

PARENTS' AND TEACHERS' ATTITUDE TO FAMILY PLANNING OF ADOLESCENTS WITH MILD INTELLECTUAL DISABILITIES IN THE CONTEXT OF CONCEPTIONS OF GENDER AND SEXUALITY

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Abstract

There are quite many discussions in society on the issues of disabled people's socialisation and integration. However, formation of disabled pupils' gender identity, their gender, sexuality and family planning has not been sufficiently analysed. The article aims to find out how participants of the educational process (parents and teachers of adolescents with mild intellectual disabilities) treat conceptions of "gender" and "sexuality" and aspects of the dominating attitude to family planning and fertility of pupils with mild intellectual disabilities. It was found out in the research that a considerable share of parents/foster parents did not speak with their children about the future family, and many teachers expressed their negative attitude towards family planning of pupils with mild intellectual disabilities. However, there is also a different dominating opinion about family planning of these pupils in the context of sexuality and gender conceptions. Teachers note that these pupils must receive support in the formation of family relationships, while parents/foster parents seek to render aspects of a successful marriage.

***Key words:** disability, gender, sexuality, gender manifestation, family planning, fertility.*

Introduction

There is a considerable focus on the issues of integration of disabled in Lithuania; however, the problem aspect of gender has almost not been analysed. Šėporaitytė (2006) notes that the discourse on disabled in Lithuania is most often directed to fundamental issues related to disabled like social participation, occupation, education, medical and technical assistance. Such issues as sexuality, partnership, family, parenthood, which are important to disabled, have been much less analysed. It has to be noted that gender of a disabled pupil, like gender of a healthy pupil, should be perceived as a natural and very important life peculiarity, as part of the general human health because for a disabled person psychological and emotional aspects of gender are as relevant as for a healthy person.

The process of development of gender and the process of (self-)development of gender identity of pupils with mild intellectual disabilities encompass men's and women's roles, comprehension of cultural norms (social function), and formation of perception of oneself as a representative of a certain sex and of behaviour according to norms and roles accepted in the

society (psychological function). This process takes place in the process of pupils' socialisation, during which people take over culture norms, develop their potential and become full member of society (Martin & Ruble, 2004), whilst (self-)formation of gender identity is one of the preconditions of successful socialisation (Yvi, 2012).

Development of gender starts in the family already in the first year of life. The family is the initial institution which provides life experience, forms character traits and the conception of morality. The importance of family in gender development is also accentuated in *The Programme of Preparation for Family Life and Gender Development* (2007), which emphasises that teaching about mature gender can be successful if parents are treated as children's initial and main educators. Differences in the form and degree of gender development should depend on pupils' age and their level of abilities. Teachers should also remember to promote parents to maintain spiritual cooperation with learners; absence of such cooperation turns moral education into moralising. This cooperation is particularly important in such cases when attitude of parents who have children or adolescents with intellectual disabilities is influenced by anxiety about the child's welfare, lack of knowledge on gender development issues or denial of the child's gender.

Often the conceptions of gender and sexuality are used as synonyms although they are not identical. Giving the same meaning to different conceptions always causes serious comprehension problems (Obelėnienė, Pukelis & Vaitoška, 2007). It must be emphasised that the holistic **conception of gender consists of sex** (differentiated according to sex organs, morphological and genetic body composition); *gender* – gender identity (femininity and masculinity) and *sexuality* (which is significant for emergence of sexual arousal and desire, reacting to internal and external stimuli).

In the modern context of gender studies (West & Zimmerman, 1987; Martin & Ruble, 2004; Rogers, 2009, 2010; Rudman & Glick, 2010; Evans & Williams, 2013; Westman, 2010 et al.), women's and men's relationships are discussed using the term *gender*. This term is used to outline categories grounded on gender characteristics, for example in phrases *gender gap* and *the politics of gender* (Žvinklienė, 2004). According to Žvinklienė (2004), the confusion of meaning appears when one term *gender* is used without differentiation into *sex* and *gender*, this way making a mistake, stating that (biological) sex is constructed and the same term *gender* is used to denote this structure. The author does not criticise purposefulness of using the terms used in the article above (*sex, gender, sexuality*) and does not force to replace them with the term *gender* but offers to use categories and translate them from English more responsibly, paying more attention to their meaning.

