

CSE Harmful Elements Analysis Tool

The CSE Harmful Elements Analysis Tool¹ was created to help parents, school administrators, educators, and other concerned citizens assess, evaluate, and expose harmful elements within comprehensive sexuality education (CSE)² curricula and materials. For more information, visit www.stopcse.org.

Analysis of

UNESCO (United Nations Educational, Scientific, and Cultural Organization) International Technical Guidance on Sexuality Education (2018 Revised)

Based on 15 Harmful Elements Commonly Included in CSE Materials

CSE HARMFUL ELEMENTS SCORE = 15/15

UNESCO's International Technical Guidance on Sexuality Education contains **15 out of 15** of the harmful elements typically found in CSE curricula or materials. The presence of **even one of these elements indicates that the analyzed materials are inappropriate for children**. Having several of these elements should disqualify such materials for use with children.

Program Description: *UNESCO's 2018 Revised International Technical Guidance on Sexuality Education* was published by the United Nations Educational, Scientific and Cultural Organization (UNESCO) in collaboration with other UN agencies including UNICEF, the United Nations Population Fund (UNFPA), and the World Health Organization (WHO). It targets very young children (ages 5 to 15) and promotes a highly controversial rights-based approach to sexuality education that suggests children should be taught, among other things, that they have a right to receive instruction in sexual pleasure and masturbation and that they have a right to decide when and with whom they will have sex. The Technical Guidance also promotes respect for promiscuous sexual behavior, diverse sexual practices and sexual orientations, and unscientific transgender ideology; and it falsely states that abstinence education is ineffective and harmful and that each person's decision to be sexually active should be respected. With the full backing of multiple UN agencies, this guidance provides clear evidence that what was on a more-hidden international agenda is now being sanctioned and brought forward as the expected standard—one that promotes sexual rights at the expense of sexual health.

Target Age Group: Children ages 5 – 15 years

Planned Parenthood Connections: It should come as no surprise that International Planned Parenthood Federation (IPPF) was part of the working group that created this Technical Guidance, since Planned Parenthood is one of the largest providers of comprehensive sexuality education worldwide. IPPF makes huge profits from both creating and disseminating CSE programs worldwide, programs intended to sexualize children so they will be more likely to patronize one of IPPF's 65,000 service points in 170 countries that sell condoms, contraceptives, STI testing and treatments, abortions and more.

¹ The CSE Harmful Elements Analysis Tool was created by Family Watch International. Family Watch is not responsible for the way in which the tool is used by individuals who do independent analyses of CSE materials. Visit www.stopcse.org for a blank template or to see analyses of various CSE materials.

² CSE programs are often labeled as comprehensive sex education, sexual education, sexuality education, anti-bullying programs, sexual and reproductive health education, Welcoming Schools programs, and even family life, life skills or abstinence plus education programs, etc. Regardless of the label, if program materials contain one or more of the 15 harmful elements identified in this analysis tools, such materials should be categorized as CSE and should be removed from use in schools.

