** from Bologna, **Il Chicco** from Rome and **KRIK** from Skopje developed the project "*Intimacy Compass: Exploring sexuality and affection of adults with intellectual disabilities in a healthy way*".

To bring this vision to life, we will:

1. **Create tailored learning materials** designed specifically for adult PIDs, their families, and support staff—providing guidance on navigating affection and sexuality with confidence and care.
2. **Equip and empower** around 80 assistants, professionals, and family members from N. Macedonia and Italy through targeted training sessions, helping them become informed, compassionate allies in this sensitive yet vital area.
3. **Offer direct support** to at least 100 PIDs from N. Macedonia and Italy, creating safe, respectful spaces where they can better understand their emotions, relationships, and rights.
4. **Extend impact across Europe** by sharing resources and best practices with more than 30 like-minded organisations in other countries, fostering a stronger, more unified community of inclusion and learning.

Exploring sexuality in intellectual disability (ID) poses a twofold problem due to the nature of the two terms in question. Indeed, both terms, "sexuality" and "intellectual disability", describe such uneven scenarios that their meanings are extremely generic.

When we talk about intellectual disability, we are describing a continuum ranging from very severe intellectual, motor and sensory conditions to nuanced clinical pictures characterized by mild noncompliance just a step away from that intangible and disjointed threshold called "normality".

Similarly, when we talk about sexuality naively, at first glance, we think we are talking about a clear, codified experience and practice confined to precise and identified anatomical locations.

However, psychoanalysis, observation of people with ID or even just a slightly deeper look into our souls, have shown that origin and fate of sexual drive, involve parts of the body and describe extremely varied acts.

This learning material has three intentions:

The first part is an exploration of some scenes of the "sexual fact" in intellectual disability. This is preceded, however, by a disciplined questioning: what the sexuality of people without language and with profound mental retardation, that of people with mild intellectual disability, and that of a so-called normal person who calls himself a "care giver", have in common?

The second part of this project is the proposed adoption of Augmentative Alternative Communication (AAC) tools, to provide a linguistic and communicative device for people with ID to better experience this delicate affective and somatic area.

The third part is a reflection on how new technologies can be a helpful tool but at the same time a trap for people who have difficulty weighing the consequences of their actions in a world, the web, full of pitfalls.

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Exploring sexuality and affection of adults with intellectual disabilities in a healthy way- "Intimacy compass"

The eroticization of human relationships is in itself an existential challenge; if the relationship is with/among people with intellectual disabilities, it becomes one of the most burning challenges for anyone to whom they relate.

On one front we find the sexual demands of people with intellectual disability responding to which is an oceanic challenge in complexity, ethics, personal involvement; on the other front we find the caregiver or family member in action. Of all the behaviors they are called upon to confront, those that pertain to the eroticized dimension have the power either to paralyze their work or to recruit impulsive and often repulsive responses, poorly thought out and always marked by severe discomfort. This discomfort often results in a perpetual infantilization of the eroticized instances that has the main task of relieving the care-giver of embarrassment. In short, to imagine confining the care giver's educational intervention regarding the sphere of sexuality into a system of procedures and guidelines is both impossible and dangerous.

The reason for this, which is all too intuitable, is always poorly thematized in training projects, which are almost always inspired by stereotypical theorizing and chock-full of ideology, as is often the case when inordinate intimacy with the bodies of disabled people is at stake.

Our contribution is intended to be a territory for training and sharing in the field of experiences, often dramatic and engaging, united by the pervasive difficulty of remaining in an emotional and operational set-up as stable as possible.

Another goal that this work sets is to trigger an ongoing reflection on this issue in family dwellings, private, public, and health care, where women and men with intellectual disabilities live.

The heart of this formative experience is essentially semantic: it is necessary, in order to generate a good arrangement of the family member and the practitioner in the eroticized dynamics, that the words *sex* and *sexual* be rigorously reflected upon and signified also because, it should be made clear, there is no sexuality in ID that is untethered from that of those who relate to it.

Sexuality is an oceanic issue. Sexuality in intellectual disability doubles the complexity but, at the same time, it is also a fruitful site for reflection on the topic. We are aware that circumscribing it is a vague operation bordering on the impossible.

The following questions and life stories are an attempt to put a frame and better identify the topic

Is sex a natural occurrence?

Not anymore. Human sex was "natural," that is, like that of dogs, antelopes, giraffes, until Adam and Eve "ate the apple of knowledge". Since then, they knew they were naked, hid, felt ashamed because certain things are not to be done, and from that time on, for humans, there has been no natural sex on earth.

To better answer this question, we will talk about Alessio's oxytocin.

Alessio is a 34-year-old man with spastic tetraparesis, Profound Mental Retardation, absence of speech and a natural hormonal endowment like all humans.

Oxytocin is a hormone produced both in the brain and in the ovaries and testes and is released by pleasant and prolonged body contact.

Its action profile tells us of a broad functional overlap between attachment, touching, caregiving and sexuality.

It is very important that the mother and her child experience pleasant feelings in the practices of caregiving and touching. All nurturing relationships can elicit pleasurable feelings, and this is helpful to the reinforcement of this very important conduct.

That this feeling of pleasure can lap the area of sexuality, supported by hormonal inheritance, should not surprise us.

All this also affects the relationship between Alessio and his care giver.

Is sex about specific parts of the body?

Sigmund Freud called the child. By these words he means to describe the fact that the infant, seeks pleasure in the stimulation of the most unthought of body parts. Only after adolescence will the search for pleasure be channeled to the genitals, the institutionally predisposed organs.

We all know that this is not how things are and in the world of disability this can be seen brightly.

