



LET'S TALK ABOUT IT

Sexuality, Disability and ASD

This workshop is for Disability Workers, Teachers, Teacher Aides, Youth Workers and others whose roles bring them in contact with people with an Autism Spectrum Disorder (ASD). It is a special opportunity to be part of a collaborative learning experience which draws upon Family Planning Queensland's expertise in creating healthy and safe sexuality for people with a disability, and Autism Queensland's deep insight into the positive management of ASD. The workshop will enable participants to increase their knowledge of sexuality and relationships and the impact of ASD upon this. Participants will be asked to reflect upon values about sexuality and people with a disability, as well as potential impacts for a person's self esteem, health, knowledge and skills. There will be practical opportunities to develop strategies for supporting the independence of a person with ASD with regard to sexuality and relationships.

Wednesday
22 February 2012
9.30am - 2.30pm

Highfields
Cultural Centre
O'Brien Road
Highfields

APPLICATION MUST BE
RECEIVED BY:
Wednesday 8 February
2012

SESSION ATTENDANCE NUMBERS
MAY BE LIMITED

COST (funded service): \$20 pp
COST (non-target): \$40 pp

COSTS ARE GST-FREE. SERVICES FUNDED
THROUGH DEPARTMENT OF COMMUNITIES,
DISABILITY SERVICES ARE CONSIDERED TARGET

COME ALONG!

This workshop is for Disability Workers, Teachers, Teacher Aides, Youth Workers and others whose roles bring them in contact with people with an Autism Spectrum Disorder (ASD).

By the end of this session participants will be able to:

- Review their own and community attitudes and values about sexuality
- Recognise how social learning contributes to the development of a healthy sexuality
- Create and maintain a supportive environment when addressing sexuality issues for people with ASD
- Identify and implement strategies for supporting people with ASD in relation to sexuality

PRESENTERS

Family Planning Queensland (FPQ) has provided sexual and reproductive health education for over thirty years. During the previous 10 years Robyn Kavanagh has worked with teachers, disability workers and other professionals to assist them in making positive responses to issues of sexuality and relationships. Robyn has Asperger's Syndrome.

Autism Queensland's Lynda Melville with has worked with children from early intervention age through to adolescence during her 17 years with the organisation. Her roles have included group teacher and, Metropolitan and Regional Consultant and for many years Coordinator of AQ Training Services. Lynda has presented throughout Queensland, Australia and overseas.

ATTENTION! HOW TO APPLY TO BE A PART OF THIS EVENT

PLEASE FILL IN ALL FIELDS OF THE REGISTRATION FORM & FAX TO: (07) 3237 1497 or email to registrations@workforce.org.au FOR MORE INFORMATION PLEASE CALL: (07) 3404 1497
FREE CALL NUMBER AVAILABLE FOR PARENTS & UNPAID CARERS: 1800 851 848



LET'S TALK ABOUT IT: Sexuality, Disability and ASD
Wednesday 22 February 2012
9.30am - 2.30pm
Highfields Cultural Centre, O'Brien Road, Highfields
(applications close: Wednesday 8 February 2012)

COST (funded service): \$20 pp (GST-free)

COST (non-target): \$40 pp (GST-free)

SERVICES FUNDED THROUGH DEPARTMENT OF COMMUNITIES, DISABILITY SERVICES ARE CONSIDERED TARGET

PLEASE COMPLETE THE REGISTRATION FORM BELOW

If this event is over-subscribed, preference will be given to our target group and unpaid parent carers. Upon closing date you will receive confirmation of your place via email. If you are unsuccessful you will receive a full refund and notification. Please call (07) 3234 0190 if you wish to confirm your registration has been received, as the Workforce Council will not be responsible for attendance opportunities lost due to applications not being received. This activity closes 14 days prior to activity date. Substitutions will be accepted with prior notification. No refunds will be given without written notification of cancellation at least 7 days before the activity. "No Shows" will be charged the full registration fee. No payments can be accepted at the event. **Application form will become a tax invoice on payment.** Payment must be received prior to attendance.

Name/s 1. 2.
PLEASE PRINT CLEARLY
 If you have more than 2 people interested in attending, please tick and we will contact you if this activity does not fill out

Service Name _____

Organisation _____

Are you a parent/family member or unpaid carer of a person with a disability? Yes No

Do you work for a Service that is funded by the Department of Communities (Disability Services)? Yes No

What is your position? Direct Support Worker Management Committee Member Coordinator/manager Other: _____

Address _____ Personal address Work address

Town/suburb _____ Postcode _____

E-mail _____

Phone _____ Fax _____ Total Amount Payable \$ _____

I WISH TO ATTEND: TOOWOOMBA (22 February 2012)

Do you have any essential dietary requirements? (please also state to whom this applies) _____

We endeavour to accommodate the dietary needs of participants wherever possible; however, this is at times limited by the catering options available at individual venues.

Do you have any disability related needs that may require support? (please contact us to arrange details) _____

OFFICE USE ONLY: ACTIVITY IDs — 5350 AO: NS

PHOTOGRAPHY

On occasion, the Workforce Council will document events through the use of audio, video and/or still photography. These recordings may then be used by the Workforce Council in appropriate publications including but not limited to newsletters, flyers, brochures and websites. If you do not consent to having photos/audio/audiovicals of you participating in this activity used in future promotional materials, please indicate below and you will be provided with instruction on how to be excluded upon signing in at the registration desk.

I CONSENT I DO NOT CONSENT Signed: _____ Date: _____

HOW TO PAY

<p>IF PAYING BY CREDIT CARD:</p> <ul style="list-style-type: none"> • Complete all fields of the credit card payment form below • Send completed application by fax to (07) 3237 1497 or email to registrations@workforce.org.au DO NOT post the original copy or duplication of payment may occur • A receipt will only be sent on request <p>WE DO NOT ACCEPT CREDIT CARD PAYMENTS BY PHONE</p>	<p>IF PAYING BY CHEQUE OR MONEY ORDER:</p> <ul style="list-style-type: none"> • FAX YOUR COMPLETED APPLICATION TO (07) 3237 1497 OR EMAIL TO registrations@workforce.org.au • COPY THIS FORM FOR YOUR RECORDS AND POST THE ORIGINAL WITH CHEQUE OR MONEY ORDER MADE OUT TO: HEALTH AND COMMUNITY SERVICES WORKFORCE COUNCIL INC TO ADDRESS: GROUND FLOOR, 303 ADELAIDE STREET, BRISBANE QLD, 4000. YOUR CERTIFICATE WILL NOT BE ISSUED UNLESS THIS FORM IS RECEIVED • A RECEIPT WILL ONLY BE SENT ON REQUEST
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REMITTANCE ADVICE

PAYMENT TYPE: VISA MASTERCARD CHEQUE/MONEY ORDER AMOUNT PAYABLE: \$ _____

CREDIT CARD NUMBER: _____ EXPIRY DATE : _____ / 20 _____

NAME ON CARD: _____ PHONE NUMBER: _____