HARMFUL CSE ELEMENTS	EXCERPTED QUOTES FROM CSE MATERIAL
<p>1. SEXUALIZES CHILDREN</p> <p><i>Normalizes child sex or desensitizes children to sexual things. May give examples of children having sex or imply many of their peers are sexually active. May glamorize sex, use graphic materials, teach explicit sexual vocabulary, or encourage discussion of sexual experiences, attractions, fantasies or desires.</i></p>	<p>“[Y]oung people want and need sexuality and sexual health information as early and comprehensively as possible” (pg. 35)</p> <p>“CSE promotes the right to choose when and with whom a person will have any form of intimate or sexual relationship ...” (pg. 18) <i>[Note: Do children have a “right” to have sex? In most places it is illegal for children of minor age to have sex.]</i></p> <p>CSE can “help children and young people form respectful and healthy relationships with ... romantic or sexual partners.” (pg. 17) <i>[Note: Should children be encouraged to have sexual relationships of any kind with “sexual partners”?]</i></p> <p>“list ways that people express their sexuality ... state that interest in sex may change with age and can be expressed throughout life” (pg. 70, Learning objectives—12-15 years) <i>[Note: While this may seem innocent, many CSE programs encourage children to make a list of sexual things they can do with each other to express their sexuality. Listed as possible examples for what children can do short of penetrative sex are things such as anal and oral sex and mutual masturbation.]</i></p> <p>“describe ways that human beings feel pleasure from physical contact (e.g. kissing, touching, caressing, sexual contact) throughout their life ... (pg. 70, Learning objectives— 9-12 years)</p> <p>“...communicate ...different sexual feelings and talk about sexuality” (pg. 66, Learning objectives—9-12 years) <i>[Note: What kind of sexual feelings will children be encouraged to talk about? Many CSE programs encourage children to learn and use vulgar sexual vocabulary to desensitize them to sexual things.]</i></p> <p>“The Guidance highlights the importance of addressing the reality and impact of sexuality on young people’s lives, including some aspects that may be sensitive or difficult to discuss in certain communities.” (pg. 18) <i>[Note: Is it the role of schools to address sensitive and difficult sexual issues with children? What about parents? Will they be involved in these sensitive sexual discussions or will these discussions be kept private from parents?]</i></p>
<p>2. TEACHES CHILDREN TO CONSENT TO SEX</p> <p><i>May teach children how to negotiate sexual encounters or how to ask for or get “consent” from other children to engage in sexual acts with them.</i></p> <p><i>Note: “Consent” is often taught under the banner of sexual abuse</i></p>	<p><i>[Note: A serious harmful element common to many CSE materials (including the UNESCO Guidance) is that instead of teaching children refusal skills (how to say no to sex), they encourage teaching children of minor age how to obtain consent from other children to engage in sexual acts. They often do this by having children practice various scenarios where they negotiate giving and receiving sexual consent, thereby normalizing and subtly condoning child sex. This is highly problematic, not just from a health standpoint but also from a legal standpoint since in many countries it is illegal for children to have sex with another person, whether consensual or not.]</i></p> <p>“demonstrate ways to communicate giving and refusing consent” (pg. 56) <i>[Note: Why would anyone want to teach a child how to consent to sex?]</i></p>

<p><i>prevention. While this may be appropriate for adults, children of minor age should never be encouraged to “consent” to sex.</i></p>	<p>“analyze the benefits of giving and refusing sexual consent” (pg. 56)</p> <p>“Everyone has the right to be in control of what they will and will not do sexually, and should actively communicate and recognize consent from their partners” (pg. 56)</p> <p>“education about consent is essential for building healthy and respectful relationships, ... help them develop the knowledge and confidence to seek positive relationships with other individuals.” (pg. 91)</p> <p>“help create a society where no one feels ashamed to willingly engage in sexual activity, or to reject it or revoke consent at any point.” (pg. 91)</p> <p><i>[Note: Why does the UN want children to feel good about engaging in sexual activity when all the research shows that promiscuous children have more negative outcomes?]</i></p> <p>“Negotiation skills also provide children and young people with the tools to navigate conversations on sexuality, come to agreements and settle differences with others. Roleplaying activities representing a range of typical situations are commonly used to help teach these skills, with elements of each skill identified through progressively complex scenarios.” (pg. 91)</p> <p><i>[Note: While this <u>may</u> be appropriate for promiscuous adults, it is not appropriate for children nor is it an appropriate topic for teachers and schools to be addressing with children of minor age.]</i></p>
<p>3. PROMOTES ANAL AND ORAL SEX</p> <p><i>Normalizes these high-risk sexual behaviors and may omit vital medical facts, such as the extremely high STI infection rates (i.e., HIV and HPV) and the oral and anal cancer rates of these high-risk sex acts.</i></p>	<p><i>[Note: Rather than referring specifically to anal and oral sex, the Guidance uses the broader term “penetrative sexual intercourse” to encompass penetrative vaginal, oral and anal sex.]</i></p> <p>“state that most people acquire or transmit HIV through unprotected penetrative sexual intercourse with someone who is living with HIV.” (pg. 79)</p> <p><i>[Note: This gives the impression that “protected” penetrative sex (i.e., vaginal or anal sex with a condom) will eliminate most of the risks. However, condoms have never been approved as an effective form of protection for anal sex, and studies show that condom use among children is rarely effective or consistent.]</i></p> <p>“recall that non-penetrative sexual behaviours are without risk of unintended pregnancy, offer reduced risk of STIs, including HIV, and can be pleasurable” (pg. 72)</p> <p><i>[Note: This is medically inaccurate. For example, the HPV virus and other STIs are spread by skin-to-skin contact, so risk is not eliminated by condoms Also, some risk of infection is always present whenever sexual bodily fluids are exchanged.]</i></p> <p>“CSE addresses safer sex, preparing young people ...for intimate relationships that may include sexual intercourse or other sexual activity.” (pg. 18)</p> <p><i>[Note: Is it the role of government or schools to “prepare” children for sexual activity?]</i></p> <p>“There are ways to avoid or minimize risk of sexual behaviours ... explain that condoms and other contraceptives reduce the risk of unintended consequences of sexual behaviours” (e.g. HIV, STIs or pregnancy) (pg. 72, Learning objectives—12-15 years)</p> <p><i>[Note: Rather than promoting abstinence to children, the Guidance includes a great deal of information about “protection” and alleged “safe sex” tacitly condoning and even in some cases encouraging children to engage in “protected sex” sex as a right.]</i></p>
<p>4. PROMOTES HOMOSEXUAL/ BISEXUAL BEHAVIOR</p>	<p><i>[Please Note: These quotes related to violence and discrimination should not be interpreted as a Family Watch endorsement of violence. Family Watch has a longstanding policy position that we oppose violence and unjust discrimination</i></p>

