

# **Comprehensive Sexuality Education in Arizona Schools**

## **Evidence that School-Based Comprehensive Sex Education is Not Working**

# **SB1346 Passed – Now What**

- How Did We Get Here?
  - Alfred Kinsey and Kinsey Institute
    - Planned Parenthood
    - Kevin Jennings/GLSEN (Recently adding AZTYPO)
- Comprehensive Sexual Education (CSE) – Programs in AZ
- Puberty is Not a Disease
- CDC Stats on STD's and HIV/AIDS

HOW DID WE GET HERE?

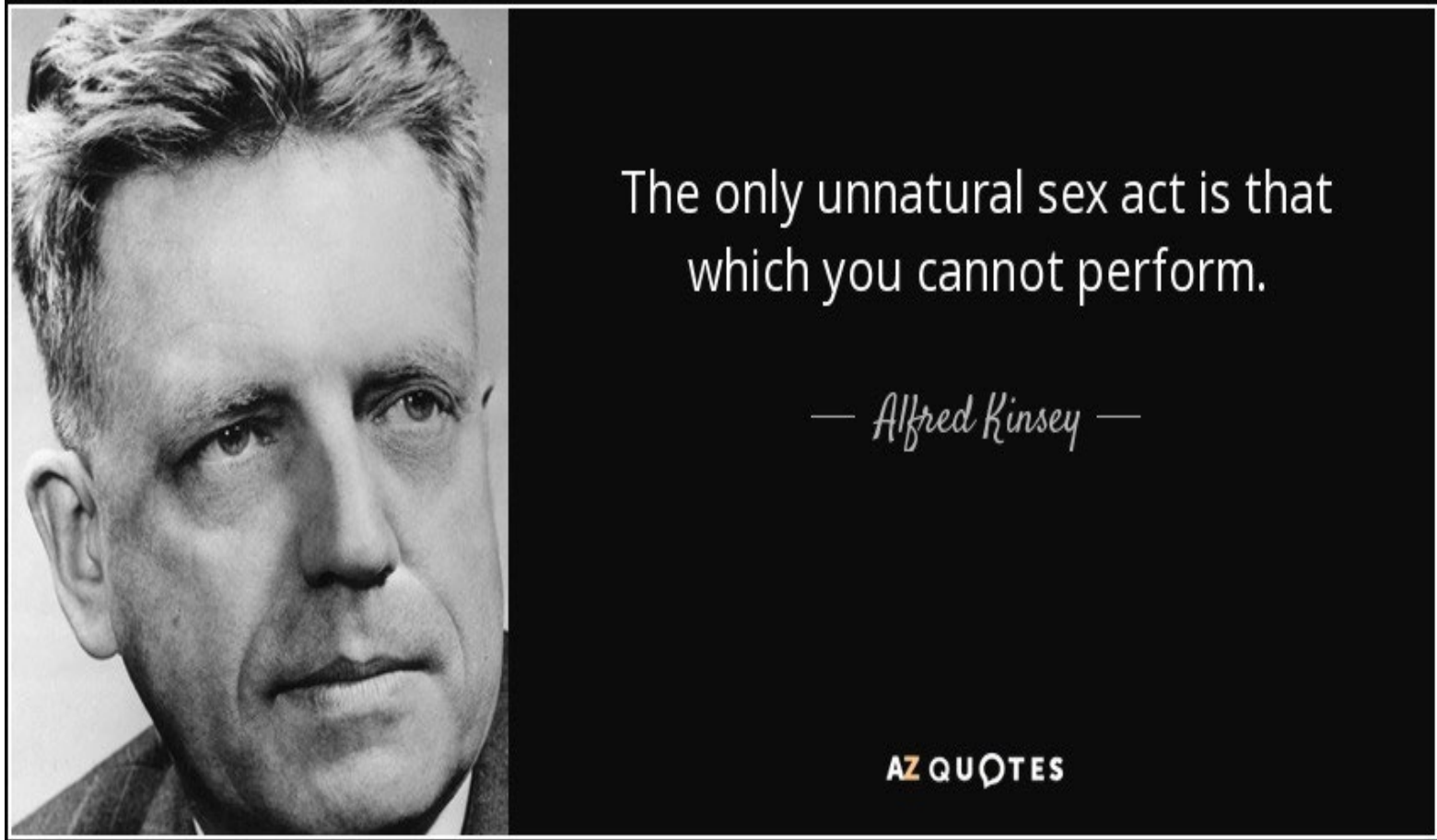
It all started with Alfred Kinsey

# Now We Fight the Battle in the Schools – And Here's What and Who We Are Facing

ALFRED KINSEY - (Father of Sex Ed)

Alfred Kinsey, the **Kinsey Institute for Research in Sex, Gender and Reproduction**, resulted “sex education” and has been allowed to invade our children’s education.

**SIECUS** was launched by – The Kinsey Institute and one of its first leaders was previously the medical director of – **Planned Parenthood**



The obscene materials which passed for “sex education” was a direct result of Kinsey’s “experiments” and has been created and effectively peddled for decades by Planned Parenthood, UNESCO (United Nations Educational, Scientific and Cultural Organization), SIECUS (Sexuality Information and Education Council of the U.S) and their ilk to our schools, our children and children worldwide, for that matter.