According to another scientific interpretation of the investigated phenomenon, three non-identical but sex related concepts can be distinguished analysing the composition and action principles of the phenomenon of social gender. These are: *sex, sex category* and *gender* (West & Zimmerman, 1987; Žvinklienė, 2004).

Thus, performing this research, it was sought to find out attitude of parents/foster parents and teachers of adolescents with mild intellectual disabilities towards family planning through gender and sexuality conceptions.

Seeking to systematically organise gender education and cooperation in pupils' socialisation process, it is relevant to find out how the participants of educational processes (parents and teachers) treat the conceptions "gender" and "sexuality" and the essential attitude to family planning and fertility of the adolescent with mild intellectual disabilities.

Research subject: parents' and teachers' attitude to family planning of adolescent with mild intellectual disabilities in the context of gender and sexuality.

Research aim: to disclose parents' and teachers attitude to family planning of adolescent with mild intellectual disabilities in the context of gender and sexuality.

Research methods: qualitative research approach was chosen, consisting of theoretical research methods (content analysis); empirical data were obtained applying interview (written) method.

Parents' and teachers' interview helped to reveal how they treated concepts of *gender* and *sexuality*, their attitude to family planning and fertility of adolescent with mild intellectual disabilities. Research data were processed employing qualitative content analysis; i.e., categorisation of their meanings. Interview data were grouped in categories with subcategories ascribed to them.

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

Results and their Analysis

Interpretation of gender conception in the environment of adolescents with mild intellectual disabilities. Analysing parents'/foster parents' attitude to the conception of "gender", three categories were distinguished: *sex, gender, manifestation of sexuality* (see Table 1). Even thirteen informants speak about gender, emphasising **sex**; i.e., different sexes: "people representing two different sexes", "the difference between a boy and a girl", "understanding about one's sex".

The majority of parents/ foster parents speak about the concept of gender as about differences of social roles and behaviours, representing a different sex. This is construction of gender differences in the process of socialisation, education and habituation (the term *habituation* is related to Pierre Bourdieu's conception of *habitus*). According to Bourdieu (1990, 2001), men's and women's *habitus* are formed through symbolic and practical construction, upbringing and socialisation, forming feminine and masculine traits, behavioural approaches, values, expectations, etc. for girls and boys. Based on supporting/non-supporting attitude of the family and society during the habituation process, girls and boys, women and men acquire sexually defined *habitus* in the educational process, which is formed by social institutions. Later this manifests itself by choices in life, different practices. Thus, relating biological spring and influence made by social environment, the category **gender** is distinguished. Defining gender, the focus is on "gender identity, gender orientation", "human values, relations with people, the person's behaviour, what decisions he/she makes in sexual life", "not only to what sex the person belongs but also determining his/her actions, behaviour, etc.", "communication of persons of two different sexes" as well as influence of education on its formation: "gender is also reflected in toys bought since the very early years for everyone, clothes, conversations", "gender education".

Describing the concept of "gender", teachers, like parents/foster parents, noted the category of **sex** stating that "this was the concept of the woman and the man, exceptional traits of the boy-girl, man-woman", "the man's peculiarity, which was formed before the man was born and was identified upon birth of a person according to external sex organs although external gender did not always correspond to psychological", "physical and hormone processes taking place in our bodies", "approach (understanding) about physiology of different sexes", "knowledge about sexes, their differences, sexual life", etc.