Normalizes or promotes acceptance or exploration of diverse sexual orientations, sometimes in violation of state education laws. May omit vital health information and/or may provide medically inaccurate information about homosexuality or homosexual sex.

against persons based on their sexual orientation or gender identity. These quotes are here as an example of what children are being taught, and often CSE purposely presents LGBTI issues in the context of LGBTI persons as victims, and then goes on to encourage expression of any sexual orientation or gender identity at any age, regardless of the health consequences.]

“all people should be able to love who they want” (pg. 50)

[Note: While we agree with this statement, this is also a common mantra used to promote same-sex marriage and homosexual sex.]

“Demonstrate respect for diverse practices related to sexuality” (pg. 48, Learning objectives 9-12 years)

[Note: Why would a school want to teach a 9-year-old about diverse sexual practices?]

“Homophobic and transphobic violence is a form of school related gender-based violence” (pg. 23)

[Note: While this can be true, and violence should be prevented, CSE proponents have been known to characterize beliefs, such as marriage between a man and a woman or that biological males cannot become females, as a form of hate or violence.]

“severe restrictions and penalties imposed on LGBTI people” (pg. 25)

[Note: Man/woman marriage laws have been considered to be “severe restrictions” on LGBTI people, and language like this has been used to repeal man/woman marriage laws.]

“discrimination and harm on the basis of their sexual orientation, gender identity or expression” (pg. 25)

[Note: Religious beliefs regarding marriage and sex are often defined as discrimination against LGBT persons.]

“Homophobia and transphobia ... lay the groundwork for more vindictive and violent forms of bullying.” (pg. 25)

[Note: The terms “homophobia” and “transphobia” are often used to shame and stigmatize anyone who does not support controversial transgender ideologies or same-sex marriage.]

“acknowledge that discrimination against people who are attracted to the same sex, or who are believed to be attracted to the same sex is wrong and can have negative effects on these individuals” (pg. 70, Learning objectives—9-12 years)

[Note: Again, the problem arises depending on how discrimination is defined.]

“recall examples of gender bias against men, women and people of diverse sexual orientation and gender identity” (Pg. 50, Learning objectives—15-18+ years)

[Note: This activity is intended to gather support for controversial LGBT rights.]

“Sexuality” encompasses “gender identity; sexual orientation; sexual intimacy; pleasure.” (pg. 17)

[Note: If sexuality encompasses all of these things then comprehensive sexuality education will encompass comprehensive information about sexual pleasure and LGBT sex, etc., which is exactly what it is intended to cover. Is this appropriate for children?]

“diversity in the way young people manage their sexual expression” (pg. 18)

[Note: What is the point of teaching this?]