Gianni is a 33-year-old man with mild ID. Gianni is a very jovial and sociable person with anyone.

It happens frequently to observe him taking the hands of an interlocutor with whom he has entered into a relationship, to gently caress them. The act appears entirely innocent and affectionate, yet it is possible to observe in his face a growing and intense arousal as a result of which this contact is maintained for a long time. The hand has been powerfully eroticized. What to do? The act appears harmless, even gentle in the eyes of everyone, including the interlocutor. Instead, the staff worker finds herself wondering whether and how to intervene in intensely eroticized but seemingly indifferent conduct.

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Joan is a 46-year-old woman with deep ID and hypotonic syndrome who spends many hours of the day in intense and continuous manual stimulation of the tongue and oral mucosa.

A minimally refined interrogation cannot help but trace this conduct within a drive dynamic that makes the mouth an eroticized site.

What we intend to emphasise with these two stories is that even a hand or the oral mucosa can constitute highly eroticised body parts.

Is sex for procreation?

Evidently not or at least, not only. In respect to intellectual disability this truth seems as clear as ever. If it were not so, this project itself, on sexuality in ID, would be meaningless.

Masturbation is non-procreative sexual conduct and masturbatory conduct in ID is overrepresented, compulsive and often has the calming of distress as its purpose

Pasquale and Sara are a man and a woman with marked traits of autism who present daily, compulsive masturbatory conduct. Such conduct often occurs in public and inappropriate settings.

The care-giver is thus faced with two orders of problems:

the first is the "tout court" management of such compulsive conduct. The care-giver wonders, not without embarrassment, whether to limit it and how to redefine it.

The second problem is the management of the privacy that is not respected and recognized by them. Recognition of privacy is one of the skills that may be most damaged in the ID profile. Therefore, the care-giver must pay due attention to working on the concept of decency.

Does sex provide pleasure?

It would seem so, but a slightly deeper look reveals that things are not so simple. It is precisely in the world of ID that we see most clearly the relationship between sexuality and distress, between sexuality and torment. Compulsive, masturbatory arousal and some self-injurious conduct configure undifferentiated drive scenarios that have little to do with pleasure.

"The boundary between self-injurious and autoerotic practices," writes psychoanalyst Franco Lolli, "is not easily identifiable: shoving one's hands down one's throat, stripping one's body, tearing one's hair, banging one's head against the edges of the wall, are behaviors in which the enigmatic character of the drive mixture appears evident (.... .); the body, as a large and single erogenous zone becomes the target of incessant activities in which the distinction between pleasure and displeasure seems to blur in the production of a malignant jouissance that reigns supreme."

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Is sex a right?

Sex, like health, is not a right for anyone with or without a disability; it is an achievement, never taken for granted.

The sexual condition of the intellectually disabled person is often that of an undesirable desirer.

The right for the person with ID is to be able to count on the care and taking care of all his or her desiring instances, including sexual ones, which emerge in each person's unique and unrepeatable lives.

Returning to the question of whether sex is a right, we want to emphasize that for many people the answer is yes, so much so that in some European states this right has been formalized in a law on sexual assistance. We know that many people with ID have been able to have a full and satisfying sexuality because of this possibility. Things do not always turn out that way.

Carlo's parents, a man with middle-grade ID and autistic traits (almost never women parents) in order to exercise this right for their child,have opted for paid sexual assistance, even in the absence of a law. In Carlo's case this right turned into a traumatic experience that generated marked dysfunctional behaviors of compulsive demand and aggression.

Sexual relationship, contrary to what it seems, is a delicate affair full of pitfalls for anyone. It is a very activating event that requires cognitive skills to be decoded, processed, contextualized, researched and experienced.

Is there a pathological and illegal sex?

Sex is pathological if there is someone suffering.

Sex is illegal when there is prevarication over the other.

Sex is even more illegal when there is misunderstanding, or underestimation, of the availability of the other, as can happen in children and in people with ID.

However, there is a very problematic ethical halo around sexuality of people with ID, that requires constant vigilance and questioning without discount for anyone who takes on the burden of caring for people with disabilities. Some questions that haunt the care giver:

Martha and James are a woman and a man with ID who have entered into a relationship. Do they have the right? Sure. Should it be supported and facilitated? Guided? Supervised? Accompanied? Interdicted? Why? How? By whom?

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Or Giulia, a woman with ID, who is in a relationship with a man, indeed a woman, who is not disabled. Or Sara who is very promiscuous. What if it is Flavio who is promiscuous? Will they know how to protect themselves from infection? Will they know how to avoid a pregnancy? What if they desire a pregnancy instead?

Claudia used to report sexual abuse that turned out to be totally unfounded. How can we be sure? What if one day they are not unfounded?

Sexuality is a boundless word and this is not without consequences. The most important consequence is the questioning of consciences of all those involved in the lives and destinies of people with ID.

It is necessary to have a shared critical and plural look at the management of that ineffable world, which is the so-called sexuality of people with ID.

Finally, one must consider that the sexuality of the others always involves one's own.

After all, the purpose of this work is to keep the sharing of this questioning active.

What about the care giver?

Needless to say: the sexuality of the person with ID always involves and recruits that of those who relate to him/her.

The topic, as one can easily guess, is indeed a very sensitive one.

We believe, however, that if it is not discussed in the light of day in all its complexity, it encourages unthinking and unconscious behaviour that usually does not bode well.

