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Peer counselling as a means to challenge ableism in sexuality education for and by people with learning difficulties?

Perspectives of non-disabled counsellors from Germany

Abstract (English)

Even ten years after the ratification of the UN Convention on the Rights of Persons with Disabilities, people with learning difficulties in Germany do neither have comprehensive access to high-quality sexuality education and counselling nor are they actively involved in its development and delivery. Applying a dis/ableist analytical framework this research project investigated peer counselling as an approach to facilitate high-quality comprehensive sexuality education for people with learning difficulties. Semi-structured interviews employing a creative method with six non-disabled counsellors in sexuality education for people with learning difficulties were conducted. The results of the abductive thematic analysis by means of the data software *Nvivo* indicate that peer counselling entails the potential to challenge ableist assumptions and practices in sexuality education. At the same time, employing peer counselling as a presumably inclusive practice without changing prevalent structural conditions in sexuality education renders its emancipatory potential meaningless.

Abstract (Deutsch)

Auch zehn Jahre nach der Ratifizierung der UN-Behindertenrechtskonvention haben Menschen mit Lernschwierigkeiten in Deutschland weder einen umfassenden Zugang zu qualitativ hochwertiger sexueller Bildung und Beratung noch sind sie aktiv an deren Entwicklung und Durchführung beteiligt. Unter Anwendung eines dis/ableist Analyserahmens untersuchte dieses Forschungsprojekt Peer Beratung als einen Ansatz zur Gewährleistung qualitativ hochwertiger und umfassender sexueller Bildung für Menschen mit Lernschwierigkeiten. Es wurden halbstrukturierte Interviews mit sechs nicht behinderten Beratern*innen in der sexuellen Bildung für Menschen mit Lernschwierigkeiten durchgeführt, wobei eine kreative Methode angewandt wurde. Die Ergebnisse der abduktiven thematischen Inhaltsanalyse mit Hilfe der Datensoftware *Nvivo* zeigen, dass Peer Beratung das Potenzial besitzt, ableistische Annahmen und Praktiken in der sexuellen Bildung in Frage zu stellen. Gleichzeitig verliert Peer Beratung das emanzipatorische Potenzial, wenn dies als vermeintlich inklusive Praxis eingesetzt wird, ohne die vorherrschenden strukturellen Bedingungen in der sexuellen Bildung zu verändern.

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1. Introduction

Peer counselling and peer support as forms of mutual support for and by disabled people emerged during the Independent Living Movement in Germany in the 1980s (Wesselmann, 2022).

“Common to all approaches is that in each case people with the same or at least very similar living conditions and experiences engage in a mutual support and counselling process in order to find solutions for challenging life situations.” (Wienstroer, 1999, p. 165 cited in Roemer, 2020, p. 246)

Whereas peer support is understood as a vast support concept, peer counselling is characterised through a clearly structured method entailing a qualification concept (Hermes, 2006 cited in Roemer, 2020). However, both approaches were not acknowledged in the field of social work in Germany (Wesselmann, 2022). Moreover, most notably physically impaired people engaged in the Independent Living Movement (Roemer, 2020).

In the English-speaking literature on sexuality education and people with learning difficulties a variety of peer and mutual support concepts is discussed (Frawley and O’Shea, 2020; Tallentire et al., 2020; Keyes and Brandon, 2012). This research refers to “people with learning difficulties” since the German self-advocacy group *People first* prefers this over the term “people with intellectual disabilities” (Mensch zuerst - Netzwerk People First Deutschland e.V., 2022). The term sexuality education expresses addressing an extensive list of sexuality related topics allowing the development of skills, competences, and knowledge (Gougeon, 2009).

In Germany, the value of peer approaches for sexuality education for and by people with learning difficulties is noticed but rarely implemented (Specht, 2017). Similarly, according to Specht (2017) sexuality education for people with learning difficulties is theoretically recognized as important, but the implementation into the praxis remains segregated. One of the few examples is the pilot project *ReWiKs* which developed educational materials for people with learning difficulties and staff to further improve the sexual self-determination of people with learning difficulties living in institutions (Jennessen et al., 2020). Moreover, it aims to include peer counselling within the second funding period from 2019 to 2022 (BZgA, 2022).

Nonetheless, peer counselling for people with learning difficulties has seldom been scientifically evaluated (Stahl et al., 2018; Roemer, 2020). Additionally, the representative study on the living conditions of disabled women in Germany reaffirms the conservative attitudes towards the sexuality and restrictive living conditions of people with learning difficulties in institutions (Schrötle et al., 2012). In their most recent inquiry into violence

protection structures for disabled people Schröttle et al. (2012) assess the general conditions in institutions for disabled people as “seemingly change-resistant” (p. 90).

Hence, a gap occurs between the general appreciation of peer counselling and its actual implementation into the practice of sexuality education. That is why this research project investigates its implementation into the practice by capturing the experiences of non-disabled counsellors involved in sexuality education for and by people with learning difficulties. The project is positioned within the German-speaking background of disability studies. The prevalent human rights perspective is broadened to a dis/ableist analytical framework which is used to examine peer counselling, its legal background, and implementation into the practice. Against this, the developed set of conditions for peer counselling in sexuality education for and by people with learning difficulties suggest that its successful implementation must not happen to conceal unchanged ableist practices in sexuality education. Thereby, the research project’s focus on non-disabled counsellors allows to critically discuss the future implementation of peer counselling in sexuality education for and by people with learning difficulties. In the future, this should be broadened by including people with learning difficulties own voices.

2. Peer Counselling in Germany

Peer counselling is one way to contest ableist assumptions about people with learning difficulties` incapacity to be actively involved into the development and delivery of sexuality education (Gill, 2015).

2.1 Disability Studies in Germany

Disability studies as an academic discipline was only established in Germany in 2001/2002 (Köbsell, 2022) and has only been peripheral in comparison to special education (Brehme et al., 2020). It is still taught within the discipline of special education and not as a discrete discipline (Köbsell, 2022).

2.1.1 Special Education and Sexuality Education

Special education as the traditional academic field holds on to a within-system thinking resulting in a limited way of dealing with disability (Pfahl and Powell, 2014). The segregated approach to education according to impairment types supports an individual model of disability and thus a proliferation of the categories of the “normal” and the “disabled” (Pfahl and Schönwiese, 2022). Hence, disability is not acknowledged as a prevalent power relationship between social groups (Köbsell, 2022). Despite critical discussions of the segregated education system, this exclusionary approach to disability is retained (Pfahl and Powell, 2014; Pfahl and Schönwiese, 2022).

