

## CSE Harmful Elements Analysis Tool

The CSE Harmful Elements Analysis Tool<sup>1</sup> was created to help parents, school administrators, educators, and other concerned citizens assess, evaluate, and expose harmful elements within comprehensive sexuality education (CSE)<sup>2</sup> curricula and materials. For more information, visit [www.stopcse.org](http://www.stopcse.org).

### Analysis of ***Family Life and HIV Education for Junior Secondary Schools Student's Handbook – 2<sup>nd</sup> Edition***

Based on 15 Harmful Elements Commonly Included in CSE Materials

#### CSE HARMFUL ELEMENTS SCORE = 10 OUT OF 15

*Family Life and HIV Education for Junior Secondary Schools Student's Handbook* contains 10 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:** This program was written for young people in Nigeria. It encourages them to define their own sexual values and use the tools taught in this curriculum to protect those values.

**Target Age Group:** Ages 12-14

**International Connections:** International Women's Health Coalition, John D. and Catherine T. MacArthur Foundation, Action Health Incorporated, Ford Foundation, UNFPA Nigeria

HARMFUL CSE ELEMENTS	EXCERPTED QUOTES FROM CSE MATERIAL
<b>1. SEXUALIZES CHILDREN</b> <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>"An important part of <b>overall well-being is sexual well-being.</b>" (p. 2)</p> <p>"Sexuality is defined by the World Health Organisation (WHO) as a fundamental aspect of human life with physical, psychological, spiritual, social, economic, political, and cultural dimensions. It is a natural part of being human. <b>People express and experience sexuality through their physical feelings, emotions, thoughts, identities, and relationships.</b>" (p. 3)</p> <p>"Enjoying intimacy and companionship can be part of sexuality across the lifespan, starting at birth. Even babies want to touch and be touched, and <b>a baby boy would sometimes get an erection.</b>" (p. 3)</p>

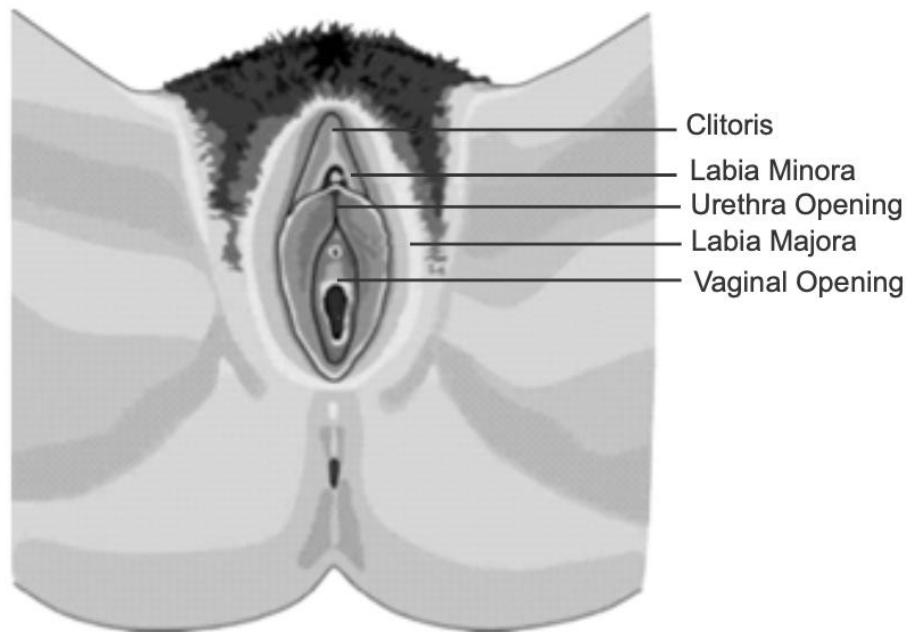
<sup>1</sup> The CSE Harmful Elements Analysis Tool was created by Family Watch International. Family Watch is not responsible for the way in which the tool is used by individuals who do independent analyses of CSE materials. Visit [www.stopcse.org](http://www.stopcse.org) for a blank template or to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

<sup>2</sup> 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.