	<p>“acknowledge that discrimination against people who are attracted to the same sex, or who are believed to be attracted to the same sex is wrong and can have negative effects on these individuals” (pg. 70) <i>[Note: This is a highly manipulative activity designed to generate sympathy for and support for the LGBT sexual rights agenda.]</i></p> <p>“communicate and understand different sexual feelings and talk about sexuality in an appropriate way.” (pg. 70) <i>[Note: Appropriate according to who’s standards? Is it really the role of schools or the government to teach children how to communicate sexual feelings and to talk about sexuality, especially in light of the increasing number of sexual abuse cases occurring in schools with teachers?]</i></p> <p>"Finally, the curriculum should help learners understand how they can play an active role in supporting their peers or partners to access SRH services, for example by reflecting on the barriers that some youth may face when accessing these services because of their sex, sexual orientation, gender identity, geographical location, marital status, disability; and learning about existing legal requirements regarding the provision of care (IPPF, 2017)." (pg. 93) <i>[Note: This of course has Planned Parenthood’s fingerprints as they usually insert into CSE programs they influence, information designed to recruit students to become advocates for ensuring access to SRH services, thereby creating more customers for their business that provides such services.]</i></p>
<p>5. PROMOTES SEXUAL PLEASURE</p> <p><i>Teaches children they are entitled to or have a “right” to sexual pleasure or encourages children to seek out sexual pleasure. Fails to present data on the multiple negative potential outcomes for sexually active children.</i></p>	<p>“Using a human rights based approach within CSE also involves raising awareness among young people, encouraging them to recognize their own rights, acknowledge and respect the rights of others, and advocate for those whose rights are violated. Providing young people with equal access to CSE respects their right to the highest attainable standard of health, including safe, responsible and respectful sexual choices free of coercion and violence, as well as their right to access the information that young people need for effective self-care.” (pg. 16) <i>[Note: While this sounds nice children of minor age don’t have a right to sex.]</i></p> <p>“‘Sexuality’ may thus be understood as a core dimension of being human which includes: the understanding of, and relationship to, the human body; emotional attachment and love; sex; gender; gender identity; sexual orientation; sexual intimacy; pleasure and reproduction. Sexuality is complex and includes biological, social, psychological, spiritual, religious, political, legal, historic, ethical and cultural dimensions that evolve over a lifespan.” (pg. 17) <i>[Note: While sex does and should involve pleasure, is it the role of schools or teachers to teach children about sexual pleasure?]</i></p> <p>Young people living with either mental, physical or emotional disabilities are all sexual beings and have the same right to enjoy their sexuality within the highest attainable standard of health, including pleasurable and safe sexual experiences that are free of coercion and violence; and to access quality sexuality education and SRH services. (pg. 25) <i>[Note: Really? The UN is actually saying that disabled children have a right to pleasurable sexual experiences?]</i></p> <p>“describe male and female responses to sexual stimulation.” (pg. 71, Learning objectives—9-12 years) <i>[Note: Is this appropriate for 9-year-olds?]</i></p>

	<p>“Engaging in sexual behaviours should feel pleasurable.” (pg. 72, Learning objectives 15-18+ years)</p> <p>“summarize key elements of sexual pleasure and responsibility” (pg. 72, Learning objectives 15-18+ years)</p> <p><i>[Note: Why is the UN so obsessed with having youth learn about sexual pleasure? To what end? What are the “key elements of sexual pleasure.”]</i></p> <p>“reflect on how gender norms and stereotypes influence people’s expectations and experience of sexual pleasure” (pg. 72, Learning objectives 15-18+ years)</p> <p>“Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences... (Glossary, pg. 113)</p> <p><i>[Note: This infers that children cannot have sexual health unless they are having pleasurable sexual experiences.]</i></p>
<p>6. PROMOTES SOLO AND/OR MUTUAL MASTURBATION</p> <p><i>While masturbation can be part of normal child development, encourages masturbation at young ages, which may make children more vulnerable to pornography use, sexual addictions or sexual exploitation. May instruct children on how to masturbate. May also encourage children to engage in mutual masturbation.</i></p>	<p>“Many boys and girls begin to masturbate during puberty or sometimes earlier” (pg. 71, Learning objectives 9-12 years)</p> <p>“Masturbation does not cause physical or emotional harm but should be done in private” (pg. 71, Learning objectives 9-12 years)</p>
<p>7. PROMOTES CONDOM USE IN INAPPROPRIATE WAYS</p> <p><i>May inappropriately eroticize condom use (e.g., emphasizing sexual pleasure or "fun" with condoms) or use sexually explicit methods (i.e., penis and vagina models, seductive role plays, etc.) to promote condom use to children.</i></p> <p><i>May provide medically inaccurate information on condom effectiveness and omit or deemphasize failure rates. May</i></p>	<p><i>[Note: A number of CSE programs provide explicit step-by-step condom use instructions using multiple pictures showing a penis in various stages of arousal. One popular CSE program in the U.S. for example, asks children as young as age 12 in mixed groups to put such pictures in order of as part of a game. Other programs, including one used in Guatemala, have boys and girls as young as age 10, in a mixed setting, practice putting condoms on both penis and vagina models.</i></p> <p><i>This is done under the guise of teaching children about “safe sex,” yet it promotes early sexual activity by making condom use, and thus child sex, seem normal for children and gives children a false sense of security regarding the protection condoms provide.</i></p> <p><i>CSE programs also fail to teach youth, and especially girls, is that if they become sexually active at a young age they will statistically be at a much higher risk for depression and suicide among other things. There is no condom that can protect the heart.]</i></p> <p>“describe the steps to using both male and female condoms correctly for reducing the risk of unintended pregnancy” (pg. 74)</p>