All people who work closely with ID, sooner or later, and in any case always, find themselves thematising the eroticisation of the relationship. The sensory proximity of bodies, tactile olfactory visual in an often very radical holding mandate, sequesters both actors in an inevitable eroticized dynamic. The infantilisation of the disabled person by the care giver is the most frequently adopted way to protect oneself from this dynamic. To the care giver the onerous task of knowing how to deal with his own and others' eroticisation.

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WHAT IS AAC?

Communicating is not just talking.

Communicating means sharing a thought, a wish, a need. And there are so many ways of doing this! Think of people who communicate with Italian sign language, musicians who express happy or sad feelings with music, painters, children, who to tell their mum and dad they love them often make a colourful drawing for them.

Augmentative Alternative Communication (AAC) is all of this: it is an approach with many faces, but with the unequivocal aim of offering people who are unable to use words and voice the opportunity to communicate.

Symbols are one of the many faces of CAA. Through the symbol-writing system of AAC, each written word is associated with a symbol related to the concept it is intended to communicate.

One of the strengths of this expressive tool is the visual aspect that supports comprehension and can be advantageous not only for people with complex communication needs, but also for foreigners or elderly people who have difficulty accessing language.

Indeed, the symbol supports of CAA do not replace verbal language, but accompany and enrich it through the visual representation of meanings. In this way, symbols support comprehension, because they enable one to understand a concept even when one does not know the word, and encourage expression, because even the person who does not speak can point to a symbol and thus share a thought.

The thematic tables proposed in the project therefore serve to support these two communication skills: understanding and expression.

For example, operators, friends, families, can use the communicative table with AAC symbols to help the person understand a meaning. For example, if we want to help the adolescent or adult person learn more about his or her body, we can use the thematic table of body parts to support our discourse by indicating symbols.

Or, we can use the tables to support the person's participation and expression by asking them to point to a part of the body where they may have pain or discomfort.

The emotion chart can be used by practitioners, family and friends to support their own communication, for example by pointing to the symbol for 'happy' and commenting: 'Today I am happy because we can go for a walk together!', or by asking the person how they feel by pointing to the emotions from the chart.

Furthermore, the emotion chart can be used when inappropriate behaviour emerges, often reflecting an emotion that is difficult to express. In this case, the thematic emotion chart can be used by family and carers to indicate the emotions the person might be feeling, making it clear that they have been understood and that the feeling felt, which is difficult to express, has a name and can be communicated through pictograms.

Communication pictograms are then used by carers and families in the first place, to support their own communication, and are proposed to the person with complex communication needs who, seeing others use them, can in time use them as a means of expression

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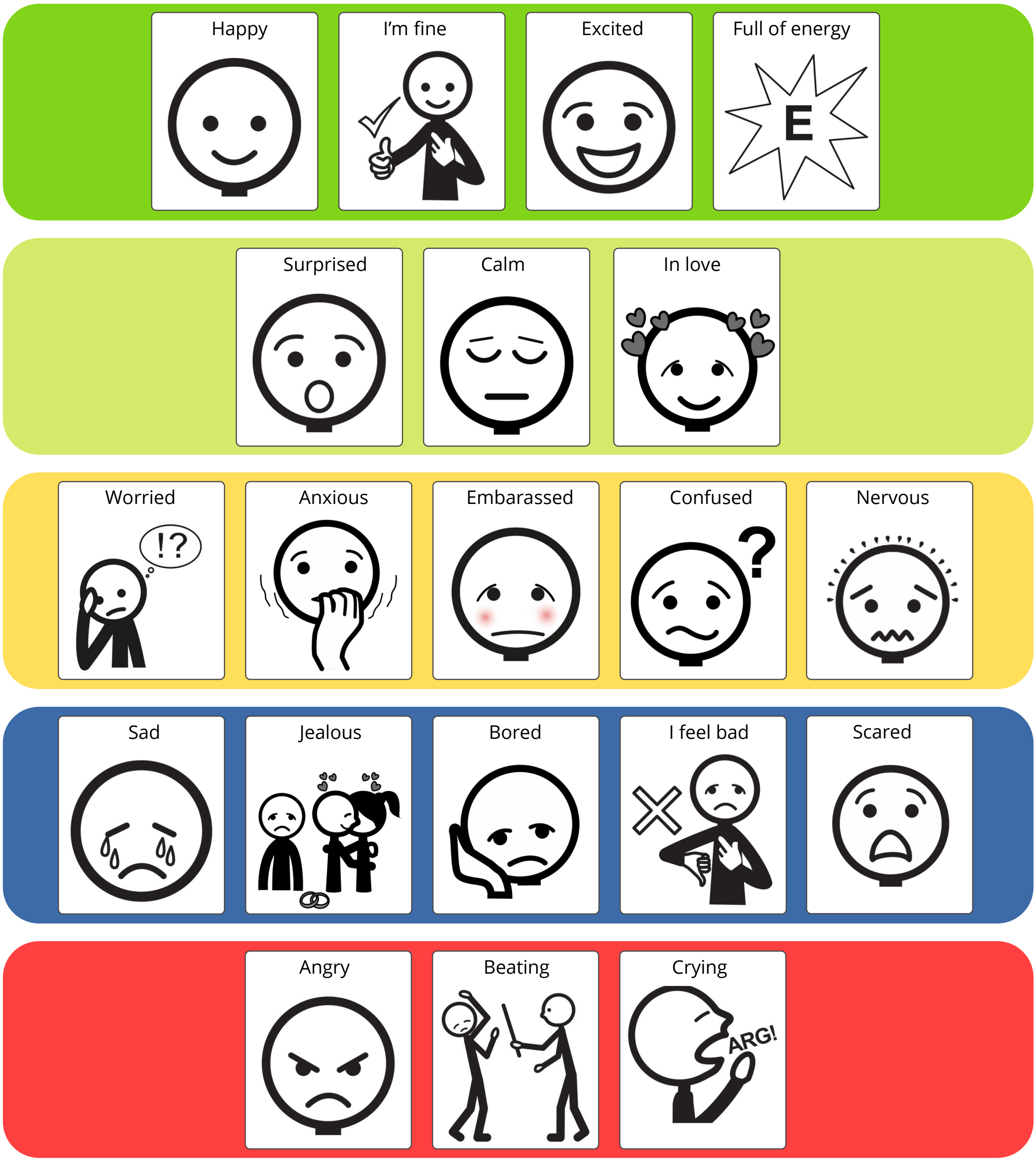
Emotion chart