Analysing teachers' subjective opinion about the conception of gender, the category **gender** is significantly more obvious than the category of sex. One of the teachers even particularly emphasised the importance and beauty of gender in the pupil's life: "*The totality of the composition of the organism, functions and behaviour, physical and spiritual beauty of sex. This is a gift that was given to every one of us so that we could better express our love to others. It encompasses a number of emotions, thoughts. Reflects the man's manliness, the woman's womanliness. This is a big asset of the person, etc.*".

Table 1. Interpretation of Parents'/Foster Parents' and Teachers' Conception of Gender in the Environment of Adolescents with Mild Intellectual Disabilities

	Parents/foster parents (N=34)		Teachers (N=66)	
Catego-ries	Illustrating statements	No. of state-ments	Illustrating statements	No. of state-ments
Sex	“different people”; “a girl – a boy”; “various physical and hormone processes taking place in our bodies”	13	“the man’s peculiarity which is formed even before the man is born and is identified upon birth according to external sex organs although external gender does not always correspond to psychological”; “the woman’s, man’s physical, mental sex peculiarities”; “attraction to the opposite sex”.	16
Gender	“this is the word indicating not only the sex but also determining the man’s actions, behaviour, etc.”; “gender is part of the man’s active main need to love and be loved. It encompasses a number of emotions, ideas and expressions (such as touch, hug, taking each other by hands)”; “gender is reflected in toys, bought to everyone since the early years and clothes, conversations”.	15	“this is people’s attitude to themselves as a man or a woman, attitude to the partner, behaviour in married life, relations with people of the opposite sex”; “this is sexual identity”; “this is conceptions “I am a girl, I am a boy”, formed since the early years”, “knowledge about a person’s hygiene, body composition, anatomy of sex organs, physiology, concepts of morality and virginity, love, respect, responsibility, family, sexual relations, diseases, etc.”	47
Mani-festation of sexua-lity	“this is a touch of certain places of others”; “gender is attraction of love without words”.	2		

Many teachers emphasise gender as *sexual identity* (“understanding oneself as a representative of sex”, “attitude to oneself as to a man or woman, maybe even sexual orientation”), *communication between sexes* (“the way to make a contact with another person and open up to him/her”, “sex relations between people of both sexes, a person’s behaviour and decisions made by people of both sexes”, “attitude to the partner, behaviour in married life, relationships with people of the opposite sex”), *value orientation* (“the person’s values, beliefs”, “perception of values”, “sex related values, attitudes, beliefs”, “moral attitude to sexual life”), *influence of education on gender formation* (“conceptions formed from early years “I am a girl, I am a boy”, “these are knowledge about a person’s hygiene, body composition, anatomy of sex organs, physiology, concepts of morality, virginity, love, respect, responsibility, family, sexual relations, diseases, etc.”); however, for some of them gender education is “one of the most complicated upbringing problems”.

Conducting the research, the category **manifestation of sexuality** was also distinguished: several parents/foster parents stated that “gender was attraction of love without words” and “this was a touch of certain places of others”, and one of the teachers emphasised that this was “attraction to the opposite sex”.

Interpretation of the Conception of Sexuality in the Environment of Adolescents with Mild Intellectual Disabilities

The research disclosed the informants’ subjective attitude to the conception of sexuality, its representations, which are often identified with gender.

Describing the concept “sexuality”, parents/foster parents pay much attention (see Table 2) *to the role of appearance and clothing in sexuality* (“sexuality means tidy appearance, clothing, manners, hairstyle”, “we start sexuality from clothing, appearance, these are the first steps to adolescence and talks about different sexes”, “maybe when one wants to emphasise womanliness (manliness)”, “the way the person looks”), *to the role of desire in sexuality* (“the wish to attract the opposite gender”, “the form of attracting love, liking”, “what arouses sexual attraction”, “the man’s wishes and feelings to “want” another person and feel that person”), *to manifestation of sexuality in sexual life* (“the degree to which that sex is needed”). However, some parents associate sex with destructiveness (“open demonstration of certain places”).