# Kinsey was infamous for his research on children using pedophiles to “perform” the research

A 4 year old child should never be tortured for 24 hours and forced to have 26 orgasms

“Descriptions supplied by several subjects indicate that the **legs often become rigid**, with muscles knotted and toes pointed, **muscles and abdomen contracted** and hard, shoulder and neck stiff and often bent forward, **breath held or grasping, eyes staring or tightly closed**”

????

AGE	NO. OF ORGASMS	TIME INVOLVED	AGE	NO. OF ORGASMS	TIME INVOLVED
5 mon.	3	?	11 yr.	11	1 hr.
11 mon.	10	1 hr.	11 yr.	19	1 hr.
11 mon.	14	38 min.	12 yr.	7	3 hr.
2 yr.	{ 7	9 min.	12 yr.	{ 3	3 min.
2½ yr.	{ 11	65 min.	12 yr.	{ 9	2 hr.
4 yr.	4	2 min.	12 yr.	12	2 hr.
4 yr.	6	5 min.	12 yr.	15	1 hr.
4 yr.	17	10 hr.	13 yr.	7	24 min.
4 yr.	26	24 hr.	13 yr.	8	2½ hr.
7 yr.	7	3 hr.	13 yr.	9	8 hr.
8 yr.	8	2 hr.		{ 3	70 sec.
9 yr.	7	68 min.	13 yr.	{ 11	8 hr.
10 yr.	9	52 min.		{ 26	24 hr.
10 yr.	14	24 hr.	14 yr.	11	4 hr.

Table 34. Examples of multiple orgasm in pre-adolescent males

Some instances of higher frequencies.

# KEVIN JENNINGS – GLSEN (Gay Lesbian and Straight Education Network)



*“In Massachusetts the effective framing of this issue was the key to the success of the Governor’s Commission on Gay and Lesbian Youth. We Immediately seized upon the opponent’s calling card--- safety--- and explained how homophobia Represents a threat to student’s safety by creating a Climate where violence, name-calling, health problems and suicide are common.”*

**AND NO ONE PUSHED BACK!**

In the mid-1990’s Jennings was successful in **“re-framing the issue”**

[https://www.massresistance.org/docs/issues/gay\\_strategies/framing\\_the\\_issue.html](https://www.massresistance.org/docs/issues/gay_strategies/framing_the_issue.html)



KEVIN JENNINGS – GLSEN

Life became a little more difficult  
after “Fistgate” Conferences

**Children as young as 12** given  
graphic instruction in  
homosexual acts **by State**

**Employees** (Updated Oct 19, 2012 –  
*Massachusetts News, May 2000 Special*))

School buses were used to  
take the children to the  
conferences.