Author of the pictograms: Sergio Palao. Source: ARASAAC (http://www.arasaac.org).

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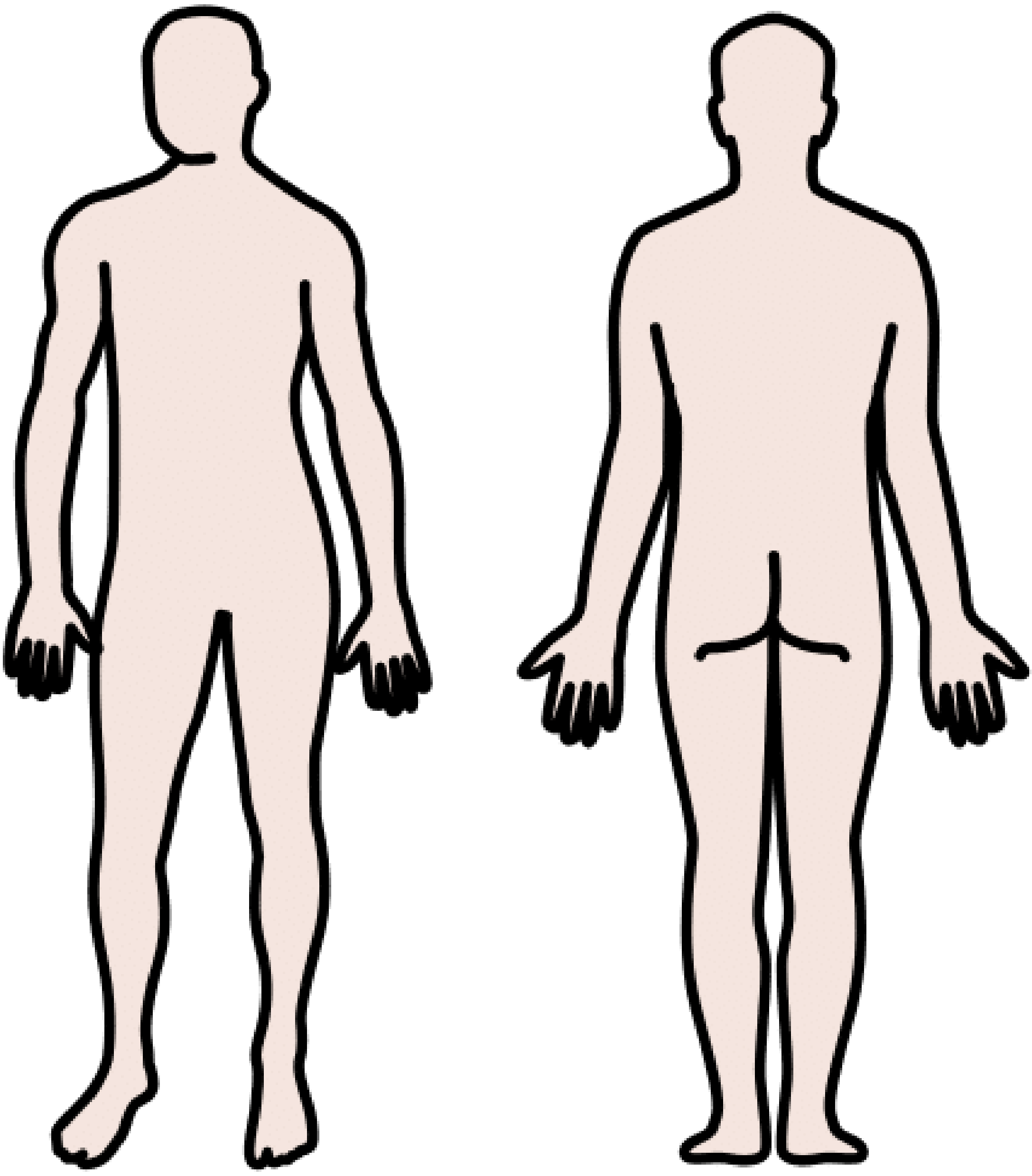
Body parts chart