Most disabled children and youth attend segregated schools and are, therefore, highly disadvantaged in their education (Pfahl and Schönwiese, 2022). 8% of disabled students obtain no graduation certificates at all in comparison to 4.1% of their non-disabled peers (Maetzel et al., 2021a). 71% of students who attend segregated schools do not attain a graduation certificate (Maetzel et al., 2021a). More than half of those (58%) are students with learning difficulties. Conversely, 15% of people with learning difficulties are unemployed in comparison to 2% of non-disabled people (Maetzel et al., 2021a). The discourse of special educational needs is ableist and obstructs the inclusion of disabled people (Slee, 2011).

Likewise, the debate on sexuality and people with learning difficulties rather focuses on segregated institutions (Jennessen et al., 2020; Ortland, 2020). In contrast, with the ratification of the *United Nations Convention on the Rights of People with Disabilities (UN-CRPD)* disability studies introduced a human-rights perspective in German educational sciences as the further development of the social model of disability (Wesselmann, 2022). The special education paradigm of a “protective and sanctuary space” for disabled people is questioned (Pfahl und Schönwiese, 2022). Conversely, civil rights issues concerning social and educational benefits and participation are at the forefront (Pfahl und Schönwiese, 2022).

A human-rights-based approach in combination with a focus on sexual self-determination of people with learning difficulties is adopted in recent work in special education (Clausen and Herrath, 2013; Arlabosse et al., 2018). Arlabosse et al. (2018) stress the importance of the recognition and implementation of people with learning difficulties’ sexual and reproductive rights as important prerequisites for the realisation of sexual self-determination. At the same time, they notice that the UN-CRPD does not include an explicit, affirmative right to sexuality for disabled people (Arlabosse et al., 2018). Frawley and O’Shea (2020) claim that art. 23 of the UN-CRPD frames sexuality as biological, health related, and reduced to reproduction and the formation of a family. Thereby a hierarchical valuation of sex acts typical for modern Western societies is supported, namely a heteronormative understanding of sexuality as marital, reproductive, and heterosexual (Rubin, 1992). The silence on sexuality in broader terms expresses a form of managing disabled people’s sexuality by non-recognition (Shildrick, 2007; Frawley and O’Shea, 2020). Consequently, such a limited understanding of sexuality reinforces prejudices of incompetence, incapacity, impotence, and asexuality of disabled people (Frawley and O’Shea, 2020). Furthermore, the right to sexuality is often misread as a “right to sex”, the right to have sexual intercourse and a sexual partner especially if facilitation is needed (Kulick and Rydström, 2015). Therefore, Kulick and Rydström (2015) argue that instead of a perspective focusing on rights, rather a focus on sexual facilitation is needed. Without an

appropriate facilitation of sexual needs, sexual rights alone endure meaningless instruments (Kulick and Rydström, 2015). Thus, a reluctance to value the sexual needs of disabled people as basic human needs persists (Shildrick, 2007; Bahner, 2016), even though the depoliticization of disabled people's needs has long been criticized within disability studies itself (Shakespeare et al., 1996).

2.1.2 Ableism in Sexuality Education

That is why this project expands the human-rights perspective on sexuality and people with learning difficulties to the perspective of dis/ableism. Disableism, like special education, intends to shift negative attitudes towards disabled people, to assimilate them into the normative society and to provide compensatory initiatives and safety nets (Campbell, 2008). In contrast, an ableist perspective reverses this traditional approach towards the production, operation, and maintenance of ableism (Campbell, 2008). Against the background of people with learning difficulties and sexuality education, cognitive and sexual ableism interplay with each other. Cognitive ableism names

“a prejudice or attitude of bias in favor of the interest of individuals who possess certain cognitive abilities/ or the potential for them against those who are believed to actually or potentially possess them” (Carlson, 2001, p. 140).

This involves the essentialism of cognitive disability and the failure to address the nature of cognitive privilege (Carlson, 2001). Similarly sexual ableism marks

“the system of imbuing sexuality with determinations of qualification to be sexual based on criteria of ability, intellect, morality, physicality, appearance, age, race, social acceptability, and gender conformity” (Gill, 2015, p.3).

The emphasis is on how ideas of competence, appropriateness, and able-bodiedness/mindedness dominate the discourses of sexuality and reproduction (Gill, 2015). The disabled body is assumed to lack the bodily and mental capacities to perform heteronormative reproductive sexuality in expected ways (Liddiard, 2018).

Sexual ableism is not only reinforced by the explicit denial of sexuality education to people with learning difficulties (Liddiard, 2018) but also by its implicit neoliberal-able implications (Bay-Cheng, 2016). The self-sufficient, self-regulating, and autonomous able-bodied/minded learner is at the centre stage in neo-liberal able education focusing on individual choice and responsibility (Bay-Cheng, 2016; Goodley, 2017). This decontextualization conceals inequality, injustice, and insufficiency (Bay-Cheng, 2016) experienced by disabled people in sexuality education such as lack of access to information and education, to health care facilities,

and to sexual services (Liddiard, 2018; Schaafsma et al., 2017).

Likewise, exclusion is proliferated not only by segregating disabled students into special schools but also by exclusionary practices within the so-called inclusive education system (Slee, 2013). This happens through the assessment of so-called special educational needs (SEN) and the resulting creation of so-called special/inclusive classes and training of special education teachers in inclusion (Slee, 2013). The SEN framework rather addresses the perceived needs and the mitigation of “learning difficulties” than the full participation of every learner (Crowther, 2011). Additionally, adopting “inclusive vocabulary”, investing resources in corresponding policy texts, in the development and renewal of human infrastructures, and modifying curriculum programmes equally maintain exclusion (Slee, 2013). For example, the evidence-based and rights-based *International Technical Guidance on Sexuality Education* (United Nations Educational Scientific and Cultural Organization (UNESCO), 2018) uses a standardised, manualised, and modular curriculum serving the construction of the neoliberal-able student. Such educational policies developed from an adult perspective only allow knowledge building of a certain type at a prescribed specific age and pace (Naezer et al., 2017). Furthermore, the guideline employs the “liberal gesture” (Erevelles, 2005, p. 435) of using “inclusive vocabulary” by mentioning disability. Instead of changing curricula, teacher training, and school cultures several measures are now labelled inclusive (Corbett and Slee, 2000). This mirrors the “normalizing practices of the curriculum” (Erevelles, 2005) masking exclusionary practices formerly referred to as integration (Corbett and Slee, 2000). Sothern (2007) critiques this “inclusion of difference” as “mechanisms for the depoliticization and domestication (dequeering) of the disruptive potential of disabled sex, thus rendering it governable within the context of (neo)liberalism.” (p. 152). As a result, this anything-goes strategy prevents inclusion’s powerful and practical use as a means for social change (Crowther, 2011).

