

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

Project School Wellness Middle School Comprehensive Sex Ed and Sexual Health

Based on 15 Harmful Elements Commonly Included in CSE Materials

CSE HARMFUL ELEMENTS SCORE = 11 OUT OF 15

Project School Wellness Middle School Comprehensive Sex Ed and Sexual Health contains **11 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 middle school sex ed program has the goal of normalizing conversations about sex among young teens. It discusses vaginal, anal and oral sex, how to decide when you're ready to have sex, and how to give consent. Students are also taught about a variety of birth control methods.

Target Age Group: Ages 12-14

HARMFUL CSE ELEMENTS	EXCERPTED QUOTES FROM CSE MATERIAL
1. SEXUALIZES CHILDREN <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>"Sex is just a fact of life. The more you present the material in this unit as fact and a normal part of life, the more students will feel comfortable learning and talking about sex." (Teacher's Packet, p. 3)</p> <p>"Begin by going over the definition of Sex Ed and Sexual Health:</p> <ul style="list-style-type: none">• What is Sex Ed? – Education on issues related to human sexuality. This can include to [sic] reproductive anatomy, safe sex practices, building relationship [sic] and social well-being, decision making, and more.• What is Sexual Health? – Well-being in connection to sexuality. This can refer to the physical, emotional and mental, and social elements of sexuality." (Teacher's Packet, p. 7) <p>"Next, you'll discuss a few basic Sex Ed terms. Students will benefit from becoming familiar with these terms now, as they will come up a number of times in this unit. Discuss each term as it appears on the PowerPoint and ask</p>

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.

	<p>students to share a personal definition on their worksheet.</p> <ul style="list-style-type: none"> • Contraceptive – A method or device used to prevent pregnancy. • Hygiene – The things you do to keep your body clean and free of disease. • Puberty – A period in life when the body becomes sexually mature and can reproduce; when a person physically becomes an adult. • Relationship – The state of being connected to people. Make note that relationships do not only terms [sic] to dating relationships but to all relationships (<i>friends, family, co-workers, teachers & students, etc...</i>) • Reproduction – The process of two people producing an offspring (<i>having a child</i>) • Sex – Vaginal, anal, or manual (<i>using hands</i>) intercourse, or oral-genital stimulation, with a partner” (Teacher’s Packet, p. 7) <p>Students play bingo with the following reproductive terms on their bingo cards: “Seminal vesicles, ovum, epididymis, conception, urethra, uterus, clitoris, prostate gland, vulva, fetus, scrotum, vagina, ovary, bladder, labia majora, vas deferens, cervix, penis, fallopian tube, testicle, semen, labia minora, anus, testosterone” (Lesson 6 Bingo Sheets)</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. 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>“Lesson Objectives:</p> <ul style="list-style-type: none"> • What: Understand what consent is, how to ask for it, and how to give it. • Why: So you aren’t misunderstood or misunderstand your partner. Consent isn’t optional, it’s the law. • How: Watch a video and have a discussion on consent.” (Teacher’s Packet, p. 35) <p>“Begin by introducing the term consent – permission for something to happen. More specifically, <i>in the context of sex</i>, it refers to permission for a sexual act to take place.” (Teacher’s Packet, p. 35)</p> <p>“Once introduced to the term consent, help students better understand what consent is by watching a quick informational video [link]. This video is very well done and easy to understand. However, it may still be necessary to watch it through one time and then watch it again stopping and discussing points of confusion or elements that need to be emphasized.” (Teacher’s Packet, p. 35)</p> <p>“How to Ask for Consent: The first step is making sure students understand what consent is, the second step is teaching them how to ask for consent. There are three steps to asking for consent: 1) Ask, 2) Listen, and 3) Respect. Use the PowerPoint slides to introduce these steps.</p> <ul style="list-style-type: none"> • Ask – Ask the person if they want to participate in the activity. • Listen – After asking the question, listen to their response. Don’t just ask the question and then do what you want. Listen for their answer, then respond. • Respect – Be respectful of their answer, especially if it’s not the answer you were hoping for.” (Teacher’s Packet, p. 35) <p>“Rules About Consent</p>