“A girl you have a crush on wants to experiment sexually. You value having an intimate relationship and want your mates to admire you for having a girlfriend.” (p. 22)

“Boys typically reach puberty between the ages of 12-14. For boys, puberty includes nocturnal emissions or 'wet dreams' (**involuntary orgasms during sleep**).” (p. 28)

“**Communicate with your partner about having children and about sexuality.** Prevent sexually transmitted infections and recognize the symptoms of certain infections. Communicate with your health care providers. Prevent an unwanted pregnancy. Continue to take control of your own body and protect your right to dignity and respect. Hopefully, this information will help you to overcome any shyness or embarrassment.” (p. 34)



*External Reproductive System (Female)*

(p. 35)

“Imagine thinking over these decisions:

- What to tell a **sugar daddy** (an older man who is dating a very young girl) who offers you gifts or cash.
- Whether to end a romantic relationship.
- What to tell one’s friends who exert pressure on one to become sexually active.
- What to do in the face of a possible **unintended pregnancy or sexually transmitted infection.**” (p. 74)

“Young people your age typically grow up with conflicting messages about sex. You have probably been told to abstain – that is, to avoid having sex. But **you may also be feeling some pressure to look or act sexual in some way.** While

	<p>most young people get mixed messages about sex, the specific messages that they get often depend on whether they are boys or girls.” (p. 96)</p> <p><b>“Passion refers to the drive that leads to romance, physical attraction and sexual interaction.</b> This emotion is totally absorbing culminating in feelings of elation, sexual desire and arousal. Most people first experience romantic love during adolescence or early adulthood. It often occurs early in a relationship.” (p. 143)</p>
<p><b>2. TEACHES CHILDREN TO CONSENT TO SEX</b></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. While this may be appropriate for adults, children of minor age should never be encouraged to “consent” to sex.</i></p> <p><i>Note: “Consent” is often taught under the banner of sexual abuse prevention.</i></p>	<p>“The ‘SWAT’ technique is one of the ways of learning how to negotiate abstinence with a partner:</p> <ul style="list-style-type: none"> <li>• <b>S</b> – ‘Say No’ to unsafe behavior. (Refuse the behaviour in an assertive way).</li> <li>• <b>W</b> – Be prepared to explain 'Why' you want to be safe (Provide a good explanation as to why you want to be safe. This will help your partner understand your real concerns and reduce the likelihood that he or she will react in a negative way).</li> <li>• <b>A</b> – Provide ‘alternatives’ (if you want to). This shows your interest in continuing your relationship with the other person.</li> <li>• <b>T</b> – Talk it out (Communicating your feelings helps the relationship to grow).” (p. 99)</li> </ul> <p>“When young people learn to negotiate better, <b>they are better able to protect themselves from unsafe</b> and unwanted sex.” (p. 116)</p>
<p><b>3. PROMOTES ANAL AND ORAL SEX</b></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>“HIV may be transmitted through vaginal or <b>anal sex</b> between a man and a woman or through <b>anal sex</b> between two men. HIV can also be passed from an HIV-positive mother to her baby during pregnancy, delivery, or breastfeeding. <b>Oral sex</b> also carries some risk for HIV transmission.” (p. 88)</p>
<p><b>4. PROMOTES HOMOSEXUAL/ BISEXUAL BEHAVIOR</b></p> <p><i>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</i></p>	<p><b>No evidence found.</b></p>

<p><i>homosexuality or homosexual sex.</i></p>	
<p><b>5. PROMOTES SEXUAL PLEASURE</b></p> <p><i>May teach 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><b>No evidence found.</b></p>
<p><b>6. PROMOTES SOLO AND/OR MUTUAL MASTURBATION</b></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><b>No evidence found.</b></p>
<p><b>7. PROMOTES CONDOM USE IN INAPPROPRIATE WAYS</b></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. May provide medically inaccurate information on condom effectiveness and omit or deemphasize failure rates. May imply that condoms will provide complete protection against pregnancy or STIs.</i></p>	<p><b>No evidence found.</b></p>

**8. PROMOTES PREMATURE SEXUAL AUTONOMY**

*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.*

“This chapter helps you to analyse **why some teenagers end up having sex**, and why many teenagers choose not to have sex.” (p. 96)

“Researchers have asked sexually active young people **why they choose to have sex**. For these young people (especially younger adolescents), having sex is often a means to a different end. Different young people report different reasons, depending on their gender, economic status, family situation, or other factors.” (p. 97)

**Activity**

The following is a list of common reasons that adolescents offer for engaging in sex. For each reason, tick off whether you think it is a reason that is more common among girls, more common among boys, or equally common among both boys and girls.

Reasons given for having sex (not abstaining)	More Commonly Given by		
	Boys	Girls	Both
'I wanted to prove my manhood.'			
'My partner wanted me to prove my love.'			
'I wanted my partner to feel closer to me.'			
'I thought everyone else was doing it.'			
'It makes me feel more mature.'			
'My parents don't pay much attention to me; I want to be loved.'			
'It's a way to get money, food, or gifts.'			
'I felt pressure from my friends.'			
'My friends look up to me because I have sex.'			
'Demanding sex is a way that I show my control in the relationship.'			
'I need to show loyalty to a partner and maintain a relationship.'			
'I was curious; I wanted to experiment.'			
'I didn't want to hurt my partner's feelings.'			
'I didn't know how to explain my feelings.'			
'I felt like I had to. I felt pressured by the person.'			
'I was raped.'			