<p><i>imply that condoms will provide complete protection against pregnancy or STIs.</i></p>	<p>“demonstrate the steps for correct condom use” (pg. 79)</p> <p>“Condom demonstrations and visits to places where condoms are available are also used to teach negotiation skills.” (pg. 91)</p> <p>“These programmes also help students explore their attitudes towards condoms and modern contraception and help identify perceived barriers to their use. They offer opportunities to discuss ways to overcome these barriers, for example, difficulties obtaining and carrying condoms; possible embarrassment when asking one’s partner to use a condom; or any difficulties actually using a condom.” (pg. 92)</p> <p><i>[Note: What this UNESCO Guidance fails to disclose is the research showing that girls of minor age who are sexually active are at a much higher risk for sexual assault or date rape and, in such situations, it is not even possible for them negotiate “consent” or “safe” or “protected” sex, especially if their partner is older than them.]</i></p>
<p>8. PROMOTES PREMATURE SEXUAL AUTONOMY</p> <p><i>Teaches children they can choose to have sex when they feel they are ready or when they find a trusted partner. Fails to provide data about the well-documented negative consequences of early sexual debut. Fails to encourage sexually active children to return to abstinence.</i></p>	<p>“Young people want and need sexuality and sexual health information as early and comprehensively as possible ...” (Pg. 35, 5.1—Goals, age groups and structure)</p> <p>“CSE promotes the right to choose when and with whom a person will have any form of intimate or sexual relationship ...” (pg. 18)</p> <p>“[R]ecognize that each person’s decision to be sexually active is a personal one, which can change over time and should be respected at all times.” (pg. 71, Learning objectives 12-15 years)</p> <p>“Recognize that informed sexual decision-making (i.e. being knowledgeable and confident in deciding if, when and with whom to become sexually active) is important to their health and well-being” (Pg. 71, Learning objectives 12-15 years)</p> <p>“Non-penetrative sexual behaviours are without risk of unintended pregnancy, offer reduced risk of STIs, including HIV, and can be pleasurable” (Pg. 72, Learning objectives 12-15 years)</p> <p>“Support the right for everyone ... to express their sexual feelings” (Pg. 78, Learning objectives 12-15 years)</p> <p>CSE can “help children and young people form respectful and healthy relationships with ... romantic or sexual partners.” (pg. 17)</p> <p>“aims to equip children and young people ...” to “develop respectful social and sexual relationships” (Pg. 16, 2.1 What is comprehensive sexuality education (CSE)?)</p> <p>“during puberty boys and girls become more aware of their responses to sexual attraction and stimulation” (Pg. 71, Learning objectives 9-12 years)</p>
<p>9. FAILS TO ESTABLISH ABSTINENCE AS THE EXPECTED STANDARD</p> <p><i>Fails to establish abstinence (or a</i></p>	<p>Learning objectives (9-12 years) “Understand that abstinence means choosing not to have sex, or deciding when to start having sex and with whom” (pg. 71)</p> <p>“Abstinence is not a permanent condition in the lives of many young people.” (pg. 18)</p> <p>“Abstinence-only programmes have been found to be ineffective and potentially</p>