	<ul style="list-style-type: none"> • Only yes means yes and no means no • Getting consent is your responsibility • Just because you've done something before does not give you permission or consent to do it again. It's okay to change your mind. • If you are under the influence of drugs or alcohol or asleep you cannot give consent." (Lesson 10 PowerPoint, Slide 8) <p>"Read the scenario and decide if there's consent or not.</p> <ul style="list-style-type: none"> • There's automatic consent because we've had sex before. No consent! Just because you've done something in the past doesn't mean you have consent in the future. • My partner isn't sober so I can't ask for consent. Correct! If your partner is not sober or conscious, they cannot give consent. • I had consent to kiss, so that means I also have consent to have sex. No consent! Just because you have consent for one thing doesn't mean you have consent for something else. • Even though we're in a committed relationship, I still need to ask for consent. Correct! Being in a relationship does not automatically give you consent. You still need to ask!" (Lesson 10 PowerPoint, Slides 14-22) <p>"On a blank exit ticket, ask students to answer the following question: How can your school better raise awareness about what consent is and how to ask for it?" (Teacher's Packet, p. 35)</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>"Sex: Vaginal, anal, or manual (using hands) intercourse, or oral-genital stimulation, with a partner" (Lesson 2 PowerPoint, Slide 14)</p> <p>"STDs/STIs can spread during...</p> <ul style="list-style-type: none"> • Vaginal sex • Anal sex • Oral sex • Genital-to-genital contact" (Lesson 5 PowerPoint, Slides 22-23)
<p>4. PROMOTES HOMOSEXUAL/ BISEXUAL BEHAVIOR</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 homosexuality or homosexual</i></p>	<p>No evidence found.</p>

sex.	
<p>5. PROMOTES SEXUAL PLEASURE</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>"Clitoris: A sexual organ located internally and externally, it's made of erectile tissue and provides pleasure." (Teacher's Packet, p. 23)</p> <p>"Sexual Touch – To provoke sexual arousal, may or may not involve sexual parts of the body, there's balance between people – Examples: longer hugs and/or kisses, sexual activity, intimate massage" (Teacher's Packet, p. 38)</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>No evidence found.</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. 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>No evidence found.</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>“Why: So you can use what we learn in Sex Ed to take control of your own sexual health.” (Teacher’s Packet, p. 4)</p> <p>“Teenagers who receive sex education are more equipped to make healthy choices in the future. Being educated empowers you to make thoughtful decisions.” (Lesson 1 PowerPoint, Slide 14)</p> <p>“When is sexual touch appropriate? When consent has been given, when you’re in a committed relationship” (Teacher’s Packet, p. 40)</p> <p>“D.E.C.I.D.E. model for decision making - - The D.E.C.I.D.E. model is an excellent tool to use when making decisions, and it can be used to help make both significant and minor decisions alike. Click through the slides to present and explain each element of the model with students.</p> <ul style="list-style-type: none"> • D - Define the problem • E - Explore your options • C - Consider the consequences • I - Identify your values • D - Decide and act • E - Evaluate the results” (Teacher’s Packet, p. 49) <p>“After explaining the model, use the model to make a decision about when to become sexually active.” (Teacher’s Packet, p. 49)</p>
<p>9. FAILS TO ESTABLISH ABSTINENCE AS THE EXPECTED STANDARD</p> <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>“How do you protect yourself from getting or spreading an STD/STI? Not have sex; Use a condom; Get tested regularly; Avoid risky, unsafe sex” (Teacher’s Packet, p. 20)</p> <p>“How do you protect yourself from getting or spreading an STD/STI?</p> <ul style="list-style-type: none"> • Abstain from sexual intercourse and sexual contact • Use barrier protection: male condom, female condom, dental dam • Talk: Know your partner’s history • Get immunized, if available • Get tested on a regular basis • Avoid risky behavior • If you have an STD/STI, get it treated” (Lesson 5 PowerPoint, Slides 25-26) <p>“On a blank exit ticket, ask students to answer the following questions – Why might someone practice unsafe sex even though they understand the risk of getting an STD/STI?” (Teacher’s Packet, p. 18)</p> <p>“Does abstinence mean the same thing to everyone? No, it is not the same forever [sic]. Some people abstinent [sic] from all sexual activity. Others abstain from only certain types of sexual activity.” (Teacher’s Packet, p. 32)</p>
<p>10. PROMOTES TRANSGENDER</p>	

<p>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>No evidence found.</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 children they have a right to abortion and refer them to abortion providers.</i></p> <p><i>May encourage the use of contraceptives, while failing to present failure rates or side effects.</i></p>	<p>“Lesson Objectives:</p> <ul style="list-style-type: none"> • What: Understand how different contraceptives prevent pregnancy • Why: Knowing how contraceptives work empowers you to make informed decisions about family planning. • How: Review various types of contraceptives on an interactive website.” (Teacher’s Packet, p. 28) <p>“After question and answer time, introduce the term contraceptives – A method or device used to prevent pregnancy. Once students have an understanding of the term contraceptives, ask them to share what contraceptives they’ve heard of. This is a great opportunity to gauge students’ knowledge and understanding of birth control.” (Teacher’s Packet, p. 28)</p> <p>“Now it’s time to build on the basic understanding of the term contraceptives by exploring various contraceptive options with this video. In this video students will be introduced to three different methods of contraceptives:</p> <ul style="list-style-type: none"> • Block Method - Block the sperm from reaching the egg • Disable Method - Disable and destroy sperm • Suppress Method - Stops an egg from maturing” (Teacher’s Packet, p. 28) <p>“After the video, share these additional methods of contraceptives with students:</p> <ul style="list-style-type: none"> • Behavioral Methods – When a person changes their sexual behavior and patterns to prevent pregnancy. • IUD Method – A t-shaped device that is inserted into the uterus to prevent pregnancy. • Permanent Methods – When a person permanent [sic] alters a reproductive organ to prevent pregnancy. • Emergency Contraceptive – When medication is taken after unprotected