(p. 98)

“At some time, a **sexual situation may come up in which you feel confused or uncomfortable. You might not be sure what you want, or you might have mixed feelings**. A sexual situation might also arise in which you know exactly what you want but you do not feel you can express yourself effectively. When you are confused about a situation in life ... you would be in a stronger position if you consider your own values and **have some skills to protect your values**.” (p. 99)

“**Some young people do end up engaging in sex** – girls and boys usually have different reasons for this – but in all cases, it is usually in hopes of meeting some other need.” (p. 100)

**9. FAILS TO ESTABLISH ABSTINENCE AS THE EXPECTED STANDARD**

“Definitely **avoid unprotected sexual** activity, as that can lead to serious infections, including HIV.” (p. 38)

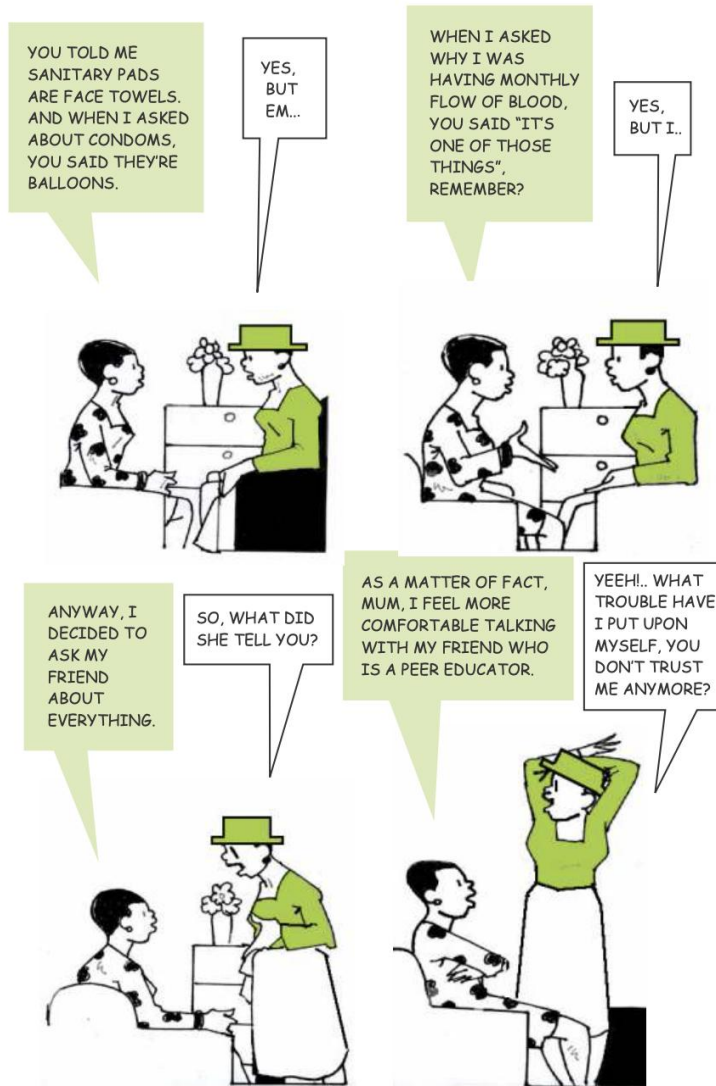
<p><i>Fails to establish abstinence (or a return to abstinence) as the expected standard for all school age children. May mention abstinence only in passing.</i></p> <p><i>May teach children that all sexual activity—other than “unprotected” vaginal and oral sex—is acceptable, and even healthy. May present abstinence and “protected” sex as equally good options for children.</i></p>	<p>“Many women find that they have <b>more interest in sex</b> during the fertile (able to produce) days of the menstrual cycle.” (p. 38)</p> <p>“<b>If you have been involved in unprotected sexual intercourse</b>, it is important to be checked specifically for STIs.” (p. 87)</p> <p>“When you are older and start having sex, <b>make sure to learn about how to do that safely.</b>” (p. 91)</p>
<p><b>10. PROMOTES TRANSGENDER IDEOLOGY</b></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>“Both boys and girls may experience pressure or <b>stigma related to their sexual or gender identity</b>. We all want to be accepted for who we are. That’s normal.” (p. 30)</p> <p>“Thus, while biological sex differences are natural – we are born with them and they do not change over time and space except, perhaps, <b>one performs a sex change surgery</b> – gender roles are not innate or natural.” (p. 50)</p>
<p><b>11. PROMOTES CONTRACEPTION/ABORTION TO CHILDREN</b></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 children they have a right to abortion and refer them to abortion providers.</i></p>	<p>“In Nigeria, induced abortion is illegal unless it is performed to save the life of the pregnant woman. Thus, <b>many who undergo the procedure are exposed to risky and unsafe abortions</b>. Because of this, many girls suffer from infections that can make it difficult to have a child later. Some women die because of an unsafe abortion.” (p. 47)</p> <p><b>“SEXUAL HEALTH ISSUES</b></p> <p>My friends and I feel pressure to be sexually active. Many of my peers do not know about HIV. Some schools in our area do not teach about HIV. Many people don't know their HIV status. Young people do not have basic information about their own bodies. Adolescents do not have access to sexual and reproductive health services that are youth-friendly. The rate of sexually transmitted infections among young people is far too high. Many women and girls in Nigeria</p>