Table 2. Interpretation of Parents’/Foster Parents’ Conception of Sexuality in the Environment of Adolescents with Mild Intellectual Disabilities (N=34)

Categories	Illustrating statements	No. of statements
The role of appearance and clothing in sexuality	“sexuality means tidy appearance, clothing, manners, hairstyle”, “we start sexuality from clothing, appearance, these are the first steps to adolescence and talks about different sexes”, “maybe when one wants to emphasise womanliness (manliness)”, “this is the way the man looks”, “open demonstration of certain places”.	10
The role of desire in sexuality	“the wish to attract the opposite sex”, “the form of attracting love, liking”, “what arouses sexual attraction”, “the man’s wishes and feelings to “want” another person and feel that person”.	9
Manifestation of sexuality in sexual life	“the degree to which that sex is needed”, “a certain feeling related to sexual life of opposite sex persons”.	6

Speaking about sexuality, teachers mentioned (see Table 3) that sexuality could manifest itself in *appearance and clothing* (“emphasis of one’s (as a person’s belonging to a certain sex) certain body places in clothing”), *behaviour demonstrating sexuality* (“smiles, the wish to attract attention of persons of the opposite sex to oneself”, “manners, the ability to communicate with representatives of the opposite sex, tempt”, “behavioural manners (glances, smiles)”), *manifestation of sexuality in sexual life* (“feelings related to sex and sexual life”, “sexual attraction – moderate desire”, “attraction to the opposite sex, hormone storms, difficult to explain”, “difficult to explain, you have to feel, for example, shining eyes”).

Table 3. Manifestation of Sexuality of Adolescents with Mild Intellectual Disabilities: Teachers' Attitude (N=66)

Categories	Illustrating statements	No. of statements
Appearance and clothing	“emphasis of one’s (as a person’s belonging to a certain sex) certain body places in clothing”, “<...> shining eyes”, “appeal, attractiveness, temperamental nature”, “the ability to single out not by clothes but by general appearance, glance, posture, etc.”, “this is a feature that may be inborn (e.g., body shapes, glance, etc.) and acquired (clothing, manners, etc.) in order to attract opposite sex persons”.	22
Behaviour demonstrating sexuality	“<...> behaviour manners (glances, smiles); the wish to attract attention of the opposite sex to oneself”, “<...> behaviour with representatives of a certain sex, behaviour in public space”, “ these are feelings related to sex and sexual life, intimacy and behaviour among people, love, attraction”.	31
Manifestation of sexuality in sexual life	“sexual attraction – moderate desire”, “the man’s and woman’s sexual attraction, which can be aroused by the outer appearance of the man, a certain trait, spiritual qualities”, “to the degree to which that sex is necessary”, “a huge wish to experience the desired physical satisfaction”, “hormone activities”, “treatment of gender in the analytical physiological sense”	28

It was noticed during the research that parents and teachers who took part in education of adolescents with mild intellectual disorders paid considerable attention to the role of appearance and clothing in demonstration of sexuality and to manifestation of sexuality in sexual life. However, teachers more often observe manifestations of sexuality in behaviour, whilst parents/foster parents, in the role of the sexual desire in sexuality.

Family Planning and Fertility of Adolescents with Mild Intellectual Disabilities from Parents'/Foster Parents' and Teachers' Standpoint

Manifestation of gender of pupils with intellectual disabilities through relationships between sexes and family planning are among the aspects that are important for the disabled pupil's successful integration in the society. Richards, Watson, Monger, & Rogers (2012), Giedraitienė & Vaičekauskaitė (2002) note that these pupils' rights to sexual life are often breached. Family members' and social workers' attitudes become the key factor determining manifestation of the disabled pupil's gender in relationships (Rogers, 2009, 2010). It is important to note that countries ratifying The UN Convention on the Rights of Persons with Disabilities (2010) commit to take efficient and corresponding measures so that disabled people are not discriminated because of the disability entering into marriage, creating a family, committing to parenthood and can responsibly make decisions about the number of children and their birth periods, get information about reproduction and family planning and are given the means enabling them to use these rights. The disabled including children like other persons have the right to retain their fertility.