sex to prevent the sperm from fertilizing an egg.” (Teacher’s Packet, p. 28)

“Review Time! Now it’s time to **review pregnancy and contraceptives** with a game, **Connect Four**.

- On the whiteboard draw a Connect Four board (*five down, seven across - like this*) and divide students into even teams (*you can use more than two teams*).
- Alternate asking teams **questions** (*taken from the provided list*) **about pregnancy and contraceptives**. Each time a team gets a question correct they get to check off a box on the Connect Four board. If they get it wrong, the question moves to the next team.
- The first team to get four in a row wins!” (Teacher’s Packet, p. 28)

Contraceptive questions used in Connect Four game:

- “How could pregnancy still occur when using the withdrawal method of birth control?
- True or False: A condom will always prevent pregnancy?
- How does the **behavioral method** of contraceptives prevent pregnancy?
- What are three block method contraceptives?
- What is the only 100% sure way to prevent pregnancy?
- How does an IUD prevent pregnancy?
- How does the **withdrawal method** work to prevent pregnancy?
- How effective are spermicides at preventing pregnancy?
- True or False: Peeing after sex will prevent pregnancy.
- What is the suppress method of contraceptive?
- What are **two permanent methods** of birth control?
- Who is responsible for birth control when having sex?
- What is the difference between *perfect use* and *practical use* effectiveness of birth control?
- What type of contraceptives prevent STDs/STIs?” (Teacher’s Packet, p. 31)

“**Contraceptives**: A method or device used to prevent pregnancy.” (Lesson 8 PowerPoint, Slide 5)

“**Contraceptive Methods**

- Block
- Disable
- Suppress
- Behavioral
- IUD
- Permanent
- **Emergency Contraceptive**” (Lesson 8 PowerPoint, Slide 8)

“Independent Study

- **Read about each contraceptive** on the interactive website or handout.

	<ul style="list-style-type: none"> • Determine the effectiveness – circle excellent, good, or just okay • Identify the cost of each type of contraceptive – circle \$, \$\$, or \$\$\$” (Lesson 8 PowerPoint, Slide 9)
<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 highly controversial sexual rights (including a right to CSE itself) or to promote abortion.</i></p>	<p>“D.E.C.I.D.E. Postcard – Time for students to share their insight with the school. They are going to design a postcard to be hung around the school. The postcard should be creative and explain how to use the DECIDE model.” (Teacher’s Packet, p. 49)</p> <p>Note: <i>Students are taught to use this model to decide when to become sexually active.</i></p>
<p>13. UNDERMINES TRADITIONAL VALUES AND BELIEFS</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>“Both on the student worksheet and in the teaching PowerPoint, you’ll find a list of five reasons why sex ed matters...</p> <ul style="list-style-type: none"> • Teenage bodies are preparing for sex and reproduction through puberty. • Teenagers are interested in learning about sexual well-being. • Teenagers are surrounded by sex on television, social media, music, books, etc. • Nearly everyone will have sex at some point in their life. • Teenagers who receive sex education are more equipped to make healthy choices in the future.” (Teacher’s Packet, p. 4)
<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 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>“Ground Rules: ...Confidentiality – What’s said in the classroom stays in the classroom.” (Teacher’s Packet, p. 4)</p>
<p>15. REFERS CHILDREN TO HARMFUL RESOURCES</p> <p><i>Refers children to harmful</i></p>	<p>“Once students are familiar with each method of it’s time for independent discovery. Students will use an interactive website ... to research the effectiveness and cost of various birth control option [sic].</p> <ul style="list-style-type: none"> • Interactive websites – [link], [link], [link]...

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 creating or implementing sex education programs.

(For more information on how Planned Parenthood sexualizes children for profit see www.WaronChildren.org and www.InvestigatePPF.org)

- Video Playlist – [\[link\]](#)” (Teacher’s Packet, p. 28)

For more information on *Project School Wellness Middle School Comprehensive Sex Ed and Sexual Health* see <https://www.projectschoowellness.com/>.