<p><i>May encourage the use of contraceptives, while failing to present failure rates or side effects.</i></p>	<p>die in childbirth; people seem not to care enough. <b>Abortion is legally restricted – and as a result, dangerous – in many places.</b>” (p. 196)</p>
<p><b>12. PROMOTES PEER-TO-PEER SEX ED OR SEXUAL RIGHTS ADVOCACY</b></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 highly controversial sexual rights (including a right to CSE itself) or to promote abortion.</i></p>	<p><b>No evidence found.</b></p>
<p><b>13. UNDERMINES TRADITIONAL VALUES AND BELIEFS</b></p> <p><i>May encourage children to question their parents’ beliefs or their cultural or religious values regarding sex, sexual orientation or gender identity.</i></p>	<p>“If you came up with a <b>list of topics that people are uncomfortable talking about openly, sexuality would probably be on that list. Although discussing sexuality is important for building trusting, close relationships and protecting your health</b>, many people do not know how to communicate about it.” (p. 64)</p> <p>“<b>Some religious traditions are more egalitarian (equality-minded)</b> with regard to gender. Others are based more directly on a system in which males hold most power.” (p. 165)</p> <p>“<b>Some religious leaders agree that young people need information and services to prevent the spread of HIV and unintended pregnancy</b>; others oppose this.” (p. 165)</p> <p>“<b>Pretend you are a religious leader. An advocate for sexuality education</b> comes to meet with you. What do you want to ask her? Write down one question. Now pretend you are the advocate for sexuality education. What do you want to ask the religious leader? Write down one question.” (p. 166)</p> <p>“<b>Some people believe that young people need access to adolescent-friendly health services</b>, while others worry that such services will promote promiscuity, or frequent ‘casual’ sexual relations. In Nigeria, there are organizations that oppose Family Life and HIV Education and organizations that support it.” (p. 177)</p> <p>“<b>In every society, there are cultural norms about what is acceptable or unacceptable behaviour. Norms change all the time.</b> In a country like Nigeria where there are many different cultures, these norms also differ from place to place. Ways that norms deeply affect most people’s lives relate to dating, sexual relationships, and marriage. Many of these norms help to protect people. But some of them can endanger people’s safety, health, or right to be treated equally and with respect.” (p. 179)</p>

“Countries have also signed agreements to change society, so that the world is safer for young people. Some of the changes that countries like Nigeria have agreed to make include: Promoting girls’ education so that girls can have equal opportunities in life. Providing good quality reproductive health services for young people. Teaching young people that violence is wrong. Teaching young people that they must have control of their own bodies.” (p. 185)

**14. UNDERMINES PARENTS OR PARENTAL RIGHTS**

*May instruct children they have rights to confidentiality and privacy from their parents. May teach children about accessing 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.*







(p. 64)

“You have the **right to services that are completely confidential**. (This means that no one will reveal or share your health or other personal details.) Services should be sensitive to any cultural or religious issues that are important to you.” (p. 159)

**15. REFERS CHILDREN TO HARMFUL RESOURCES**

*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.)*

*Please Note: A conflict of interest exists whenever an entity that profits from sexualizing children is involved in*

“If you decide to take an STI test, you may need access to a **youth-friendly clinic**. If you decide to do research online, you need to have access to a computer and Internet.” (p. 71)

*creating or implementing sex education programs.*

*(For more information on how Planned Parenthood sexualizes children for profit see*

*[www.WaronChildren.org](http://www.WaronChildren.org) and [www.InvestigatePPF.org](http://www.InvestigatePPF.org))*

For the complete text of *Family Life and HIV Education for Junior Secondary Schools Student's Handbook* see:

[https://drive.google.com/file/d/1UU7JDp52YcGhQ2g1DTiDiODzqRBQbqyR/view?usp=drive\\_link](https://drive.google.com/file/d/1UU7JDp52YcGhQ2g1DTiDiODzqRBQbqyR/view?usp=drive_link)