Analysing parents'/foster parents' expectations regarding family planning of pupils with intellectual disabilities, it was noticed that many parents *did not speak* with children *about the future family* but were inclined to talk to children about *mutual understanding in the family, love, respect/self-respect, responsibility, duty*, they *highlighted the man's role* and *emphasised*

Table 4. Parents’/Foster Parents’ Expectations regarding Family Planning of Pupils with Mild Intellectual Disabilities (N=34)

Categories	Illustrating statements	No. of statements
Do not speak about the future family	“we don’t speak about that”, “honestly, we still haven’t talked about that”	17
Mutual understanding in the family	“there should be mutual understanding in the family, people have to communicate a lot, have the same hobbies”, “tolerance, if mistakes are made, calm talks and explanations about relationships”, “so that there is concord and comprehension”, “mutual understanding”, “understanding <...>, care”, “you need to understand each other, be able to explain”, “<...> understanding, goodness”, “so that they don’t get angry on each other”, “it is most important to listen to each other, solve problems peacefully, say strict no to violence”, “however, children leave a care home without an appropriate example of a family model”, “mutual behaviour, what mistakes are made, why rows most often occur, how to avoid them”, “that it is necessary to get to know the friend and his family as close as possible”	13
Mutual support in the family	“to help to do housework, household chores”, “that there will be <...> common work, children’s upbringing”, “that family is not sex in bed but every kind of support for the wife”, “I say that you must help a lot doing works in the family”, “help to each other in various household chores”, “help, friendship <...>”	6
Love in the family	“that they will love each other, have kids, who will bring happiness and whom they will love”, “that it will be necessary to love and respect one’s wife”, “that there has to be love”, “love, fidelity”, “about the man’s and woman’s love to each other, communication, behaviour <...>”	5
Respect/self-respect in the family	“That there should be <...> respect, <...>”, “respect, trust in each other”, “that the woman first of all should respect herself”, “self-respect”	5
Responsibility in the family	“<...> responsibility”, “<...> and accountability”	5
Duty in the family	“the duty to the family, at work <...>”, “about their duties in the family, <...>”	3
Emphasis on the man’s role	<p><i>The man who does not have harmful habits</i> “so that he isn’t like his parents (vices)” “so that the future husband is decent, doesn’t have harmful habits, is mindful, helpful” “so that he doesn’t drink, fight” “so that he is good, doesn’t drink, doesn’t smoke, ” “so that he is honest, without harmful habits. <...>”</p>	5
	<p><i>The man as wage-earner</i> “about the man who has to earn money to maintain a family <...>”, “to get a good husband who would earn much money”, “<...> take care of the family (man)”</p>	3

career (see Table 4). However, several parents stress that the most effective preparation for family is *teaching by one's own example* ("it is best if the child sees how his/her mother and father behave", "<...> we don't speak. Children see parents' communication and this is enough"). It is obvious that parents/foster parents of pupils with mild intellectual disabilities have positive expectations to family planning of these pupils, pay particularly much attention to the importance of *mutual understanding in the family*; in their opinion, this is one of the key aspects of successful family planning.

Parents/foster parents also reflected expectations regarding *the man's role* in family life ("the man without harmful habits", "the man the wage-earner"). These statements highlighted a stereotypical attitude to the role of the man as the head of the family, which is still tenacious in the society, and this quite visibly demonstrated that often children with intellectual disorders come to educational institutions from social risk or asocial families. Analysing interview data, parents'/foster parents' phenomenal attitude (category *emphasis on career*) to family planning of the adolescent with mild intellectual disabilities was found out ("so that this man appears in life as late as possible because the most important thing is studies, good job, and family can wait"). This phenomenon reflects the attitude that parents find the adolescent's disability not important, he/she is treated as a person who is successfully seeking education and career and plans the family only having reached the status in the society.