2.2 Peer Counselling

Peer counselling is not a solely counselling method since it combines professionalism with the own personal experience of the peer counsellors (Jordan and Wansing, 2016). It’s emancipatory approach aims to enable the counsellee to achieve greater self-determination in life through exchanging experiences and specific counselling (Roemer, 2020). The approach is characterised by (Interessenvertretung Selbstbestimmt Leben in Deutschland, 2010; Roemer, 2020):

- ✓ *Orientation towards resources available to the counsellee.*

- ✓ *Holistic nature* by considering all personal experiences relevant to the identity of the counsellee.
- ✓ *Experts in their own interest*: The peer counsellor and the counsellee share experiences to a certain extent. This enables familiarity and a comprehensive understanding of the counsellee's situation. Furthermore, the counsellee is regarded as the expert of their own life and therefore empowered to discover self-determined coping mechanisms.
- ✓ *Empowerment*: Peer counselling aims to support the self-determination of the counsellee.
- ✓ *Advocacy* of the interests of the counsellee.
- ✓ *Independence* of other stakeholders like service providers in the welfare system free from personal, social, institutional, economic, and political interests of third parties.

Thus, peer counselling enables low threshold, eye-level, mutual understanding and respect (Stahl et al., 2018).

Peer counselling for people with learning difficulties is often implemented as a form of supported counselling (Roemer, 2020). Mensch zuerst - Netzwerk People First Deutschland e.V. (2018) emphasises that the person with learning difficulties must oversee the counselling. The term *supported counselling* is preferred over the terms *assisted* and *tandem counselling* (Mensch zuerst – Netzwerk People First Deutschland e.V., 2018). In tandem counselling the peer counsellor and non-disabled counsellor work as a team preferably on an equal footing.

Stahl et al. (2018) stress that people with learning difficulties are capable of both being counselled and offering counselling. Accordingly, people with learning difficulties need the following to successfully counsel other people with learning difficulties: a demand-oriented qualification, especially the use of easy language, learning and training in counselling methods, engagement with the own disability, learning and training of an adequate attitude, availability of assistance, exchange with other counsellors, experiences and training in counselling conversations, and general appreciation (Stahl et al., 2018).

2.3 Legal Regulations on Peer Counselling

In Germany, peer counselling for and by disabled people in general attracts increasing attention since the ratification of the UN-CRPD (2009). Art. 26 emphasises support by other disabled people as effective and meaningful in supporting participation and self-determination of disabled people.

As a result, Germany introduced the Federal Participation Act (*Bundesteilhabegesetz (BTHG)*) in 2017. The BTHG aims to increase the participation and self-determination of disabled people in Germany. Parallel to the social model of disability the differentiation between impairment

and disability was introduced (Wesselmann, 2022). Yet, Wesselmann (2022) critiques that an ableist understanding of the normative functioning body is still applied. Impairment is classified as deviation from the normal age-typical condition of the body which renders disability as abnormal (Wesselmann, 2022). In contrast, in disability studies the body is among others discussed as inevitably “temporarily able” because anyone can become disabled at the latest at old age (Kafer, 2013).

The Supplementary Independent Participation Counselling (*Ergänzende Unabhängige Teilhabeberatung (EUTB)* § 32 SGB IX) as part of the new BTHG offers (peer) counselling on rehabilitation and social participation independent of any institutions or welfare organisations. The EUTBs shall contribute to the strengthening of disabled people’s participation, and self-determination in society. Results of the first evaluation signal a positive impact of the peer counselling approach (Maetzel et al., 2021). But within the EUTB only a few people with learning difficulties are involved as peer counsellors (Maetzel et al., 2021). Neither a learning curriculum for their qualification as peer counsellors exists nor are they involved as trainers (Maetzel et al., 2021b). Yet, the pilot project *Peer-Counselling im Rheinland* indicates that peer counselling for people with learning difficulties is in demand and effective (Wansing, 2016). Moreover, the future perspective of the EUTBs is still unclear since the first funding period was restricted to the years 2018-2022 (Roemer, 2020).

Following the new BTHG and the peer counselling approach, women’s representatives in segregated shelters are installed (Schröttle et al., 2021). In general, staff in segregated shelters positively assessed the concept and its aim (Schröttle et al., 2021). Yet, women’s representatives themselves problematised a lack of material and structural resources within the segregated shelters as well as the dependency on facility managers (Schröttle et al., 2021). Furthermore, representatives for men and LGBTQIA+ people are not yet included.

2.4 Best practices

Whereas on a theoretical level, little is written on people with learning difficulties as peer counsellors a variety of concepts for peer counselling for and by disabled people exists on a practical level (Stahl et al., 2018; Roemer, 2020). Programmes, however, rather focus on people with physical impairments and chronical illnesses (e.g., the qualification offered by the Education and Research Institute for the Self-determined Life of Disabled People (bifos e.V.)). People with learning difficulties are underrepresented and not considered as peer counsellors on the primary labour market (Stahl et al., 2018). Nonetheless, the following best practice examples could be identified.

The project *Peer Counselling im Rheinland* (2014-2018) scientifically evaluated different peer

counselling services which, overall, involved 12 counselling desks and 63 peer counsellors. People with learning difficulties worked at three out of twelve helpdesks. The project highlights the acceptance and positive outcomes of peer counselling's specific qualities (Schreiner, 2018). Thus, "peer counselling should be comprehensively and sustainably established as an integral part of a differentiated support system." (Wansing, 2016, p. 7). The project identified especially the areas of work and living situation as counselling topics (Wansing, 2016). Stahl et al. (2018) did so too but found that in comparison to usual telephone counselling services the topics of relationships, and sexuality were equally important.

The German welfare organisation *Lebenshilfe Berlin e.V.* which is specialized on people with learning difficulties facilitated peer counselling on the topics of living with personal assistance, participation in society, and substance misuses between 2015 and 2018 (Lebenshilfe Berlin e.V., 2018).

Initially, *So-und-so* was developed and scientifically evaluated as a counselling concept for people with learning difficulties by Stahl in 2012. It was then further developed to a concept to qualify non-disabled and disabled counsellors together in tandem teams (Stahl et al., 2018). Stahl et al., (2018) surveyed eleven experts with and 18 without learning difficulties on their experiences with and attitude towards peer counselling. They identified an overarching interest and ability in peer counselling, which lead them to the following assumption "The question is rather to identify a suitable qualification method for people with learning difficulties and to qualify them as counsellors." (Stahl et al., 2018, S. 26).

The *Melisse* project was embedded in two cities in the German-wide counselling offerings of *profamilia* between 2019 and 2022. *Profamilia* maintains independent helpdesks on sexuality, relationships, contraception, and pregnancy. The unique feature of *Melisse* was their specific focus on disability and their implementation of peer counselling. Although the project received positive feedback from the local council, service users, and staff funding on the project was discontinued for unknown reasons (profamilia Sachsen, 2022). The successful project was forced to end in June 2022. Currently, a further *profamilia* project *Tandem-Teams* in which people with learning difficulties work together with non-disabled counsellors awaits the outcome of the follow-on funding (profamilia Schleswig Holstein, 2022).