<https://www.massresistance.org/docs/issues/fistgate/index.html>

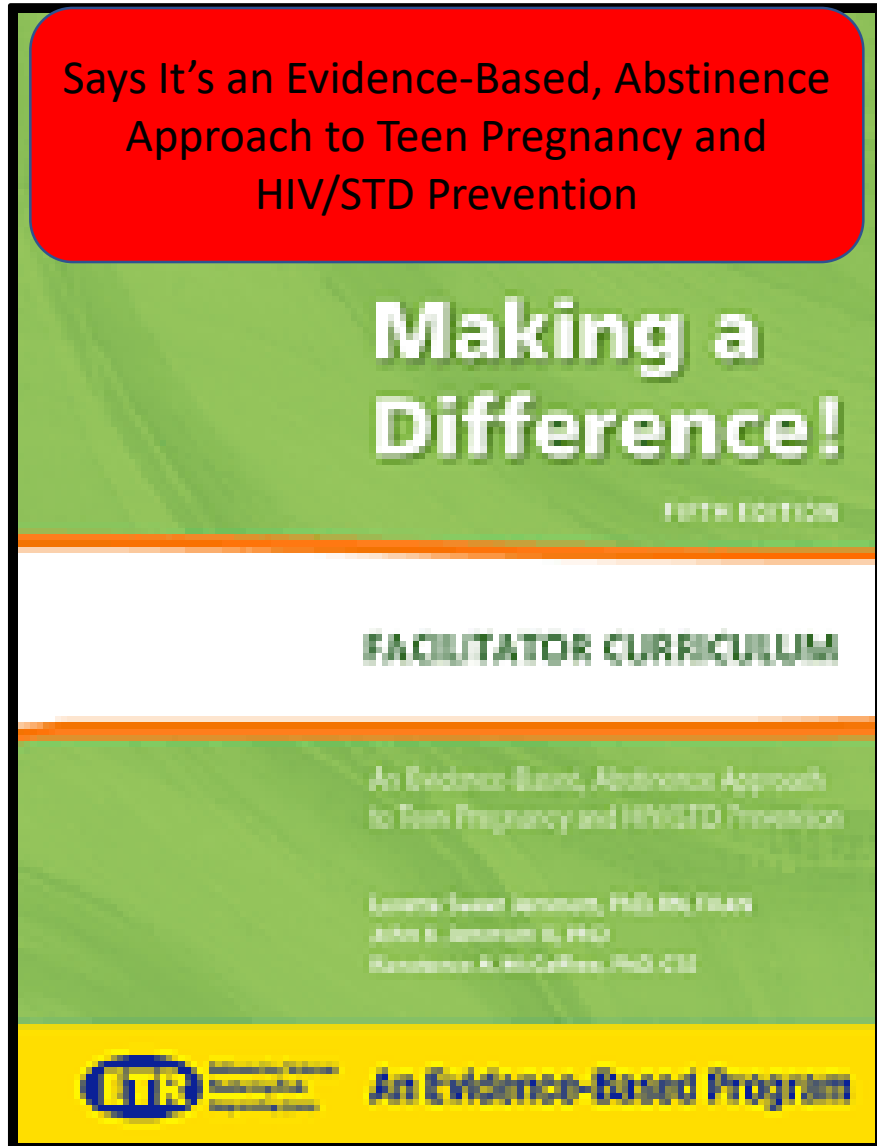


# **FEDERALLY FUNDED SEX ED PROGRAMS IN ARIZONA**



# Teen Pregnancy Prevention Program - Child & Family Resources

## Title V – AZ Dept. of Health – **Targets Ages 10-14**



The publisher's website states, "**Making a Difference lessons do not include information on condoms** or other forms of birth control." but there is ample evidence to show that **this is a false statement.**

**CSE HARMFUL ELEMENTS SCORE = 15 OUT OF 15**

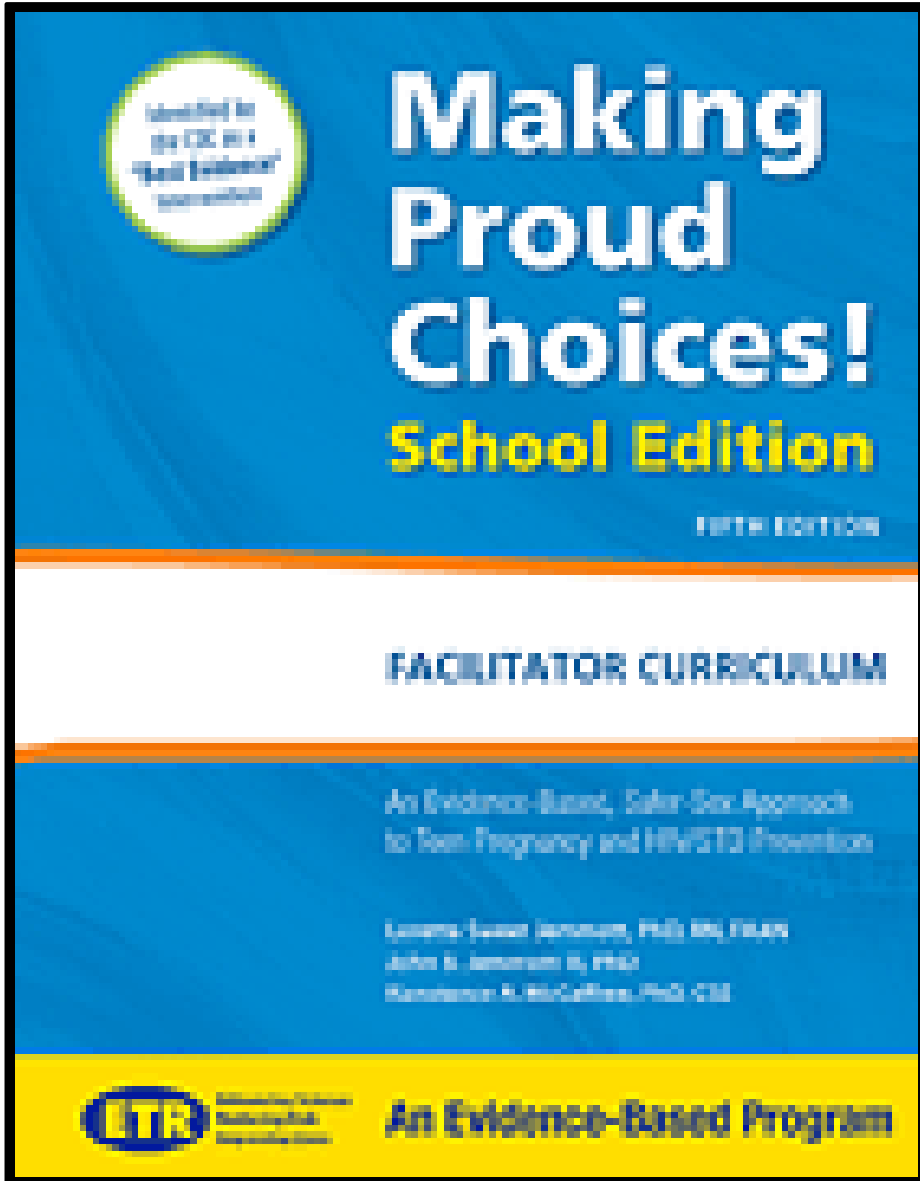
**SEXUALIZES CHILDREN** Normalizes child sex or desensitizes children to sexual things. May give examples of children having sex or imply many of their peers are sexually active.

**TEACHES CHILDREN TO CONSENT TO SEX**

**PROMOTES ANAL AND ORAL SEX**

# Teen Pregnancy Prevention Program - TPPP Touchstone Behavioral Health

## Target Age Group 12-18



*Making Proud Choices* is essentially a **how-to manual for sexual activity**. It implies that many, if not most, teenagers are sexually active and teaches them how to negotiate condom use and obtain consent for sex.