Table 5. Teachers' Expectations regarding Family Planning of Pupils with Mild Intellectual Disabilities (N=66)

Categories	Illustrating statements	No. of statements
Negative attitude to family creation	"<...> negative attitude. Such pupils create families with pupils similar to them and have children with still bigger disabilities", "act sexually irresponsibly, don't plan pregnancy, don't think about consequences", "being immature personalities themselves, they won't bring up their children", "don't respect a partner, that is why don't use contraception, often conceive", "<...> I have already worked at school for 35 years. I bring up children of former pupils. It means these pupils create families, give birth to children who again have intellectual disabilities, sometimes even bigger", "there are more disabled newborns", "fertility of such pupils is undesirable, the nation degenerates", "don't plan the family, accidental sexual relations, often give birth for benefits", "practice is that the bigger the intellectual disability, the more children in the family", "it would be better if these disabled people were sterilised", "<...> in my opinion children's number in the family should be limited"	19
The need of education	"they must be familiarised with contraception but this must be done in a subtle way, individually", "to control, give knowledge on these issues, help to solve arising problems", "I think they need big support when they have offsprings", "it depends on the severity of the disability", "it is necessary to familiarise with contraception", "could be moderately controlled", "risk factors must be considered", "it would be best of course if one of the parents were healthy"	7
Declaring the right to the family	"have the right to all human relationships", "let give birth", "I think that girls or boys can create families and give birth to children", "this is every person's right", "every person's right and choice"	6
Successful cases planning a family	"practice shows that a share of pupils successfully created families, raise children"	3

A slightly different attitude to fertility of pupils with mild intellectual disabilities was reflected in teachers' answers (see Table 5). Many of them expressed a *negative attitude to family creation*. However, there are teachers who are not so categorical and maintain that pupils *need support planning a family*. Other teachers declared that persons with intellectual disabilities *had the right to the family* ("the disabled have the right to all human relationships", "they have the right to fertility", that is why "they have to be allowed to give birth"), several of them even shared their ideas that "practice showed that a share of pupils had successfully created families, raised children".

It has to be noticed that *not so positive expectations to disabled persons' family planning* dominate in educational institutions; i.e., conducting the research, teachers' *negative attitude to family planning* visibly singled out. However, perceiving that *the disabled have the right to the family*, child birth, informants indicated *the need of education creating a family* and also when it is created.

Conducting a research, burning issues related to family planning of pupils with intellectual disabilities, which are gingerly analysed in today's society, were noticed. A considerable share of parents/foster parents even do not dare to speak with children about the future family and many teachers express their negative attitude to family planning of pupils with mild intellectual disabilities. This can be influenced by a clinical attitude to education of these children, which was dominating for a long time, emphasising the type of disability and methods of its elimination but not seeking to integrate a disabled pupil in social environment, society. However, it must be noted that there is also another dominating opinion of the informants about family planning of these pupils in the context of sexuality and gender. Teachers note that these pupils must receive support creating mutual family relationships while parents/foster parents seek to convey aspects of a successful marriage.

Conclusions

1. Analysing the conception of "gender" given by participants of the educational process (parents and teachers of adolescents with mild intellectual disabilities), three categories were distinguished: *sex*, *gender*, and *manifestation of sexuality*. Teachers more often describe gender as a social category rather than biological, whilst parents/foster parents speak about gender both as a biological and social phenomenon.

2. Describing the conception of "sexuality", parents/foster parents emphasised *the role of appearance and clothing in sexuality, the role of desire in sexuality, and manifestation of sexuality in sexual life*. Teachers associate "sexuality" with *appearance and clothing, behaviour demonstrating sexuality, manifestation of sexuality in sexual life*. Thus, parents and teachers who take part in education of adolescents with mild intellectual disabilities pay considerable attention in demonstration of sexuality to the role of appearance, clothing and manifestation of sexuality in sexual life. However, teachers more often observe manifestations of sexuality in behaviour, whilst parents/foster parents, in the role of desire which manifests itself in sexuality.