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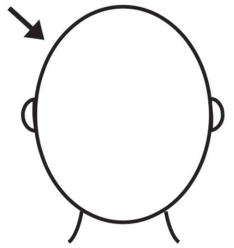
Body parts chart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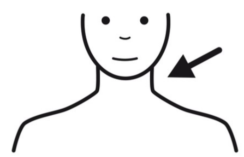
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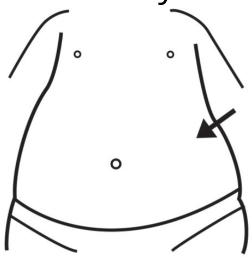
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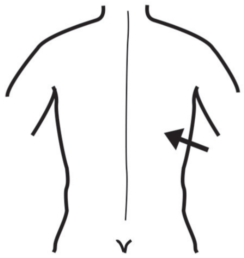
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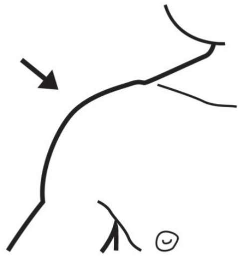
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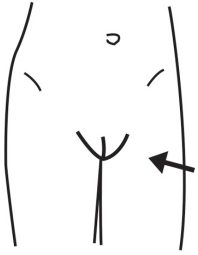
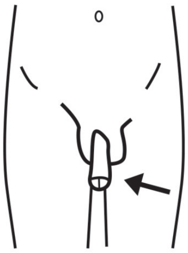
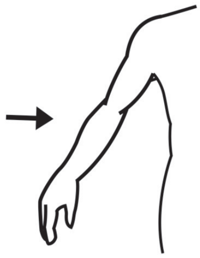
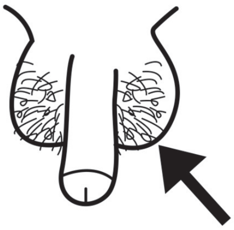
Armpit


Vagina


Penis


Arms


Hands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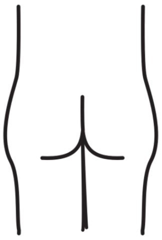
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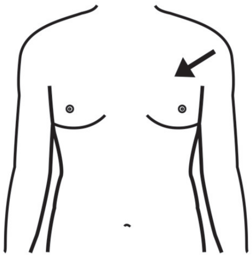
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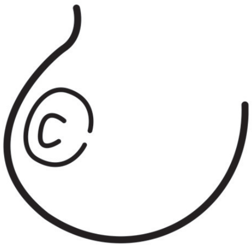
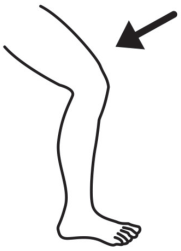

Breast


Legs


Feet

Author of the pictograms: Sergio Palao. Source: ARASAAC (http://www.arasaac.org).
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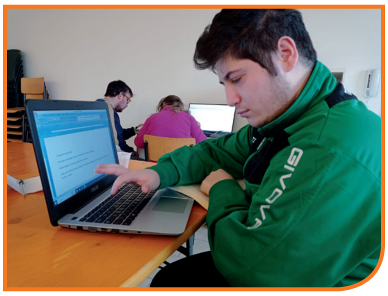
CORRECT USE OF TECHNOLOGY

Social Media



In less than a generation, social media (SM) has permeated every aspect of modern life and has become a key enabler for the exercise and enjoyment of basic human rights such as social inclusion and freedom of expression (UN, 2016). The United Nations Convention on the Rights of People with Disabilities adopted in 2006 set up a clear framework in international human rights law requiring governments to address in policy the need for accessible and usable digital technologies as core to the overall aims of securing the human rights and social inclusion of people with disabilities in global societies (Blanck, 2014). Past research has indicated that SM can amplify existing inequalities and that people with intellectual disabilities are often excluded from the digital world (Normand & Sallafranque-St-Louis, 2016; Seale & Chadwick, 2017). Over the past three decades, public policy research and practice initiatives in many countries have aimed to promote equal access and participation by all citizens. However, the impacts of outcomes of these efforts are often vague and are not evaluated utilizing empirical evidence. Therefore, it is important to expand our efforts to gain a clearer picture of people with intellectual disabilities and their use of SM to inform the design of policy practice and research on how to best support people with intellectual disability to access and harness the potential benefits of SM.[1]

The digital revolution has fundamentally transformed the way people communicate, access information, and participate in society. For people with disabilities, digital tools and social media platforms provide better and more equal opportunities for participation, independence, and self-advocacy. However, the usage of these tools requires careful consideration of accessibility, digital literacy, privacy, and the responsible use of technology.

SM is broadly defined as internet-based channels that allow users to interact and selectively self-present (either in real time or asynchronously), and to share ideas, experiences, thoughts and information with both broad and narrow audiences through virtual networks and communities (Carr & Hayes, 2015; Kaplan & Haenlein, 2010). SM incorporates various platforms including social networking sites (such as Facebook), microblogging (Twitter and Tumblr), media sharing tools (such as Instagram, YouTube and TikTok) and messaging applications that allow for interaction across groups of users, as well as between individuals (such as WhatsApp or Signal) (van Looy, 2022).

Recent statistics indicate that currently, more than half of the world population (58.4%) are using SM and that SM platforms more than quadrupled their total user base in a little over a decade, from 970 million in 2010 to 4.62 billion users in 2022

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1) https://onlinelibrary.wiley.com/doi/10.1111/bld.12534

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(GlobalWebIndex, 2022). The introduction of high-speed wireless internet, smartphone technology and mobile applications have been key drivers in the increasing use of SM sites. SM is very much at the heart of economic, social and public life. It has transformed how individuals, groups and communities communicate, consume, learn, entertain and access information and social services (Blanck, 2014). Furthermore, SM has the potential to enhance individuals' and marginalized groups' power to act and self-represent, creating new opportunities to promote equal social inclusion and social justice (Gelfgren et al., 2022).

The importance of SM has been recognized in international conventions and domestic laws, most notably in 2016, when the United Nations Human Rights Council released a non-binding resolution to article 19 of the "UN Universal Declaration of Human Rights" declaring access to the Internet a key enabler for the exercise and enjoyment of many human rights, in particular, the right to freedom of expression, education, information and social inclusion. This resolution has also reasserted 'the same rights people have offline must also be protected online' (UN, 2016).