3. Research Methodology

Since peer counselling in sexuality education for and by people with learning difficulties is rarely implemented in Germany, staff's perspectives on peer-led sexuality education are of interest for this research project. The following research questions arise:

1. Why do non-disabled counsellors view the involvement of peers as important (or not) in leading sexuality education for, by and with people with learning difficulties?
2. What do non-disabled counsellors view as the conditions of success for peer counselling in sexuality education for and by people with learning difficulties?

3.1 Theoretical Assumptions

The research project follows the principles of qualitative social research in employing a creative approach in qualitative semi-structured interviews to increase openness and flexibility. Furthermore, the principles of research understood as communication between researcher and the researched, the process characteristic of research and subject matter, and reflexivity are adhered to (Lamnek and Krell, 2016).

A social constructivist standpoint is adopted to value perspectives and experiences of all participants as legitimate. The goal is to focus on the different implications of these perspectives rather than to come to generalisable assumptions (Patton, 2015). Moreover, the emphasis is on knowledge constructed and situated within culture and history (Gergen and Gergen, 2007).

Applying an interview process is understood as the dialogical co-construction of meaning between interviewer and interviewee to achieve a deeper understanding of a specific experience within certain circumstances (Patton, 2015).

3.2 Data Generation

Six qualitative online semi-structured interviews were conducted (each between 55 to 76 minutes).

3.2.1 Recruitment

Participants were recruited via gatekeepers Germany-wide. Organisations which offer counselling in sexuality education for people with learning difficulties and mailing lists of networks related to the research topic were directly contacted via email. These organisations and networks forwarded email request to relevant people. My email provided a recruitment poster entailing a short summary of my research project and my direct contact information. People who got in contact received further detailed information on the research project, the research privacy notice, and the consent form. After returning the consent form it was agreed on a date for the interview.

3.2.2 Sampling of Participants

A purposeful sample of knowledgeable key informants was employed to create a specific information rich group (Patton, 2015). Overall, eight people from Germany and one person from Austria put themselves forward. The person from Austria and a person who approached the researcher after the set response deadline were not included because of the project's

restriction in scope and time. Six out of the remaining seven people consented to the interview.

Since only a few counselling structures in Germany offer counselling services on sexuality education for people with learning difficulties, participants' occupational experience in this field was the only sampling criterion applied. Experiences with peer counselling was not mandatory. However, the recruitment poster stated that this was the primary topic of the interview and participants were expected to speak about it. To secure interviewees' anonymity, the report does not refer to any demographic data and does not describe the individuals.

All the six interviewees had a background in social work and/or curative care. Throughout their career they focused on the matter of people with learning difficulties and sexuality. Today, all of them are professionally involved in a counselling offer on people with learning difficulties and sexuality. Despite one counselling service which is embedded in the wider structure of a welfare organisation, all others are provided by non-governmental organisations. Five participants were involved in services for adult people with learning difficulties and one in sexuality education in special schools. Two participants were not yet involved with peer-led sexuality education by people with learning difficulties on a practical level. Two participants were experienced in tandem work and two in coworking with a peer counsellor but not in a tandem.

3.2.3 Interviews

The semi-structured interview guide was designed as open and flexible as possible and at the same time as structured as necessary to address the research topic (Helfferich, 2010). According to Helfferich (2014) the interview guide should consist of a limited number of questions, allow formal clarity and manageability, be orientated to the natural flow of memory and reasoning and prioritise spontaneous narration.

Thus, four overarching narration prompts supplemented by follow-up questions on specific points of interest were created to focus the conversation on the research topic. Topics which emerged from the literature review were included and broader questions to give participants space to elaborate on their point of view.

Through referring to a shared item and directing the conversation in a flexible way interviewees can express their subjective experiences (Butler-Kisber, 2017). Therefore, one narration prompt

was combined with a creative task in form of a brainstorming using an online whiteboard tool (figure 1). Whilst the brainstorming period the interviewer switched off her camera and

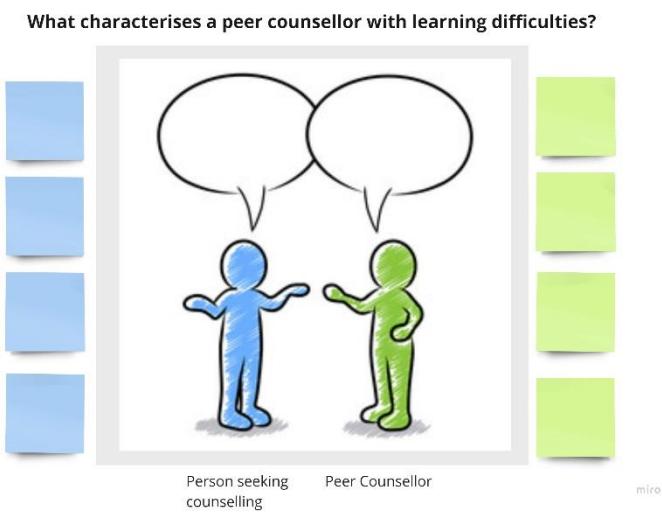


Figure 1: Creative task

microphone to allow participants enough time in private. Participants took between 2 and 12 minutes to complete the task. Then participants elaborated on their ideas which allowed for deeper insights than questioning alone, and the co-construction and deconstruction of social meanings (Kramer-Roy, 2015). Four interviewees used the opportunity to work with the creative task. One

interviewee did not use the tool itself but referred to the picture provided as reference whilst narrating. In one case, the researcher and interviewee decided to not use the tool because of the interviewee's limited time.

3.3 Analysis

The audio recorded, and verbatim transcriptions were analysed using an abductive thematic analysis by means of the data software *Nvivo*. The data, then, was studied across cases looking for similarities and differences to achieve cross-comparison resulting in the generation of new concepts and explanations (Bernard and Ryan, 2010).

Initial codes already developed from the interview guide (such as *characteristics* and *value*) and others emerged throughout the analysis (such as *tokenism* and *professionalism*). After several cycles of coding patterns these were subsumed under seven interrelated key themes (*value*, *characteristics*, *qualification*, *implementation*, *recruitment*, *structural conditions*, and *challenges/ambiguities*) centring around the theme *disability experience* of the peer counsellor. The iterative process of re-reading data and the literature produced an interrelated set of conditions (figure 2) consisting of the key themes and subthemes. The most important subthemes for the purpose of this research are *tokenism*, *professionalism*, and *power*

relationships.