<p><i>return to abstinence) as the expected standard for all school-age children. May mention abstinence only in passing. May teach children that all sexual activity—other than “unprotected” vaginal and oral sex—is acceptable, and even healthy. May present abstinence and “protected” sex as equally good options for children.</i></p>	<p>harmful to young people’s sexual and reproductive health and rights.” (pg. 18)</p> <p>“Programmes that promote abstinence-only have been found to be ineffective in delaying sexual initiation, reducing the frequency of sex or reducing the number of sexual partners” (pg. 18)</p> <p>“Abstinence-only programmes are also more likely to contain incomplete or inaccurate information regarding topics such as sexual intercourse, homosexuality, masturbation, abortion, gender roles and expectations, condoms and HIV.” (pg. 91)</p>
<p>10. PROMOTES TRANSGENDER IDEOLOGY</p> <p><i>Promotes affirmation of and/or exploration of diverse gender identities. May teach children they can change their gender or identify as multiple genders, or may present other unscientific and medically inaccurate theories. Fails to teach that most gender-confused children resolve their confusion by adulthood and that extreme gender confusion is a mental health disorder (gender dysphoria) that can be helped with mental health intervention.</i></p>	<p>Gender identity: a person’s deeply felt internal and individual experience of gender, which may or may not correspond with the sex assigned to them at birth. This includes the personal sense of the body which may involve, if freely chosen, modification of bodily appearance or function (by medical, surgical or other means). (Glossary, pg. 112)</p> <p>“explain how someone’s gender identity may not match their biological sex” (pg. 50, Learning objectives (9-12 years)</p> <p>“demonstrate respect for the gender identity of others” (pg. 50, Learning objectives (9-12 years)</p> <p>“define gender and biological sex and describe how they are different” (pg. 50, Learning objectives--5-8 years)</p> <p>“reflect on how they feel about their biological sex and gender” (pg. 50, Learning objectives (5-8 years)</p> <p>“CSE contributes to gender equality by building awareness of the centrality and diversity of gender in people’s lives.” (pg. 17)</p> <p>“define homophobia and transphobia” (pg. 50)</p> <p>“analyze social norms that contribute to homophobia and transphobia and their consequences” (pg. 50)</p> <p>“demonstrate ways to show support for people experiencing homophobia or transphobia” (pg. 50)</p>
<p>11. PROMOTES CONTRACEPTION/ABORTION TO CHILDREN</p> <p><i>Presents abortion as a safe or positive option while omitting data on the many potential negative physical and mental health consequences. May teach</i></p>	<p>“It is essential for young people who plan to have, or are already having sexual intercourse, to receive information about the full range of modern contraception, including the dual protection against pregnancy and STIs provided by condom use.” (pg. 18)</p> <p>“demonstrate confidence in discussing and using different contraceptive methods” (pg. 75)</p> <p>“Many curricula fail to provide adequate information about modern contraception – particularly, but not limited to, emergency contraception and female condoms ...” (pg. 91)</p>

children they have a right to abortion and refer them to abortion providers. May encourage the use of contraceptives, while failing to present failure rates or side effects.

Because of the legal restrictions on access to safe abortion that exist in many parts of the world, **adolescents often resort to unsafe procedures** administered by unskilled providers.” (pg. 23)

“Adolescent girls ... are **generally less knowledgeable about their rights concerning abortion** and post abortion care.” (pg. 23)

“recognize the importance of using contraception correctly, including condoms and **emergency contraception**” (pg. 75)

“explain that **emergency contraception** (where legal and available) can prevent unintended pregnancy” (pg. 75)

“There is a need to **generate evidence to demonstrate ... the provision of youth-friendly SRHR services and commodities.**” (pg. 31)

“**demonstrate ways to access sources of contraception**” (pg. 75, Learning Objectives (12-15 years)

“**identify where to access relevant sexual and reproductive health services**” (pg. 63)

[Note: The following quotes from the appendices of the UNESCO Guidance are from various UN documents and UN Committee Comments and are intended to convince the reader that the UN has established a right to abortion and to comprehensive sexuality education. However, there is not a single UN treaty that even mentions abortion and UN Committee Comments are nonbinding.]

“Provide information about what services are available **to address the health needs of children and young people, especially their SRH needs: effective CSE curricula include information on how to access youth-friendly health services – including, but not limited to counselling on sexuality and relationships; menstrual health management; modern contraception and pregnancy testing; abortion** (where legal); STI and HIV prevention, counselling, testing and treatment; vaccination against HPV; VMMC; and FGM/C prevention and management of consequences, among others.” (pg. 93)

“**Preventing unintended pregnancies and unsafe abortions requires States to adopt legal and policy measures to guarantee all individuals access to affordable, safe and effective contraceptives and comprehensive sexuality education**, including for adolescents, ***liberalize restrictive abortion laws, guarantee women and girls access to safe abortion services*** and quality post-abortion care including by training health care providers, and respect women’s right to make autonomous decisions about their sexual and reproductive health.” (pg. 118)

“The Committee urges States to adopt comprehensive gender and sexuality-sensitive sexual and reproductive health policies for adolescents, emphasizing that unequal access by adolescents to such **information, commodities and services** amounts to discrimination.” (pg. 119)

“The Committee **urges States to decriminalize abortion to ensure that girls have access to safe abortion** and post-abortion services, review legislation with a view to guaranteeing the best interests of pregnant adolescents and ensure that their views