Social media platforms are used by people with disabilities daily to amplify their voices, connect with friends and family, and self-advocate for their rights. Platforms like Facebook, Instagram, and TikTok offer opportunities for people with disabilities to form supportive networks. Hashtags like #DisabledAndProud and #InclusionMatters have fostered vibrant online communities that challenge stereotypes and celebrate diversity. Social media campaigns provide a platform to raise awareness about disability rights and inclusion. Initiatives like the #AccessibilityMatters campaign highlight the importance of accessible design in public spaces and digital environments. Advocacy groups leverage social media to influence policy and combat discrimination. For instance, the Disability Rights Advocacy Fund uses Twitter to mobilize support for global disability-inclusive policies.

Technology-facilitated violence against people with disabilities

Despite the benefits, the use of digital tools and social media for people with disabilities is not without challenges. These include:

- Digital divide issues,
- Cyberbullying and privacy concerns,
- Lack of access to affordable assistive technologies and internet connectivity.

The International Telecommunication Union (ITU) reports that people with disabilities are disproportionately excluded from the digital economy, particularly in low-income countries. Social media exposes individuals to potential risks, including cyberbullying. People with disabilities may face targeted harassment, undermining their mental health and willingness to engage online.[2] The collection and use

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[2] Livingstone & Haddon, 2020

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of personal data on digital platforms raise privacy concerns. Many people with disabilities rely on apps that collect sensitive information, such as health data, which must be protected under regulations like the General Data Protection Regulation (GDPR).

Technology-facilitated violence against people with disabilities is an act of violence perpetrated by one or more individuals that is planned, executed, or facilitated (partially or wholly) through the use of information and communication technology or digital media and digital social media platforms against an individual on the basis of gender.

Women with intellectual disabilities are far more exposed to technology-facilitated violence. When it comes to technology-facilitated gender-based violence, the following two aspects should be taken into consideration:

- It has a gender characteristic – it is directed towards women and girls simply because they are women and girls
- It is more prevalent than online violence – although it most commonly occurs on the internet and in the digital space, it can manifest through any technology – old and new – such as regular phones, GPS tracking devices, camera drones, and other recording devices that are not connected to the internet. Moreover, gender-based violence (GBV) aims to inflict additional harm related to control, violence, and discouragement of victims.[3]

Research shows that people with disabilities experience online harassment and violence at significantly higher rates than their non-disabled peers. For instance, a UNESCO study found that people with disabilities are up to three times more likely to face cyberbullying. Women and girls with disabilities are particularly vulnerable, often facing intersecting forms of abuse such as grooming, exploitation, and non-consensual sharing of images.[4] Despite the growing emphasis on inclusion, many digital platforms fail to meet accessibility standards. Features such as reporting tools, user interfaces, and safety guides often do not support assistive technologies like screen readers or voice navigation. As a result, users with sensory impairments may struggle to access safety features or report abuse effectively. The legal framework in many countries remains inadequate for addressing technology-facilitated

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[3] UNFPA, 2023

[4] UNESCO (2023). Online Harassment of Vulnerable Populations: A Global Perspective

violence targeting people with disabilities. Few jurisdictions[5] have specific provisions addressing this form of abuse, and the cross-border nature of digital crimes complicates enforcement. This legal gap leaves many victims without recourse. Digital literacy among people with disabilities varies widely. Limited access to training on safe internet use increases the risk of falling victim to scams, phishing, and other forms of online manipulation. This gap in knowledge leaves many individuals ill-equipped to navigate digital spaces safely.

Social media platforms, while offering opportunities for communication and inclusion, have unfortunately become spaces where individuals with disabilities are disproportionately subjected to sexual harassment.

This harassment manifests in various forms, often exploiting the unique vulnerabilities and marginalization faced by this group. People with disabilities may encounter:

- Unwanted sexual advances through unsolicited messages, images, or videos containing explicit content.
- Exploitative relationships where perpetrators manipulate their victims into sharing personal or explicit materials, preying on their isolation or lack of social support.
- Mockery and objectification, with individuals becoming targets of degrading comments, memes, or fetishization.
- Sharing private content involving people with disabilities without consent, violating their privacy and amplifying the harm caused.
- Online stalking and sexualized harassment contributes to an environment of fear and discomfort.

Reasons for technology-facilitated violence against people with disabilities and ways to address them

The reasons behind this targeted harassment are deeply rooted in societal attitudes and systemic barriers. People with disabilities are often perceived as vulnerable or less likely to report abuse, making them easy targets for perpetrators. Limited digital literacy among some individuals with disabilities can further hinder their ability to recognize and respond to online harassment effectively. Especially adults with disabilities are not protected in any way, since age limitations and laws for underaged users do not apply. Social isolation exacerbates the issue, as many rely heavily on online platforms for connection and interaction, increasing their exposure to potential abuse. The impact of such harassment is profound.

Victims often experience:

- Significant psychological harm, including anxiety, depression, and trauma, which can be compounded by existing challenges.
- Fear of further harassment that can lead to social withdrawal,

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[5] United Nations (2006). Convention on the Rights of People with Disabilities (CRPD)

- Lack of opportunities for education, advocacy, and community engagement and online harassment can escalate into real-life threats or violence, especially if personal information is exposed.

Addressing this issue requires collective efforts from multiple stakeholders. Social media platforms must take greater responsibility by implementing robust policies and monitoring mechanisms to identify and remove abusive content targeting people with disabilities, disregarding their age. For social media to truly serve as inclusive and equitable spaces, addressing the pervasive issue of harassment against people with disabilities is imperative. Only by fostering safe online environments can these platforms fulfill their potential as tools for empowerment and connection.