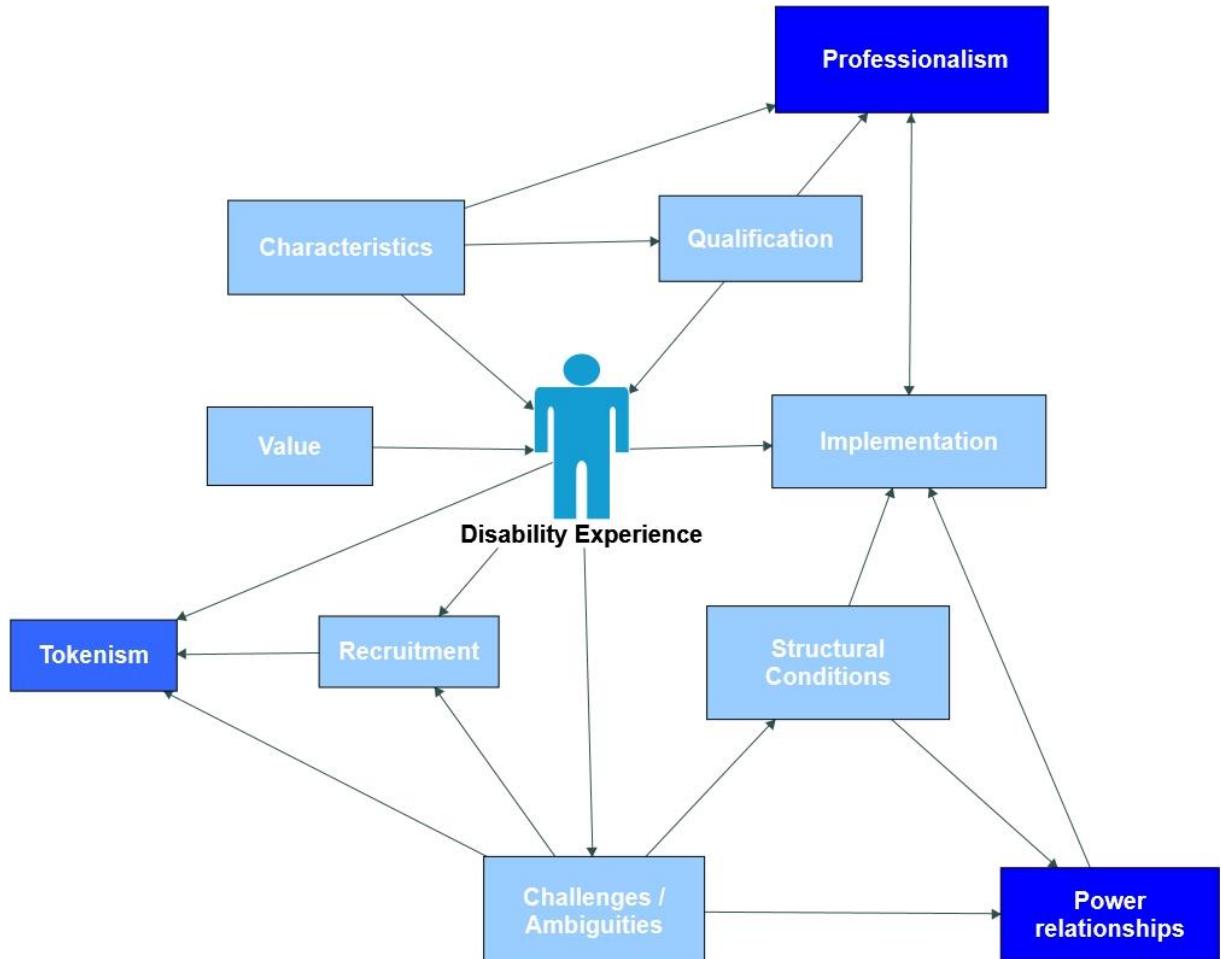


Figure 2: Set of conditions

Nonetheless, this entails the risk of imposing only the researcher's own concepts and meanings onto the participants as has been the case with previous research *on* people with learning difficulties. Due to the dominance of a white, western, heterosexual perspective in research on sexuality and disability (Shuttleworth, 2010) I am aware of my own standpoint as a white female heterosexual non-disabled academic researcher. Nevertheless, the critical examination from a disability studies perspective orientates my research towards people with learning difficulties' inclusion and self-empowerment promoting the removal of disabling societal barriers and the resistance of normalisation (Walmsley, 2001).

4. Set of Conditions

The set of conditions aims to shed light on the disability experience which is viewed as the key characteristic of peer counselling in general and of the peer counsellor specifically thereby addressing the following need formulated by one interviewee.

"I think it [Peer Counselling] should become a regular feature above all. So that it is no longer a question of whether we do it or not, but rather how do we do it? How can we implement it? How do we succeed? Um, how do we manage to pay people to give up their time and give something of themselves to enrich others? Those are the basic questions that concern me."

This is not to reinforce an essentialist understanding of learning difficulties like in an individual model of disability. In contrast, the focus lies on the experience of being assigned the label of a learning difficulty by society because of cognitive ableism; the experience of being classified as not capable of sexuality and, thus, being excluded from sexuality education because of sexual ableism (Gill, 2015; Liddiard, 2018).

4.1 Value

Overall, advantages of peer counselling on the levels of peer counsellors, counselees, and third parties were identified (Stahl et al., 2018).

4.1.1 Value for peer counsellors and their counselees

In line with the literature, all interviewees emphasised the shared experience of a (learning) disability as not only the key characteristic of peer counselling but also its most important value.

"[...] because the experiences that people with disabilities have institutionally, I don't have them, they have them institutionally. These are experiences that are totally valuable, (...) but they are somehow neglected. Or the experiences people make in sheltered workshops or in special schools are important experiences."

The shared disability experience enables counselling on an eye level, mutual understanding, and trustworthiness (Stahl et. al, 2018).

Additionally, peers can value and validate counselees experiences and feelings as "normal" (Naezer et al., 2017). Naezer et al. (2017) noted that "for youth belonging to somekind of minority, hearing other people's opinions about their "normalcy" was important subjective knowledge" (p. 719). They claim that sexuality education is taught from an adult-centred perspective which is narrowed to the control of young people's sexual behaviours by promoting protectionist sexual education policies (Naezer et al., 2017). This leads to the reinforcement of the power hierarchy between the vulnerable student and the autonomous adult (Naezer et al., 2017). Likewise, sexuality education for people with learning difficulties is narrowed to an able-bodied perspective (Bahner, 2018). This results in reactive and protectionist sexuality education reinforcing the power hierarchies between the autonomous able-bodied person and the vulnerable person with learning difficulties (Schaafsma et al., 2017; Schaafsma et al., 2015). Furthermore, many educational policies on sexuality education are narrowed to one

standardised package of knowledge and deny young and disabled people's diversity of experiences (Naezer et al., 2017). The discourse of individualistic dichotomic notions of vulnerability/autonomy, adult-/childhood, and dis/ability reinforces the dominant ableist ideal of sexual normalcy (Daly et al., 2019). Therefore, many disabled internalise feelings of abnormality and inferiority (Liddiard, 2018). In return, reclaiming "normalcy" can be a powerful emancipatory tool.