<p>12. PROMOTES PEER-TO-PEER SEX ED OR SEXUAL RIGHTS ADVOCACY</p> <p><i>May train children to teach other children about sex or sexual pleasure, through peer-to-peer initiatives. May recruit children as spokespeople to advocate for controversial sexual rights (including a right to CSE itself) or to promote abortion.</i></p>	<p>are always heard and respected in abortion-related decisions.” (pg. 118)</p> <p><i>[Note: Most CSE programs are designed to recruit students to become advocates for ensuring access to SRH services, thereby creating more customers for business that provides such services.]</i></p> <p>“the curriculum should help learners understand how they can play an active role in supporting their peers or partners to access SRH services ... and learning about existing legal requirements regarding the provision of care (IPPF, 2017).” (pg. 93)</p> <p>“It’s important to assess sources of help and support, including services and media sources, in order to access quality information and services ... list sources of help and support for sexual and reproductive health and rights issues; understand that there are places where people can access support for sexual and reproductive health (e.g., counseling, testing and treatment for STIs/HIV; services for modern contraception (pg. 63, Learning objectives—12-15 years)</p> <p>“right to access the [CSE] information” (pg. 16)</p> <p>“Using a human rights based approach within CSE also involves raising awareness among young people, encouraging them to recognize their own rights, acknowledge and respect the rights of others, and advocate for those whose rights are violated. Providing young people with equal access to CSE respects their right to the highest attainable standard of health, including safe, responsible and respectful sexual choices...” (pg. 16)</p> <p>“Excluding complex issues from CSE renders young people vulnerable and limits their agency in their own sexual practices and relationships.” (pg. 18)</p> <p>“Everyone has a responsibility to advocate for gender equality and speak out against human rights violations such as sexual abuse, harmful practices and other forms of GBV ... analyze examples of successful advocacy efforts to promote gender equality and reduce GBV ... appreciate the importance of speaking out against human rights violations and gender inequality ... (pg. 52, Learning objectives 15-18+)</p> <p>Additionally, CSE programmes empower young people as global citizens that are able to advocate for their own rights. (pg. 31)</p>
<p>13. UNDERMINES TRADITIONAL VALUES AND RELIGIOUS BELIEFS</p> <p><i>May encourage children to question their parents’ beliefs or their cultural or religious values regarding early sex, sexual orientation or gender identity.</i></p>	<p><i>[Note: The following two manipulative statements are just cleverly disguised justifications for promoting controversial sexual behaviors to children, despite potential objections from parents or the community.]</i></p> <p>“The expectations that govern sexual behaviour differ widely across and within cultures. Certain behaviours are seen as acceptable and desirable, while others are considered unacceptable. This does not mean that these behaviours do not occur, or that they should be excluded from discussion within the context of sexuality education.” (pg. 17)</p> <p>“The Guidance highlights the importance of addressing the reality and impact of sexuality on young people’s lives, including some aspects that may be sensitive or difficult to discuss in certain communities. Using scientific evidence and rooting</p>

	<p>the content in gender equality and human rights standards and frameworks helps address sensitive issues.” (pg. 18)</p> <p>[Note: Go to www.SexEdReport.org to see how UNESCO has skewed the “scientific evidence” regarding sexuality education to justify their radical promotion of controversial and high risk sexual behaviors as human rights.]</p> <p>“As early and comprehensively as possible, learners will be able to express respect for different kinds of families ...” (Pg. 38, Learning objectives 5-8 years)</p> <p>“expectations that govern sexual behaviour differ widely” (Pg. 17)</p> <p>“... CSE includes ongoing discussions about social and cultural factors ... such as gender and power inequalities ... sexual orientation and gender identity.” (Pg. 18)</p> <p>“CSE covers the full range of topics ... including those that may be challenging in some social and cultural contexts.” (Pg. 16)</p> <p>“respect, acceptance, tolerance and empathy, regardless of ... sexual orientation, gender identity or expression” (Pg. 17)</p> <p>“explore values, attitudes and social and cultural norms and rights impacting sexual and social relationships” (Pg. 34)</p> <p>“Certain behaviours are seen as acceptable and desirable, while others are considered unacceptable. This does not mean ... they should be excluded from discussion within the context of sexuality education.” (pg. 17)</p> <p>“compare and contrast ways that ... religion influence[s] how society views sex, gender and reproduction” (p. 65, Learning objectives 12-15 years)</p> <p>“identify cultural, religious or social beliefs and practices related to sexuality that have changed over time” (pg. 48, Learning objectives 9-12 years)</p> <p>“question social and cultural norms that impact sexual behaviour in society” (pg. 48, Learning objectives 12-15 years)</p> <p>“In addition, the sexual and reproductive health needs and concerns of children and young people, as well as the age of sexual debut, vary considerably within and across regions. Learning objectives should therefore be adjusted to learners’ realities and based on available data and evidence, rather than on personal discomfort or perceived opposition to discussion of sexuality with children or young people.” (pg. 35)</p>
<p>14. UNDERMINES PARENTS OR PARENTAL RIGHTS</p> <p><i>May instruct children they have rights to confidentiality and privacy from their parents. May teach children about accessing</i></p>	<p>“differentiate between values that they hold, and that their parents/guardians hold about sexuality” (Pg. 46, Learning objectives 15-18+ years)</p> <p>“acknowledge that some of their values may be different from their parents/guardians” (Pg. 46, Learning objectives 15-18+ years)</p> <p>“Ensure confidentiality, privacy and a safe environment for all children and young people: considering that sexuality is a subject that can arouse strong emotions,</p>