The conceptualization of online participation as a human rights and social justice issue prompted academic and policy attention, with efforts made to identify and address digital exclusion/inclusion necessary to understanding which sections of the population have continuing unequal access and capacity to participate (Schejter & Tirosh, 2015).

How to address safety within the social world

- Digital literacy programs are essential for empowering individuals with the skills and knowledge needed to navigate online spaces safely and report harassment.
- Advocacy and awareness campaigns play a crucial role in challenging societal attitudes and promote inclusivity
- Legal protections and enforcement are vital in holding perpetrators accountable and deterring future abuse.
- Identify barriers for digital inclusion
- Understand the patterns of use among marginalized groups and
- Explore the impact on their well-being health and social inclusion (Maceviciute & D. Wilson, 2018)

There is a consensus that people with disabilities, especially adults with intellectual disabilities, are members of one the most marginalized groups in society and this needs to be thoroughly examined in any research and policy discourse addressing digital inclusion and inequalities (Goggin, 2021).

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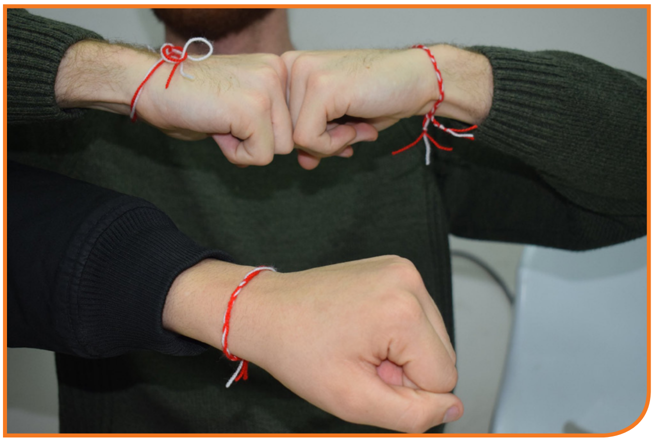
Overcoming barriers using digital tools



The barriers to the effective usage of social media by PWDs are the unregulated and un adapted platforms for accessibility for people with disabilities of the creators of the platforms. Many of the people with intellectual disabilities have the ability to use independently social media for various reasons. However, they are unprotected and many times cannot detect the layers of harassment they are experiencing in the online space.

People with disabilities can use digital tools to overcome physical, sensory or cognitive barriers:

1. Assistive Technology

Assistive technology, such as screen readers, voice recognition software, and alternative input devices, are pivotal for people with disabilities. For instance, visually impaired individuals can navigate the internet using screen readers like JAWS (Job Access With Speech) or NVDA (NonVisual Desktop Access). Similarly, speech-to-text tools empower individuals with mobility impairments to operate devices through voice commands.[6]

2. Inclusive Design

The principle of universal design ensures that digital platforms cater to diverse needs. Features like adjustable text sizes, captioning, and customizable interfaces enhance accessibility. Examples include Apple's VoiceOver and Google's TalkBack, which integrate accessibility into mainstream devices.[7]

3. Opportunities in Education and Employment

Digital tools enable people with disabilities to access online education platforms and remote work opportunities. Platforms like Coursera and LinkedIn Learning, equipped with accessibility features, provide equal learning opportunities. Employers leveraging accessible collaboration tools, such as Microsoft Teams or Slack, create inclusive work environments.

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6) Gronseth & Dalton, 2020

7) World Wide Web Consortium, 2023

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How can the parents/caregivers/educators support the people with intellectual disabilities stay safe in the social media world

Welcome to the digital world

The internet and social media are part of everyday life. We use them to chat with friends, watch funny videos, read the news, or learn new skills. For people with intellectual disabilities, digital technology can be a way to explore the world, express themselves and stay connected with friends and family. But while there are many benefits, there are also many risks. Some people online may try to take advantage or harass people with intellectual disabilities. There can be mean messages, confusing information, people pretending to be someone they're not. That's why digital safety is so important for the PIDs, their parents, caregivers, friends and family

As a parent or caregiver, you play a big role in helping the person you support use technology in a safe, positive and fun way. You don't need to be an expert - what matters most is being present, listening with care and guiding them step by step.

In the following parts there will be information about:

- How to create a safe digital environment
- How to teach safe and smart habits
- What to do when problems happen
- How to support healthy technology use

Part 1 - Creating a safe online environment

The first step in digital safety is building an environment where the person you support feels secure and confident. One great way to do this is by spending time online together. Sit with them while they're using a phone, tablet, or computer. Ask questions about what they're doing and show interest. This builds trust and keeps the door open for future conversations.

Most devices come with built-in safety features like parental controls to block harmful websites, screen time limits to manage how long apps are used or privacy settings to control who can contact them. You can explore these settings together and adjust them based on their needs. While choosing safe apps and websites, you should pick apps and sites that are easy to use and understand, free of too many ads, designed for learning, creativity or fun.

Let the person help choose the tools they want to use. This encourages independence, autonomy and interest. Use clear and simple language when you talk about technology in a way that is easy to follow. Use the same words each time and if possible, show visuals or simple drawings. This helps make learning fun and accessible.

Part 2 - Teaching safe and smart online habits

The main question is - What is a private Information? In order to reach the goal and teach PIDs not to share personal and private data, explain that it is not safe to share their:

- Full name
- Home address
- Phone number
- Passwords
- Personal photos
- The name of their school

You can create a colorful "What to Share / What Not to Share" chart using pictures to help them remember.