**CSE HARMFUL ELEMENTS SCORE = 15 OUT OF 15**

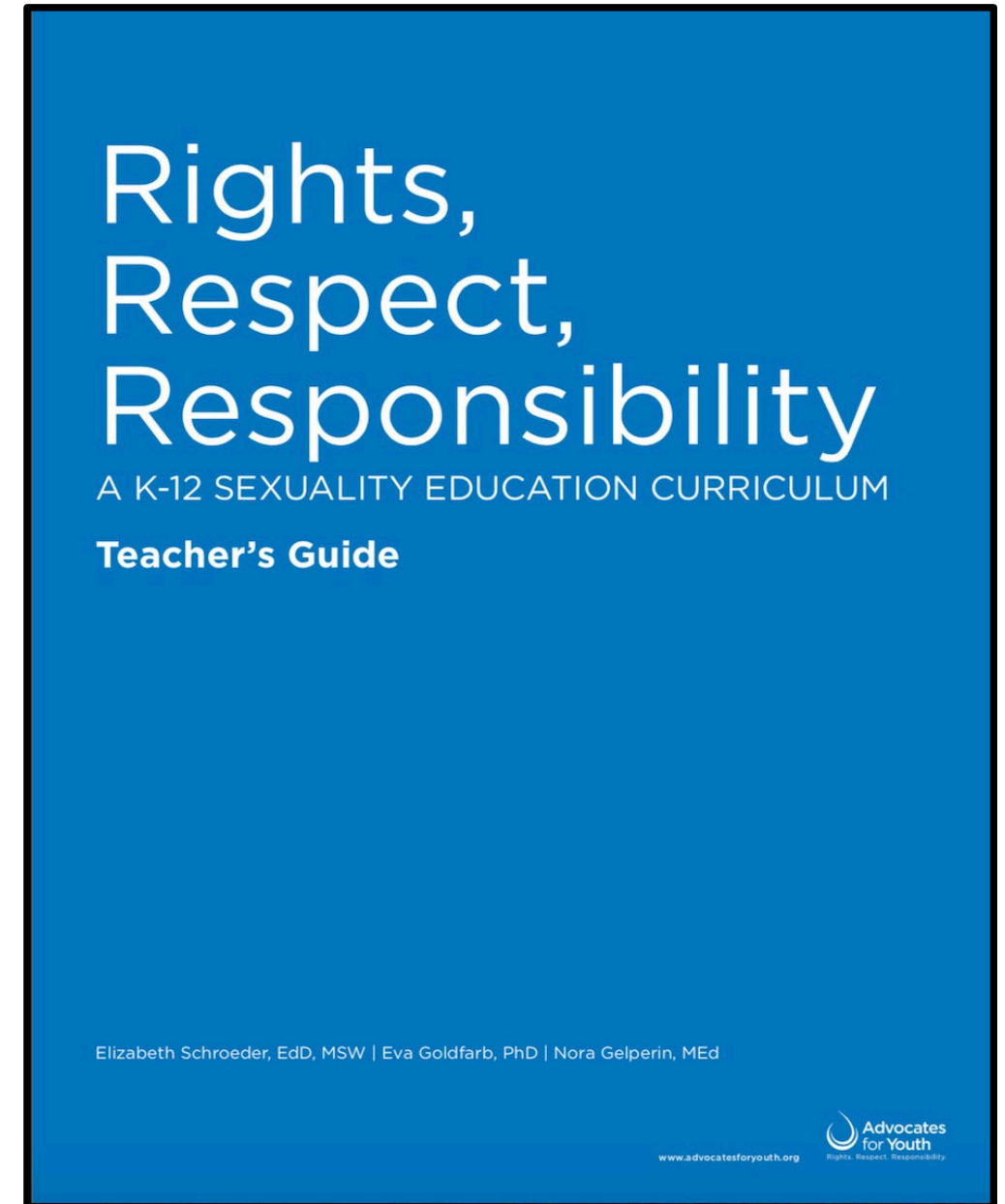
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**TEACHES CHILDREN TO CONSENT TO SEX**

**PROMOTES ANAL AND ORAL SEX**

# Planned Parenthood –GLSEN – UNESCO - Target Age Group: 5-18

- This is one of the most explicit curricula available. It is a **K- 12 program**, it begins at a young age to sexualize children and normalize sexual behavior.
- It uses explicit methods to teach about condoms. **It teaches youth about sexual pleasure, masturbation, and anal and oral sex.**
- It promotes abortion as a perfectly acceptable response to a pregnancy. *Rights, Respect, Responsibility* **promotes transgender ideology** by using terms such as 'gender assigned at birth' and 'person with a uterus'. This program also teaches students how to advocate in their schools regarding sexual issues.





Human sexuality is an objective biological binary trait: “XY” and “XX” are genetic markers of male and female, respectively – not genetic markers of a disorder. Individuals with DSDs (also referred to as “intersex”) do not constitute a third sex.<sup>1</sup>

**Puberty is not a disease and puberty-blocking hormones can be dangerous.** Reversible or not, puberty- blocking hormones induce a state of disease – the absence of puberty – and inhibit growth and fertility in a previously biologically healthy child.<sup>6</sup>

**According to the DSM-5, as many as 98% of gender confused boys and 88% of gender confused girls eventually accept their biological sex after naturally passing through puberty.**<sup>5</sup>

**Rates of suicide are nearly twenty times greater among adults who use cross-sex hormones and undergo sex reassignment surgery, even in Sweden which is among the most LGBTQ – affirming countries.**<sup>12</sup>

<https://www.acpeds.org/the-college-speaks/position-statements/gender-ideology-harms-children>



What Do We Know About These Programs?