<p><i>sexual commodities or services, including abortion, without parental consent. May instruct children not to tell their parents what they are being taught about sex in school.</i></p>	<p>reactions and feelings of anxiety, embarrassment and vulnerability, among others, it is important for all children and young people to have a confidential, private and safe environment to share their questions, learn and participate without feeling singled out. This sense of safety can be achieved by ensuring that teachers are well-trained to handle difficult questions and testimonials, and by encouraging smaller class sizes or small-group discussions.” (pg. 96)</p> <p><i>[Note: Planned Parenthood, one of the largest providers of CSE and SRH services in the world, and a major partner of UN agencies, is cited in the UNESCO Guidance 17 times showing their heavy role in the creation of this Guidance. Their philosophy is that children have a right to confidentiality and privacy, meaning a right to CSE information and sexual health related services, including abortion, without parental knowledge or consent.</i></p>
<p>15. REFERS CHILDREN TO HARMFUL RESOURCES</p> <p><i>Refers children to harmful websites, materials or outside entities. May also specifically refer children to Planned Parenthood or their affiliates or partners for their lucrative services or commodities (i.e., sexual counseling, condoms, contraceptives, gender hormones, STI testing and treatment, abortions, etc.)</i></p> <p><i>Please Note: A conflict of interest exists whenever an entity that profits from sexualizing children is involved in creating or implementing sex education programs.</i></p> <p><i>(For more information on how Planned Parenthood sexualizes children for profit see www.WaronChildren.org and www.InvestigateIPPF.org)</i></p>	<p><i>[Note: Many CSE programs are cleverly disguised marketing pieces for businesses like Planned Parenthood and their affiliates that profit from their multiple services for sexually active children, including condoms, contraceptives, sexual counseling, STD testing, treatment and care, abortions and even transgender hormones and counseling. First, they sexualize the children and then they refer them to their clinics or programs to purchase their services. This is why, CSE programs almost always end with activities asking children to find clinics or services or sexual commodities in their community.]</i></p> <p>“Learners will be able to: ... access valid and reliable community resources to support themselves or a family member needing assistance” (pg. 39)</p> <p>“Young people should also be provided with information on, and referrals to, comprehensive youth-friendly SRH services” (pg. 39)</p> <p>“where to obtain and how to use a range of modern contraceptive methods, including condoms and emergency contraception, and where to go for pregnancy or HIV testing services” (pg. 22)</p> <p>“Learners will be able to: list sources of help and support for sexual and reproductive health and rights issues; understand that there are places where people can access support for sexual and reproductive health” (pg. 63)</p> <p>REFERENCES</p> <p>Among other references, the UNESCO Guidance refers children to the following controversial sexual and abortion rights advocacy groups and/or service providers:</p> <p>Advocates for Youth, Answer, GLSEN, the Human Rights Campaign, Planned Parenthood Federation of America and the Sexuality Information and Education Council of the U.S. 2015. <i>A Call to Action: LGBTQ youth need inclusive sex education</i>. http://www.advocatesforyouth.org/storage/advfy/documents/a%20call%20to%20action%20lgbtq%20youth%20need%20inclusive%20sex%20education%20final.pdf (Accessed 30 April 2017). (pg. 102)</p> <p>International Planned Parenthood Federation, <i>Everyone’s Right to Know: Delivering comprehensive sexuality education for all young people</i>. (pg. 104)</p> <p>International Planned Parenthood Federation (IPPF). 2015. <i>Teaching about Consent and Healthy Boundaries: A guide for educators</i> (pg. 104)</p>

	International Planned Parenthood Federation (IPPF) and Coram Children’s Legal Centre. 2014. Inception Report: Qualitative research on legal barriers to young people’s access to sexual and reproductive health services. (pg. 104)
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For the complete text of the *Revised International Technical Guidance on Sexuality Education: An Evidence-Informed Approach* see: <http://unesdoc.unesco.org/images/0026/002607/260770e.pdf>

To learn more about CSE or to see analyses of other CSE materials, visit www.stopcse.org.