Meeting online friends

Help them understand that someone online may not be who they say they are. A safe online friend is someone they already know in real life. Practice what to say if a stranger messages them, like: "I don't talk to stranger's online."; "Let me ask my parent first."

Ask: "Would I show this to my parent or teacher?" If not, it's better not to share it. Once something is posted online, it can be difficult to remove—even if deleted. It is also useful to practice real-life scenarios and use role-play games to explore situations like receiving a strange message, seeing a scary video or getting an unwanted friend request

These activities help them feel more confident and ready to respond in real life.

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Part 3 - What to do when something goes wrong?

Even with good habits, problems can still happen online. That's why it's important to teach that If something feels wrong, it's okay to ask for help.

Signs something is wrong - they should tell you if they experience:

- A stranger asking for personal info or photos
- Mean or bullying messages
- A video or message that makes them feel upset
- Feeling unsure or confused about what they saw

Reassure them: You're not in trouble. I'm here to help you.

What you can do if something goes wrong?

You need to stay calm and listen. Do not overreact. Try and block the person or account, report the issue on the app or website or take a screenshot of the problem if needed. This way you can make a digital safety plan - create a small poster with pictures showing the following info:

- Who to talk to (you, teacher, caregiver)
- How to block someone
- A reminder: "I'm not alone"
- A phrase to use: "Let me ask my parent first"

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Part 4 - Encouraging healthy and positive technology use

Being safe online also means having a healthy relationship with technology.

1. Balance screen time - Create a simple daily schedule with time for online activities (videos, games, chats); offline fun (drawing, sports, nature walks), meals, rest, and sleep. Use a timer or a visual routine chart to make transitions easier.
2. Celebrate good choices - say things like "I'm proud of how you handled that message!" and Great job remembering to ask before sharing!" This positive feedback will help PIDs build self-esteem and good digital habits.
3. Keep talking and repeating, try to make it part of your daily check-in: "What did you enjoy online today?"; "Did anything funny or strange happen?"; "Want to show me your favorite video?" Small, everyday conversations keep communication open and build trust.

Be patient and present!

Learning digital safety takes time. Mistakes may happen—that's okay. What matters most is that you are there, guiding them with kindness and support.

CHECKLIST

DOs
Safe habits

- Ask a parent or caregiver before adding a new friend.
- Keep your profile private. (Use privacy settings)
- Only share photos or stories you'd show to a parent or teacher.
- Use kind words when commenting or chatting.
- Tell someone you trust if something online makes you upset or confused.
- Log out of your account when you're done.
- Think before you post. Ask: "Is it safe? Is it kind? Is it okay to share?"

DON'Ts
Unsafe habits

- Don't share your full name, address, phone number, or passwords.
- Don't talk to people you don't know in real life.
- Don't send photos of yourself to strangers.
- Don't click on links from people you don't know.
- Don't believe everything you read online. Some people lie.
- Don't meet up with someone you met online without telling a trusted adult.
- Don't keep secrets about something that happened online.

- "If I don't know them, I don't talk to them."
- "If I feel unsure, I will ask someone I trust."
- "If it feels wrong, I will tell someone right away."

ABOUT THE PARTNERS

ARCA COMUNITÀ IL CHICCO ETS

Via Ancona, 1 - Ciampino (RM) I | Tel. +39 06 7962104
www.larche-ilchicco.it | segreteria@larche-ilchicco.it
Facebook: larcheilchicco | Instagram: larcheilchicco

Il Chicco is a pioneering community with deep roots in compassion and inclusion, having opened its doors in Rome in 1981. As the first Italian member of the international federation L'Arche, Il Chicco has grown into a vibrant home for adults with intellectual and motor-intellectual disabilities, offering both residential care and a dynamic daily centre. The community is built on the values of dignity, autonomy, and shared life—where each person is seen, heard, and supported in a family-like atmosphere. With decades of experience, Il Chicco has become a trusted voice in promoting social inclusion and personal development for PIDs. Their recent work on navigating intimacy and managing eroticized dynamics in care settings reflects a bold and thoughtful commitment to addressing complex, often overlooked aspects of disability support.

L'ARCHE COMUNITÀ L'ARCOBALENO - IMPRESA SOCIALE

Via Badini, 4 - Granarolo Emilia (BO) - I | Tel. +39 051 767300
www.larchebologna.it | info.bologna@arca-it.org
Facebook: comunita.larcobaleno | Instagram: larche_arcobaleno

L'Arcobaleno is more than an organization—it's a living, breathing community where every person is embraced as unique and irreplaceable. Rooted in the belief that imperfection is a shared human trait, it fosters a culture of mutual growth, inclusion, and heartfelt connection. With over two decades of experience, L'Arcobaleno operates both residential and daily rehabilitation centers in Bologna, offering a nurturing environment for adults with intellectual disabilities to thrive socially, emotionally, and professionally. Their commitment to building meaningful relationships—including those of intimacy and affection—is central to their mission.

Center for Youth Activism KRIK

St. Naum Ohridski bb - Skopje - MK | Tel. +389 78370987
krik.org.mk | infokrikcenter@gmail.com
Facebook: cya.krik | Instagram: cya_krik

KRIK is a dynamic force for inclusion in North Macedonia, dedicated to creating meaningful opportunities for people with disabilities to grow, connect, and thrive. Through its multifunctional center Krikni and three independent living homes, KRIK provides tailored support that blends occupational therapy, education, and community engagement. Their pioneering work in sexual education for PIDs—delivered through structured, six-month programs—demonstrates a deep commitment to autonomy and well-being. KRIK also plays a vital role in the deinstitutionalization process in N. Macedonia, offering both practical services and professional training to caregivers and educators.