Comprehensive Sex Education Program Have  
an 85% failure Rate in U.S. Schools



**The Institute for Research and Evaluation conducted three authoritative research reviews of U.S. sex education effectiveness:**

- Two sponsored by the U.S. federal government (the **Teen Pregnancy Prevention** evidence review and a meta-analysis study supported by the **Centers for Disease Control and Prevention**)
- One conducted for the **United Nations**.
- These reviews have screened several hundred sex education studies for **research quality** and **reported results** for the studies of adequate rigor.

# 77 U.S. School-Based Sex Education Programs Were Evaluated

**Outcomes** were determined according to effectiveness derived from the field of prevention research

**Sustained effects** (detected at least 12 months after the program) on protective indicators (abstinence, condom use, pregnancy, and STDs)

For the **main (intended) teen population, without producing other negative effects**, and based on the preponderance of research evidence.

# Results

60 school-based CSE's were studied and **no evidence of effectiveness** at **producing sustained reductions in teen pregnancy** (0 programs) or **STDs** (0 programs) was found.

We found **no evidence of effectiveness** for CSE's purported **dual benefit**—there were no sustained increases in **both teen abstinence and condom use (by sexually active teens)** within the same target population.

CSE failure rates at producing sustained effects on targeted outcomes included **88% failure to delay teen sexual initiation** and **94% failure to reduce unprotected sex**.

**Seven out of 60** studies (or 12%) of school-based CSE programs found **significant negative effects** on adolescent sexual health and/ or risk behavior

17 studies of school-based abstinence education (AE) were studied (does not promote condom use). **7 programs produced sustained delays in teen sexual initiation**. 1 found a negative effect. 9 studies provided strong evidence that AE **does not reduce** condom use.



# Conclusions and Recommendations

*“When considering programs in U.S. school settings, measured by credible standards of effectiveness, the **claims that CSE has been proven effective and AE is ineffective were not supported by this combined database containing some of the strongest and most current out- come studies of U.S. sex education, as identified by three authoritative sources.***

*The research evidence indicates that **CSE has shown far more evidence of failure than success in U.S. school classrooms and has produced a concerning number of negative outcomes.”***

**The Institute for Research and Evaluation recommend policymakers abandon plans for implementation of CSE in U.S. schools and pursue alternative strategies to reduce teen pregnancy and STDs.**