3. Analysing parents'/foster parents' and pedagogues' approaches to family planning and fertility of adolescents with mild intellectual disabilities, it was noticed that many parents *did not speak about the future family* with children, the remaining share talked with children about: *mutual understanding in the family, mutual help in the family, love, respect/self-respect, responsibility, duty, the man's model in the family, the importance of career*. Several accentuate that the most effective preparation for family is *teaching by one's own example*. Teachers' answers disclosed a slightly different attitude to fertility of adolescents

with mild intellectual disabilities. Many expressed their *negative attitude to creating a family*, others stated that there was an obvious *need of education*, declared these pupils' *right to the family*, while several pedagogues expressed their positive attitude to family planning, fertility of adolescents with mild intellectual disabilities, supplementing it with *successful cases planning a family*.

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Summary

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The process of (self-)development of gender identity encompasses formation of men's and women's roles, comprehension of cultural norms (social function), and formation of perception of oneself as a representative of a certain sex and of behaviour according to norms and roles accepted in the society (psychological function). This process is called socialisation, during which the person takes over culture norms, develops his/her potential and becomes a full-rate member of the society (Martin & Ruble, 2004). According to Yvi (2012), the basis of socialisation is communication. Socialisation encompasses all life cycle, whilst gender identity is one of its aspects.

Gender development starts in the family already in the first year of life. The family is the only institution, which gives the first life experience, forms character traits and the conception of morality. Yvi (2012) accentuates that family is the most important factor without which the society would not be able to socialise a person in a full-rate manner. Therefore, seeking to successfully organise gender development and cooperation in pupils' socialisation process, it is relevant to find out how participants of the educational process (parents and teachers) treat the conceptions of "gender" and "sexuality" and the essential attitude to family planning and fertility of adolescents with mild intellectual disabilities.

Conducting this research, it was aimed to find out the attitude to family planning of the adolescent with mild intellectual disability in the context of concepts of gender and sexuality.

Describing the concept of "gender", parents/foster parents and teachers distinguished three categories: *sex*, *gender*, and *manifestation of sexuality*. However, teachers more often describe gender in a social rather than in a biological sense, whilst parents/foster parents split into two similar parts, and several of them identify sexuality with gender. As to sexuality, parents/foster parents focus on *appearance and clothing*, *desire*, *sexual life*, *reproduction function*. However, certain parents associate sexuality with destructiveness. In teachers' opinion sexuality is expressed by *clothing*, *behaviour*, *desire*, *sexual life*.

Conducting the research, parents/foster parents' and teachers' attitudes to family planning and fertility of adolescents with mild intellectual disabilities were distinguished. It was noticed that a considerable number of parents *did not speak* with children *about the future family* but others talk with children about: *mutual understanding in the family*, *mutual help in the family*, *love*, *respect/self-respect*, *responsibility*, *duty*, *the man's model in the family*, *the importance of career*. However, some parents emphasise that the most effective way of preparing for family is *teaching by one's own example*.

Analysing parents'/foster parents' interview data, phenomenal attitude (category *emphasis on career*) to family planning of the adolescent with mild intellectual disability was also found out ("so that this man appears in life as late as possible because the most important thing is studies, good job, and family can wait"). This phenomenon reflects the attitude that parents find the adolescent's disability not important, he/she is treated as a person who is successfully seeking education and career and plans the family only having reached the status in the society.

A slightly different attitude to fertility of pupils with mild intellectual disabilities was reflected in teachers' answers. Many of them expressed *a negative attitude to fertility*, others stated that there was *a need of support planning the family*. Several teachers noted that "the disabled had the right to all human relationships", "they had the right to fertility", that is why "they have to be allowed to give birth"; several of them even shared their ideas that "practice showed that a share of pupils had successfully created families, raised children".