"And that can set things off again for you, if you only know that somehow, that people without disabilities talk to me, talk about me, tell me what's possible. No, there are people who speak for themselves. No, so I think I find role model quite good."

4.1.2 Value for third parties involved

Reclaiming normalcy through peer counselling by people with learning difficulties draws the attention to the non-disabled identity (Campbell, 2008) which can be investigated as "temporarily able" (Carlson, 2001, p. 142). This is expressed in the following:

"You never know where we'll end up, but we simply haven't had them [experiences] yet."

This enables a critical examination of one's personal relationship to the possibility of disability and its meaning in a broader social context (Carlson, 2001). Yet, a danger is to misrepresent the disabled person simply as a "mirror" reflecting limitations and suffering (Carlson, 2001). Similarly, Kulick and Rydström (2015) following Young (1997) point towards the problem of "symmetrical reciprocity"

"that is, they put themselves, with their background, knowledge, experience, and privilege into what they suppose is the position of another, and they imagine that such a substitution adequately captures the perspective of that other or those others." (p. 266)

The interviewee refers to this by the following:

"Um, that you can of course put yourself in the persons' shoes in a completely different way. No matter how hard we try. We will never be able to do that like a peer counsellor."

If privileged people put themselves in the position of a less privileged person or group the deriving assumptions will misrepresent the other's position (Kulick and Rydström, 2015). Instead, a need derives for acknowledging "asymmetrical reciprocity" (Kulick and Rydström, 2015). Thus, the other's perspective is never to be fully understood and rather the engagement with each other allows for the recognition of difference and the challenge to one's own perspective (Kulick and Rydström, 2015).

“So, opening insofar that our world, I think, or especially the German-speaking world, where I stand, could become more inclusive. More inclusive in terms of, what can people do? (...) No matter who.”

“It simply raises so many more questions when disabled people talk amongst themselves and about sexuality than when people only talk about them. And that you question your own principles and attitudes.”

First, it is referred to peer counselling as a means of contributing to the wider inclusion especially because of people with learning difficulties` empowerment to speak for themselves rather than it is spoken about them (Keyes and Brandon, 2012). Second, thereby peer counsellors with learning difficulties challenge the ableist assumptions of co-workers, support staff, and relatives because they appear as owners, developers, and facilitators of the topic of sexuality (Frawley and O`Shea, 2020).

4.2 Employment and Funding

Only one interviewee mentioned the creation of job opportunities in the primary labour market by the means of peer counselling. This could point towards the experienced difficulties with employing people with learning difficulties in the primary labour market. This is inextricably linked to the funding situation of the implemented projects. Regardless of having experiences with peer counselling all interviewees critiqued the difficulties to gain funding for sexual education in general and peer counselling particularly.

“Interviewer: So that it is possible to employ people rather regularly than on a project basis?

Interviewee: Exactly, because then you can also somehow. Well now it is unclear in [federal state] when and how it will continue. That's a shame because everyone thinks it's great. Or the feedback is always really, really good that there is something like this. And now it's unclear how it will continue. [...] And then people must sit down again and write new applications. And then it must be approved and then.”

The implemented peer counselling offers were funded on a project basis up to two to three years. Towards the end of the funding period follow-up applications need to be written with unpredictable outcomes. That is what happened to the best-practice project *Melisse*. Because of the projects` limitations in time a hesitation exists to employ people with learning difficulties on a regular basis. As a result, peer counsellors employed in the projects work in segregated shelters and only are exempted from their work for the peer counselling activities. Another obstacle occurs since their additional income is credited against their social benefit entitlements (Schrötle et al., 2021).

4.3 Implementation

This directly influences the ways in which peer counselling in sexuality education by and for people with learning difficulties is implemented on a practical level.

4.3.1 Time

The results of *Peer Counselling im Rheinland* indicate that full- and part-time employed peer counsellors achieve somewhat better counselling outcomes than peer counsellors working as volunteers (Schreiner, 2018). Even though the reported activities of peer counsellors in this project did not happen on a volunteering basis peer counsellors were restricted in the amount of time which they could spend in the project because of their employment situation.

But interviewees referred to time as a key factor for the implementation. This interviewee describes the necessary methodological approaches to qualify the peer counsellor on the topic of sexuality. Because of a lack of available qualification programmes in sexuality for peer counsellors this needed to be done during the regular working hours.

“We had the problem, [the peer counsellor] is only present one day a week, and now we must start with liveliness, repetition, limitation, simplicity, multi-sensory work and so on. And now we have actually a team that is no longer able to work, because now this one day a week is occupied until the end of the year.”

Thus, sufficient time needs to be available to meet access needs to information. According to Stahl et al. (2018), more time (in comparison to counselling for people without learning difficulties) in combination with demand-oriented materials and methods lead to constructive counselling. Time needs also to be considered regarding the counselling situation itself.

“And I'm also thinking about speed, that is, time and resources, [...] And I have people in mind who communicate with a talker. They would be great in counselling, but this talker communication simply takes up a certain amount of space, of time, which is completely fine. But you must be willing to do this. And the other person also must be willing to engage with that, which I think is a huge barrier.”

This displays an orientation towards “clock time” which refers to processes of objectification, quantification, and standardisation and thus the depersonalisation of human needs and associated tasks (Katzman et al., 2020). “Clock time” serves as a constructed overarching structural framework in industrialised Western societies (Katzman et al., 2020). The resulting time limitations often cannot be met by people with learning difficulties because of their access needs to information and/or the use of assistive technologies in communication. In contrast, the concept of “crip time” offers reorientation to time because of its acknowledgement of “natural

variations in the temporal and other related resources that people need and can access to accomplish everyday activities" (Kafer, 2013, p. 521). This allows to reframe people with learning difficulties time needs as "appropriate" rather than as "more".

4.3.2 Professionalism

Interviewees partly struggled with viewing peer counselling as a full-fledged work and/or as a supplementary activity indicating a link back to the available amount of time linked to the precarious employment situation.

"The ultimate would be if these positions had a larger scope and if it were to take place on a professional level, so to speak. But to what extent it is imaginable, feasible. I don't, don't know."

Whereas they argued for the introduction of a professional standard for peer counselling some disagreement emerged on the extent.

"[...] peer counselling, which is often more low-threshold and does not require any strategies such as how to accompany counselees over several sessions, I don't know, or systemic approaches [...]"

"That's what characterises peer counselling, I think, a certain degree of professionalism, BY how does counselling work."

This mirrors the theoretical depiction of peer counselling in between the key characteristic of the shared experience and professionalism. Although, the experience of disability itself is part of the qualification of a peer counsellor, this should not be viewed as sufficient (Stahl et al., 2018). On the contrary, interviewees pointed to the risk of tokenism.

"It's a great danger that happens with this EXPERIENCE, [...] And I think you can't expect people who have had a certain EXPERIENCE AND have a so-called disability to be able to give perfect advice because of this experience. And that's the big difficulty, that you don't just bring in people because you want to bring them in, but you also bring in the right people, and you must find them first, and how you find them hasn't even been thought about yet."