# Institute for Research and Evaluation 2019 Findings

PROGRAM AND STUDY				STUDY OUTCOMES									
PROGRAM NAME	STUDY 1st AUTHOR & YEAR	Database	Independent Evaluator?	Negative Effect	Post-Program Effects on Most-Protective Indicators				Post-Program Effects on Less-Protective Indicators				Dual Benefit 12mo. Post-Program
					Sexual Initiation	Consistent Condom Use	Pregnancy	STDs	Condom Frequency	Frequ/Recent Sex	Unprotected Sex	# Sex Partners	
Aban Aya (Classroom Version Only)	Flay, 2004	TPP	No	No	NM	NM	NM	NM	NS	NS	NM	NM	NM
AIDS Prevention Program	Siegel, 1995	CDC/UN	?	No	NM	NM	NM	NM	NS	NM	NM	NS	NM
All4You	Coyle, 2006	TPP/CDC/UN	No	No	NS	NM	NS	NM	6 months Only	6 months Only	6 months Only	NS	NS
All4You2	Coyle, 2013	TPP	No	No	NS	NM	NM	NM	NS	NS	NS	NM	NS
All4You2 (Classroom Version Only)	Coyle, 2013	TPP	No	No	NS	NM	NM	NM	NS	NS	4 months Only	NM	NS
Be Proud Be Responsible (held on Saturday)	Jemmott, 1999	TPP/CDC/UN	No	No	NM	NM	NM	NM	NM	NS	6 months	NS	NM
Be Proud Be Responsible (held on a school day)	Borawski, 2009	TPP	Yes	No	NS	NS	NM	NM	NM	NS	NS	NM	NM
[Blake] HIV/STD Prevention Curriculum	Blake, 2000 (unpub.)	UN	Yes	No	NS	NS	NM	NM	NM	NS	NM	NM	NM
[Boyer] HIV/STD Prevention Curriculum	Boyer, 1997	CDC/UN	No	No	NM	NM	NM	NM	NS	NM	NM	NS	NM
Crossroads Program (adaptation BPBR)	Slater & Mitschke, 2015	TPP	?	No	NM	NM	NS	NM	NM	NM	6 months Only	NM	NM
[Cuideate] (held on Saturday)	Villareal, 2006	TPP/CDC/UN	No	No	NS	12 months	NM	NM	NS	12 months	12 months	12 months	NS
[Cuideate] (held on a school day)	Kelsey, 2016; Abt Assoc, 2015	TPP	Yes	3 Negative Effects	Oral Sex-Subgroup	NM	NS	NS	NS	Recent Sex-Subgroup	Oral Sex-Subgroup	NM	NM
Draw the Line, Respect the Line	Coyle, 2004	TPP/CDC/UN	No	No	12 mo-Subgroup O	NM	NM	NM	NS	NS	NS	NS	NS
Focus on Kids/West Virginia	Stanton, 2005	CDC/UN	No	No	NM	NM	NM	NM	NS	NS	NM	NM	NM
Gender Matters	Smith, Kim, et al., 2015	TPP	No	No	NS	NM	NM	NM	NS	NS	NS	NM	NM
Get Real About AIDS	Main, 1994	CDC/UN	?	No	NS	NM	NM	NM	6 months	NS	NM	6 months	NM
Get Real - 7th & 8th Grade Only	Grossman, 2014	TPP	?	No	<9 months	NM	NM	NM	NM	NS	NM	NM	NM
H.A.R.T. (adaptation of B.A.R.T.)	Boston Medical Center	TPP	?	No	NS	NM	NM	NM	NM	NS	NS	NM	NM
Health Teacher	Mathematica Policy Research	TPP	No	No	NS	NM	NM	NM	NM	NS	NM	NM	NM
Healthy & Alive!	Middlestadt, [Unpub]	UN	No	No	NS	NS	NM	NM	NM	NS	NM	No	NM
Healthy for Life-Version 1 (Age-based)	Moberg, 1998/2000	CDC	?	No	NS	NS	NM	NM	NM	NS	NM	NM	NS
Healthy for Life-Version 2 (7th Gr.Intensive)	Moberg, 1998/2000	CDC	?	Recent Sex	NS	NS	NM	NM	Recent Sex-Main Effect	NM	NM	NM	NS
Healthy Oakland Teens	Ekstrand, 1996(AIDSConf)	UN	?	No	8 to 11 months	NM	NM	NM	NM	NM	NM	NM	NM
HIV Prevention Interventions	Fisher, 2002	CDC/UN	No	No	NS	NM	NM	NM	12 months	NM	NM	NM	NS
It's Your Game: Keep It Real/Risk Reduction	Tortolero, 2010	TPP	No	No	12 months	NM	NM	NM	NS	12 months	NM	NS	NS
IVG - Risk Reduction	Markham, 2012/2014	TPP	No	#Sex Partners	10 months Only	10 months Only	NM	NM	NM	10 months O	10 months O	Main Effect	NS
IVG - Risk Reduction (South Carolina)	Potter, 2016a	TPP	Yes	Sexual Initiation	Main Effect	NM	NM	NM	NM	NS	NS	NM	NS
IVG - Risk Reduction (Texas)	Coyle, 2016b	TPP	Yes	No	NS	NM	NM	NM	NM	NS	NM	NM	NM
Making Proud Choices! (held on Saturday)	Jemmott, 1998	TPP/CDC/UN	No	No	NS	3 months Only	NM	NM	3, 6, 12 months	12mo-Subgroup	12mo-Subgroup	NM	NS
Need To Know	UofTxHlthSciCtrSanAntonio	TPP	?	No	NS	NM	NM	NM	NM	NM	NM	NM	NM
Positive Prevention	LaChausse, 2006	CDC/UN	Yes	No	6 months	NM	NM	NM	NS	6 months	NM	NM	NM
Positive Prevention PLUS	LaChausse, 2015/2016	TPP	Yes	No	6 months	NM	NS	NM	NM	NS	6 months	NM	NM
Postponing Sexual Involvement (PSI)	Howard&McCabe, 1990	UN	No	No	12 months	NM	NM	NM	NM	NS	NM	NM	NM
Postponing Sexual Involvement	Aarons, 2000	UN	Yes	No	NS	NM	NM	NM	NM	NS	NM	NM	NM
PSI & HumanSexuality-adapted	Little & Rankin, unpub.	UN	?	No	NS	NM	NM	NM	NM	NS	NM	NS	NM
Project IMPACT Inwood House	Lieberman, 2000	CDC/UN	No	No	NS	NM	NS	NM	NS	NM	NM	NM	NS
Project LIGHT	Lightfoot, 2007	CDC	No	No	NM	NM	NM	NM	NS	3 months	NS	3 months	NM
Project SNAP	Kirby, 1997	CDC/UN	Yes	Contraception	NS	NS	NS	NS	Contraception-Main Effect	NS	NM	NM	NS
PromotingHealthAmongTeens!/CSE (on Saturday)	Jemmott, 2010	TPP	No	No	NS	NS	NM	NM	NM	NS	NS	24 months	NS
Reach for Health	O'Donnell, 1999	CDC	?	No	NS	NM	NM	NM	NM	NS	NM	NM	NM
Reducing the Risk (RTR)	Kirby, 1991	TPP/UN	No	No	NS	NM	NS	NM	NS	NS	NS	NM	NM
RTR	Barth, 1992	TPP/CDC	No	No	NS	NM	NS	NM	NS	NS	NM	NM	NM
RTR	Hubbard, 1998	CDC/UN	Yes	No	18months	NM	NM	NM	NM	NS	NM	NM	NM
RTR	Kelsey, 2016; Abt Assoc, 2018	TPP	Yes	Recent&OralSex	Oral Sex-Subgroup	NM	24mo-Subgroup O	NS	NM	Recent Sex-Subgroup	NS	NM	NS
RTR	Zimmerman, 2008a	TPP/UN	No	No	NS	NM	NM	NM	NS	NM	NM	NM	NM
Reducing the Risk (RTR)-modified1	Zimmerman, 2008b	TPP/UN	No	No	NS	NM	NM	NM	NS	NM	NM	NM	NM
RTR	Reyna & Mills, 2014a	TPP	Yes	No	NS	NM	NM	NM	NS	NS	NS	NS	NS
Reducing the Risk (RTR)-modified2	Reyna & Mills, 2014b	TPP	No	No	12 months	NM	NM	NM	NS	NM	NS	12 months	NS
Rochester AIDS Prevention Project(RAPP)	Siegel, 2001	CDC/UN	?	No	NS	NM	NM	NM	NM	NM	NM	NM	NM
Rochester AIDS Prevention Project(RAPP)	Aten, 2002	CDC	?	No	NS	NM	NM	NM	NM	NM	NM	NM	NM
Safer Choices	Coyle, 2001	TPP/CDC/UN	No	No	NS	NM	NM	NM	12 months	NS	NM	NS	NS
Teen Outreach Program (TOP)	Allen, 1997	TPP	Yes	No	NM	NM	at Prog End-Subgrp O	NM	NM	NM	NM	NM	NM
TOP (Florida)	Daley, 2015	TPP	Yes	No	at Prog End, not 10mo	NM	at Prog End, not 10mo	NM	NM	NM	NM	NM	NM
TOP (Hennepin, MN)	Francis, 2015	TPP	Yes	No	NS	NM	NM	NM	NS	NS	NS	NM	NM
TOP (Chicago)	Seshadri, 2015	TPP	Yes	No	NM	NM	NM	NM	NS	NS	NS	NM	NM
TOP (GNWPP)	Philliber, 2016	TPP	Yes	Pregnancy	NM	NM	Subgroup	NM	NS	NS	NM	NM	NM
TOP (NY&LA, held on Saturday)	Robinson, 2016	TPP	Yes	No	NS	NM	NM	NM	NM	NS	NS	NM	NM
[Walter&Vaughn]AIDS Prevention	Walter & Vaughn, 1993	CDC/UN	?	No	NS	3 months	NM	NS	NM	NM	NM	3 months	NM
Wise Guys	Gottsegen, 2001	UN	No	No	NS	NM	NM	NM	NM	NM	NM	NM	NM
Youth AIDS Prevention Project (YAPP)	Levy, 1995	CDC/UN	No	No	NS	NM	NM	NM	NS	NS	NM	NS	NS

NM = Did not measure this outcome; NS = The study measured this outcome but the effect was not statistically significant at p<.05; F = Females; M = Males; O = Only; at Prog. End= measured at the program's endpoint

Green = Evidence of Program Effectiveness: A significant effect on a key protective indicator, at least 12 months post-program, on the intended target population (not just a subgroup), without other negative effects.

Blue = Evidence of Program Potential; Brown = Evidence of Program Failure (measured this outcome but failed to find a significant effect); Red = Evidence of Negative Program Impact; Grey = Program produced both positive and negative effects

TPP/CDC/UN = U.S. Teen Pregnancy Prevention program/U.S. Centers for Disease Control & Prevention/UNESCO

**Have These Programs  
Harmed Arizona Children**

# **HIV/AIDS and STD's In Arizona**



# **In 2017, there were 768 new HIV cases diagnosed in Arizona**

There were two cases of incident HIV/AIDS infection among **children under age 13** in Arizona during 2017.

White Non-Hispanic and Hispanic racial/ethnic groups made up **74.4% of incident cases in 2017**

Non-Hispanic Blacks **increased from 22 per 100,000 in 2010 to 36.3 per 100,000 in 2017** and Non-Hispanic Black females had a rate almost **4X higher than any other female group**

Men who have sex with men (MSM) accounted for the **largest proportion of incident HIV/AIDS cases in Arizona (61.5%) in 2017**. MSM accounted for **71.8% of all new HIV infections for males**.

## **Fast Facts**

**18,190** Arizonans  
have HIV/AIDS

**768** were newly  
infected in 2017

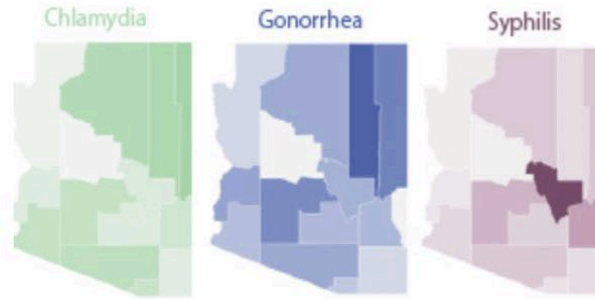
**177** people with  
HIV/AIDS died in 2017

# Arizona 2017 Sexually Transmitted Diseases

Adolescents and young adults represent an important population as case counts and rates for **STDs among those aged 10-24 are the highest of all age groups in Arizona (41% of gonorrhea cases and 61% of chlamydia cases)**

Untreated syphilis can damage your brain, nerves, eyes, blood vessels, liver, bones, and joints and **Arizona is currently in a Statewide outbreak of syphilis at 269% increase since 2015.**

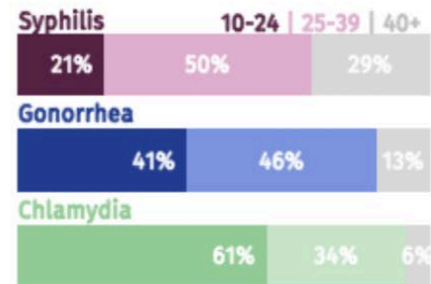
Arizona STD Rates, by Disease and County, 2017