First, tokenism refers to the practice of instrumentalization of those affected in favour of a seeming or superficial diversity and inclusion practice (Boger, 2019). Hence, the inherent danger to peer counselling is to implement it solely to showcase an inclusive practice without appropriately qualifying people for it. Secondly, the term describes the question of *who* is taken as a token (Boger, 2019). Boger (2019) points towards the danger of reproducing an ableist hierarchy if only disabled persons are present who seem to be the most "normal" ones. This is mirrored in a statement by one interviewee talking about an event for relatives which was organised by the interviewee and tandem partner:

“And then, yes, it often happens that the relatives make such comparisons during the evening, yes, you are not as disabled as MY child, so where such things are opened up, comparisons are made.”

Here the peer counsellor is “punished” for their competence (Boger, 2019). On the contrary, Schröttle et al. (2021) problematise that women’s representatives in segregated shelters are blamed for their incompetence and overburdening although the structural implementation is insufficient due to a lack of spatial, material, and structural resources.

Moreover, this implies the risk to focus solely on the “able-disabled” (Kulick and Rydström, 2015, p. 268) in peer counselling. Kulick and Rydström (2015) critique a focus on articulate, artistically, and athletically talented, politically aware, and active disabled people within disability studies who indeed challenge stereotypes, make demands, and stake claims. However, this entails the danger to leave behind people with learning difficulties and/or people who do not fall in those categories (Löfgren-Martenson, 2013). Moreover, most disabled people cannot afford the privilege of “noncompliance and moving across boundaries as political strategy for social change” and thus rather wish to be regarded as “normal” (Bahner, 2018, p. 643).

4.3.3 Co-Working

Three interviewees discussed the division of equal parts of speech during the counselling activities and facilitation of workshops as challenging.

“in the events, that we pay attention to each other, [...] did we somehow structure the speech part well.”

This mirrors a biased orientation towards the verbally articulate individual. The interviewee assumes that an equal division of speech parts would counteract the perceived power imbalances between themselves and the peer counsellor. Linguistic and verbal skills are culturally constructed and valued as signifiers of competence and rationality by Global North societies (Goodley, 2017). Schwartz-Johnston (2019) argues that “Ableism supports the disenfranchisement and marginalization of people who do not use speech. Ableists often view people who do not use speech as intellectually incapable or insignificant.” (p. 481). In return, cognitive impairments are rendered as abject and Other (Liddiard, 2018). Moreover, the use of deviant forms of communication such as speech-generating devices and the resulting wait- and device-time are devalued (Schwartz-Johnston, 2019) which reflects the prioritisation of clock-time over crip time by society.

Yet, interviewees reinforce that in general they view people with learning difficulties as capable of providing counselling on the topic of sexuality.

“The colleagues or experts [peer counsellors] who are in our team are (very?) interested in the topic, too. And I would say that they have also dealt with it a lot and can somehow explain things well or simply have more knowledge than the rest of society, just like other colleagues. So, I wouldn't say that there is a difference.”

The genuine interest in the topic is the most crucial characteristic of both peer counsellors and non-disabled counsellors in sexuality education. Furthermore, all interviewees strengthen the importance of an available support network of co-workers for the peer counsellors (Jordan and Wansing, 2016).

“would be important, when [the peer counsellor] has a demand, that they know they can contact me, that I am somehow nearby and that I can then, um I don't know, briefly come to talk to them about something when they don't know what to do next.”

The evaluation results of *Peer Counselling im Rheinland* show that not only all counsellors with learning difficulties but also a further part of disabled counsellors made use of a form of supported counselling (Schreiner, 2018). By emphasising co-operation and engagement peer counselling challenges the normative ideal of the able, self-sufficient, and autonomous individual (Goodley, 2018).

4.3.4 Qualification

Although interviewees battled to describe peer counselling as a professional activity, they clearly formulated necessary qualifications.

“The basis always is the topic of qualification, of course, to really offer qualification, especially of course around the topic of sexuality education. [...] But we ourselves do that on the topic of sexuality education through the exchange of experiences and observation of co-workers, which is also great. But of course, it would also be good if there were other possibilities for qualification.”

Nonetheless, according to the interviewees and the literature review no specific qualification for peer counselling in sexuality education for people with learning difficulties exists. Therefore, the interviewee above reports that it happens in form of on-site training and supervision. In general, on-going further training and supervision should be part of the peer counselling activity (Jordan and Wansing, 2016).

According to interviewees knowledge should be required on three distinct levels: Knowledge on sexuality, pedagogical and methodological knowledge.

“Um, the person should have knowledge about sexuality related topics. I would say specialised knowledge, should have methodological knowledge, how can I deliver something like that?”

“So just this social component that comes into play through counselling situations, to practise it or at least make it tangible, to get a feel for conversation situations in this context, with a very strong focus on leading conversations.”

Methodological knowledge refers to how counselling in general works. Pedagogical knowledge refers to social skills such as self-reflection, appreciation, and respect. Both components are found in curricula for peer counselling (e.g., *so-und-so* and *bifos e.V.*).

4.3.5 Recruitment

In regard to the recruitment of peer counsellors, interviewees problematized internalised feelings of incapacity and incapability by people with learning difficulties (Liddiard, 2018).

“but you also bring in the right people, and you must find them first, and how you find them hasn't even been thought about yet.”

This further expressed by the following:

“To what extent do we manage to make people strong enough to feel that I CAN say that I want this? And I AM actually someone who can accompany people well and that is also counselling. I think it starts very early on, that we (...) teach people or the institutions, that the institutionalised disability support system teaches people: no, there are actually other people who decide that for me, so you are not really free in that.”

The institutionalised disability support system is a manifestation of the individual model approach to disability. Impairment is treated as physiological deficiency and, thus, disabled people are hyper managed through surveillance, classification, and intervention (Liddiard, 2018). This segregation from the public view, space, and culture results in the disabling practices of segregated education and institutionalisation (Liddiard, 2018). A “paternalistic regime” supports

“a life in which people with intellectual disability' either must ask permission and/or are prevented by their parents [and others who are in carer roles] from taking control over their social/sexual lives” (Foley, 2017, p.6 cited in Frawley and O’Shea, 2020, p. 414).

For the German country context, Ortlund (2020) reports that the organisational structures of segregated institutions and staff' attitudes and actions are the major obstacles to the sexual self-determination for people with learning difficulties. Yet, interviewees reported that they are approached by staff working in institutions and that in these cases the supporting staff is to some extent informed and open about the topic of sexuality.

“In very few cases do they [people with learning difficulties] come to counselling without any support at all. In this respect, in my experience, a certain openness is already given in the environments.”

As a result, however, people with learning difficulties are dependent on third parties in attending independent counselling offers.

“For example, the professionals working in welfare institutions rarely know about us [counselling service] or about this possibility, and often they don't even know or are not even sure whether the topic of sexuality is an everyday topic for professional discussion at all, because of course it is still a taboo in many areas.”

Schaafsma et al. (2017) argue that conservative and/or ambivalent staff attitudes lead rather to restrictive and reactive than proactive sexuality education. Consequently, people with learning difficulties lack knowledge, skills, and experience in sexuality which in return results in difficulties in finding, forming, and maintaining relationships as well as higher affectedness by sexual abuse (Schaafsma et al., 2017).

However, being socialised within those institutions can limit people with learning difficulties aspirations to become a peer counsellor in sexuality education, too.

“I think the first barrier is actually VERY frank, that people say, I want to do this, out of an intrinsic motivation, from themselves. (...) It's difficult. And that starts [...] already in the special school.”

Special educational schools do not provide comprehensive sexuality education and counselling to people with learning difficulties in Germany (Baab, 2018).

“And that's why people leave school with an extremely large lack of sexuality education. And everything that then happens is ultimately, in MY perception, a consequence of the lack of sexuality education. You can simply say that people are disabled in the area of school, um, in sexuality education. They are not given access to sexuality education.”

The denial of sexuality education and the resulting opportunities to speak, develop, and explore one's own sexuality proliferates stereotypical attitudes and a limited approach towards people with learning difficulties' sexuality (education) (Chrastina and Večeřová, 2018).

4.3.6 Preconditions

Consequently, interviewees viewed three areas as critical for change: First, the topic of sexuality and people with learning difficulties is still a taboo (Specht, 2017).

“it became clear to me, okay, this is totally a taboo subject, uh, sexuality, and I also thought that NOW, within sexuality education, it is still THE subject where few people dare to approach it, or where I have the feeling that, socially, the greatest barriers are still, um, there”

This was previously reflected in staff’s ambiguities to approach counselling services on sexuality education. Thus, although the debate on disability and sexuality has shifted towards a human rights perspective in academia this rarely has been translated into the practice. Restrictive institutional and educational social environments are still frequently reported (Ortland, 2020). Therefore, the sexual and reproductive rights, especially the right to parenthood, of people with learning difficulties still must be fully acknowledged (Arlabosse et al., 2018).

“the right to parenthood, this is the major barrier to the enjoyment of sexual and reproductive rights right now”

The limited focus in sexuality education for people with learning difficulties on safe sex, contraception, and STIs (Schaafsma et al., 2017) frames the discourse of people with learning difficulties and parenthood within vulnerability, deviance, and risk (Martino and Fudge Schormans, 2021). The figure of the child representing the future of the nation state serves the reinforcement of an eugenic discourse of the fear to reproduce disability (Martino and Fudge Schormans, 2021). Therefore, the major concern is the regulation of people with learning difficulties` capacity to reproduce (Shildrick, 2007).

Lastly, the prerequisite not only for comprehensive sexuality education but also for an inclusive labour market is an inclusive education system.

“If the curriculum in school is inclusive, then it can also be inclusive in higher education. [...] Then people also demand minimum wages, which they get because they now also have recognised qualifications. So, I think that's the main problem, all these exclusionary tendencies that exist BEFORE the access to sexuality education”

The desire to achieve and enact specific societal ideals associated with abilities such as work, education, marriage, and parenting seems to be ableist and therefore problematic (Goodley, 2017). Yet, the self-advocacy movement of people with learning difficulties orientates itself towards normative ideals such as the right to work, education, a healthy love life, a welcoming family, marriage, and parenting (Runswick-Cole and Goodley, 2014, cited in Goodley, 2017). In Goodley’s (2017) view a critical ableist perspective acknowledges the importance of normative ideals but, at the same time, interrogates and disorientates those.

5. Conclusions

The investigation of peer counselling in sexuality for and by people with learning difficulties through an ableist lens enabled not only to challenge ableist assumptions about people with learning difficulties` capacity to be actively involved in sexuality education but also underlying normative constructions of the dis/abled individual. This, indeed, offers a radical opportunity to rethink and reshape current practices in sexuality education for and by people with learning difficulties. If sexuality education were to develop from people with learning difficulties` own experiences and needs the emphasis would shift to other “normalities” and to a deeper knowledge of oneself and others (Bahner, 2018). However, to sustainably employ peer counselling as an inclusive practice the wider societal context needs to be evaluated.

Jordan and Wansing (2016) identified three critical areas influencing the quality of peer counselling: the structural conditions of the counselling service, the personal preconditions of the peer counsellor, and the motifs and preconditions of the counsellee.

Due to the implementation as supplementary activity restricted in its scope rather than as professional occupation the structural conditions remain precarious. Especially the current funding and employment practices prevent long-term and sustainable employment of peer counsellors in sexuality education. Yet, restrictions in time contradict the claim of professionalism for peer counselling. This directly influences the guarantee of the counsellor´s personal preconditions since a comprehensive qualification is needed to professionally deal with the preconditions of the counsellee. Moreover, a comprehensive qualification for both peer counsellors and supporting staff contributes to address the reproduction of ableism and resulting power imbalances. Reducing peer counselling in sexuality education to the shared experience of disability dismisses it as a demanding professional occupation. As a result, not every person with a learning difficulty naturally qualifies as a peer counsellor. Therefore, people with learning difficulties should be enabled to willingly choose to work as a peer counsellor. This presumes the availability of active choices for people with learning difficulties. However, these choices are disabled by segregating people with learning difficulties into institutions and thereby from access to comprehensive sexuality education and counselling (Hollomotz, 2011).

. This entails the risk to implement peer counselling in sexuality education as a seemingly inclusive practice reinforcing ableist practices rather than serving as an actual tool for the self-empowerment of people with learning difficulties. As Sothern (2007, p. 157) claims the "struggle for disabled sexual liberation cannot be based upon normative sexual constructions". Hence beyond these three conditions the wider access to and implementation of sexual and reproductive rights need to be considered. Otherwise, the term peer counselling like

the term inclusion loses its radical transformative potential and becomes a meaningless phrase and practice captured by the special education discourse (Slee, 2011).

Thus, the future implementation of peer counselling for people with learning difficulties must entail high-quality concepts for implementation and qualification of peer counsellors with learning difficulties, further education for non-disabled support staff, and openly addressing the boundaries of peer counselling (Roemer, 2020). Furthermore, this must be extended to offer qualifications in sexuality education too. Lastly, these concepts must be extended to so-called severely disabled people (with learning difficulties). Ultimately, these concepts should be developed together with people and peer counsellors with learning difficulties. Then, indeed, the positioning of people with learning difficulties as experts by experiences as well as qualified facilitators and knowledge users entails the potential to challenge current ableist practices in sexuality education (Frawley and O'Shea, 2020).

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