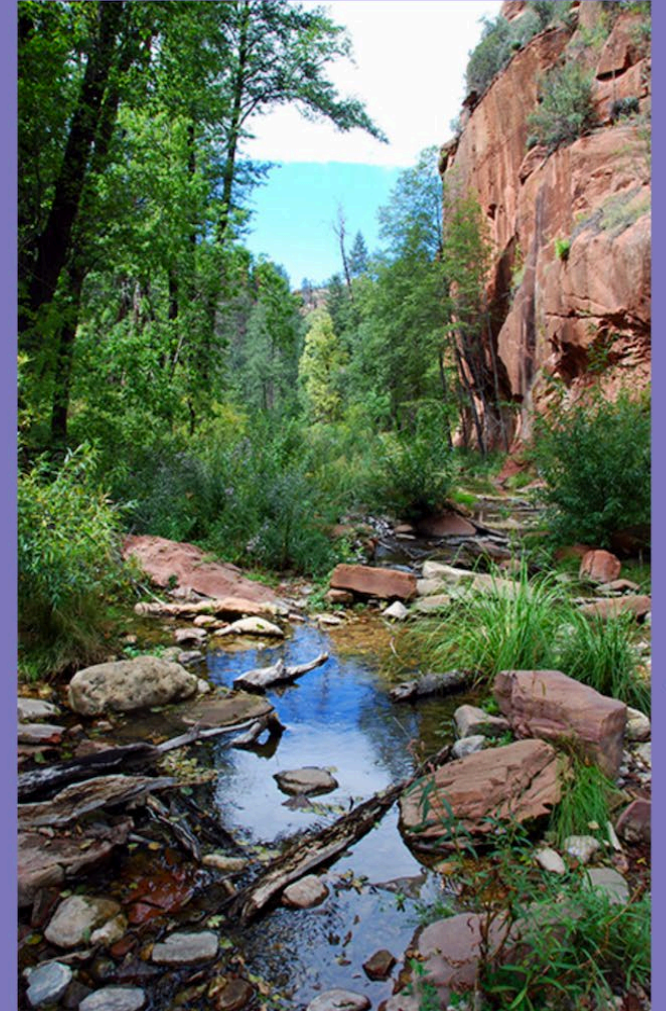
ADHS STD Surveillance Data

Adolescents and young adults represent an important population as case counts and rates for STDs among those aged 10-24 are the highest of all age groups in Arizona (41% of gonorrhea cases and 61% of chlamydia cases).

Percent of STD Reported by Age Groups, 2017



ADHS STD Surveillance Data



# New CDC analysis shows steep & sustained increases in STDs

- In 2017 nearly **2.3 million cases** of chlamydia, gonorrhea, and syphilis were diagnosed in the United States.
- We have seen a **67% increase in gonorrhea a 76% increase in syphilis and a 45% increase in chlamydia.**
- The CDC expects gonorrhea to wear down our last highly effective antibiotic. The CDC said, “we're sliding backwards”. “The systems that are in place to identify and prevent STD's are at the breaking point”.

## STD DIAGNOSES AMONG KEY U.S. POPULATIONS 5-YEAR TRENDS

	2013	2014	2015	2016	2017*
<b>Chlamydia</b>	1,401,906	1,441,789	1,526,658	1,598,354	1,708,569
<i>Among young women (aged 15 to 24)</i>	715,983	709,170	724,709	735,027	771,340
<b>Gonorrhea</b>	333,004	350,062	395,216	468,514	555,608
<i>Among women</i>	163,208	162,608	173,514	197,499	232,587
<i>Among men</i>	169,130	186,943	221,070	270,033	322,169
<b>Primary &amp; secondary syphilis</b>	17,375	19,999	23,872	27,814	30,644
<i>Among MSM**</i>	10,451	12,226	14,229	16,149	17,736
<b>Combined cases</b>	<b>1,752,285</b>	<b>1,811,850</b>	<b>1,945,746</b>	<b>2,094,682</b>	<b>2,294,821</b>

\*Preliminary data

\*\*Men who have sex with men

For more information, visit  
[cdc.gov/nchhstp/newsroom](https://www.cdc.gov/nchhstp/newsroom)



U.S. Department of  
Health and Human Services  
Center for Disease  
Control and Prevention

<https://www.cdc.gov/nchhstp/newsroom/2018/press-release-2018-std-prevention-conference.html>

# CONCLUSION

**THE FEDERALLY FUNDED COMPREHENSIVE SEX EDUCATION PROGRAMS HAVE AN 85% FAILURE RATE IN U.S. SCHOOLS**

**THE PROGRAMS MAY BE PROMOTING A LIFESTYLE NOT ACCEPTABLE TO THE PARENTS OF OUR STUDENTS**

**I urge the Governing Board members not to allow these programs to be used in our schools.**

**SHALL NOT PROVIDE SEX EDUCATION NOR INCLUDE IN ANY COURSE OF STUDY INSTRUCTION WHICH PROMOTES, CONDONES, OR ENCOURAGES STUDENTS TO ENGAGE IN ANY SEXUAL ACTIVITY OR PURSUE ANY SPECIFIC SEXUAL LIFESTYLE**