

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

Program M – Working with Young Women: Empowerment, Rights and Health

Based on 15 Harmful Elements Commonly Included in CSE Materials

CSE HARMFUL ELEMENTS SCORE = 15 OUT OF 15

***Program M – Working with Young Women: Empowerment, Rights and Health* 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: “This manual, part of an initiative called Program M (M for mujeres in Spanish and mulheres in Portuguese), includes a series of group educational activities to promote young women’s awareness about gender inequities, rights and health and to develop skills so they can feel more capable of acting in empowered ways in different spheres of their lives.” (p. 9)

Target Age Group: 15-24 (The manual suggests it can be for children as young as ten on page 125.)

International Connections: Promundo, Salud y Género, ECOS, Instituto PAPAI, World Education, International Planned Parenthood Foundation/Western Hemisphere Region (IPPF/WHR), MacArthur Foundation, Nike Foundation, Oak Foundation, Special Secretariat for Women’s Policies – Brazil, Brazilian Special Secretariat for Women’s Policies (SPM in Portuguese), The Oak Foundation, and USAID

For the complete text of Program M Working with Young Women: Empowerment, Rights and Health see: https://drive.google.com/file/d/1UMNxDOJWdGfedgmxAR8_yidWjKq-fww/view?usp=drive_link

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</i>	“William asks Susana to go out with him one afternoon. They chat a little, have a bite to eat, and William invites her to a motel, saying he has some money to spend a few hours there. Susana agrees. They get to the motel and start kissing and caressing. William begins to take off her clothes. Susana stops him and says that she doesn’t want to have sex. William is furious. He tells her that he has spent a lot of money on the room and says ‘What are my friends going to say?’ He pressures her to get her to change her mind. First he tries to be sweet and

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.

active. May glamorize sex, use graphic materials, teach explicit sexual vocabulary, or encourage discussion of sexual experiences, attractions, fantasies or desires.

seductive, then he begins yelling at her in frustration. Finally, **he pulls at her forcefully, pushing her down on the bed.**" (p. 40)

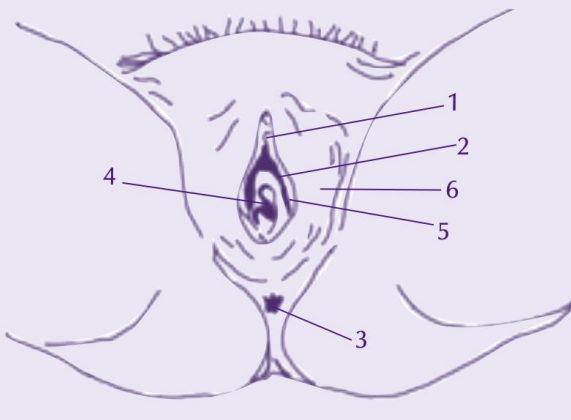
"This activity requires a **private environment** in which the participants can **feel comfortable discussing their bodies.**" (p. 49)

"Tell the participants that you are going to **name different parts of the body and that they should either touch the part of the body** that is being named OR just visualize that part in their mind. Emphasize to the participants that it is important that they keep their eyes closed and that they should only do what they feel comfortable doing. Ask them to **pay attention to the different sensations they feel upon touching or visualizing different parts of their body.** In a slow and soft voice, name the following parts of the body: head, forehead, eyebrows, eyelid, nose, cheekbone, lips, chin, ears, neck, chest, stomach, arms, hands, fingers, waist, **genitals, buttocks**, legs, knee, feet, and toes." (p. 49)

"Participants might not feel comfortable **asking questions about men's and women's bodies and genitalia.** If this is the case, it might be helpful to invite them to write down their questions on small pieces of paper which can then be collected and read aloud for discussion." (p. 52)

The Female Reproductive System

External Genitalia



(p. 54)

2. TEACHES CHILDREN TO CONSENT TO SEX

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.

Note: "Consent" is often taught

"The objective of this activity is to **help you to get to know your body** more and to think about how the way you feel about your body is linked to your overall well-being in many ways, from your comfort with and expression of your sexuality, to if and **how you communicate and negotiate with your partners about prevention and pleasure.**" (p. 50)

"Activity 16: Prevention and Pleasure provides an opportunity to **discuss the negotiation of pleasure and condoms in sexual relationships.**" (p. 91)

<i>under the banner of sexual abuse prevention. While this may be appropriate for adults, children of minor age should never be encouraged to “consent” to sex.</i>	
3. PROMOTES ANAL AND ORAL SEX <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>	“Tips for Safe Lesbian Sex: ...During oral sex or manual penetration women should cover the entire vaginal or anal area, or fingers and hands, with a dental dam (a square piece of latex), non-microwaveable plastic wrap, or a cut-open condom or latex glove. New materials should always be used when moving from the anus to the vagina, or between partners. Sex toys should be washed in hot, soapy water or with a bleach solution before sharing, or covered with fresh condoms for each partner.” (p. 91) “The kinds of behaviors that might allow the four fluids to enter the body and, therefore, put a person at risk for HIV include the following: Unprotected sexual intercourse – vaginal, anal, or oral intercourse.” (p. 93) “Tell anyone with whom you have had unprotected sex (vaginal, anal, or oral) or shared needles that you are (and they may be) infected with HIV.” (p. 98)
4. PROMOTES HOMOSEXUAL/BISEXUAL BEHAVIOR <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 sex.</i>	“Sexual identity is related to the sexual preferences of each person.” (p. 26) “Respecting Sexual Diversity provides an opportunity to reflect on intimate relationships between men and between women.” (p. 31) “Maria is a 30-year-old black woman, who teaches in a secondary school. One day, while she waits for her students to arrive, she finds a message in her book that says, ‘I love you’ enclosed by a heart. She smiles and remembers the first time she saw Camilla, her partner of four years. She remembers how it was difficult at first to realize that she had romantic feelings for another woman. When she gets together with colleagues from school, they frequently ask why she doesn’t have a boyfriend or why, at her age, she’s still not married. She gets nervous every time she hears these comments, and is afraid that if she tells the truth, she might lose her job. As a black woman, she has already had to overcome many obstacles to get to where she is.” (p. 33) “Same-sex relationships are indeed gaining more respect in different settings; however, much more progress is needed. In many families, schools, workplaces and other social settings, homosexual and bisexual men and women suffer from loathing, fear and prejudice. These responses often come from a lack of knowledge and understanding about homosexuality. Promoting spaces for discussion and understanding about homosexuality is key to building a more diverse and united society.” (p. 61) “Sexual rights also include the right to express one’s sexual orientation and choose one’s partners freely and without discrimination. Common violations of

women's sexual rights include genital mutilation, sexual harassment, abuse, and exploitation." (p. 61)

"Right to be free and autonomous to **express sexual orientation**. Each person has their own way of being a man or woman." (p. 65)

"Purpose: **To promote respect for sexual diversity** and reflections on the consequences of homophobia on individuals, relationships, and communities." (p. 75)

"It is important that the facilitator be accepting and comfortable with this topic, as it can be extremely sensitive, and it might be helpful to first **identify common myths and misunderstandings about sexual orientation** that can be integrated and addressed in the discussion. Prior to the session, the facilitator should also research information regarding local laws and **movements that promote the rights of gay individuals and couples** and resources such as local organizations or websites on sexual orientation and rights that can be shared with participants." (p. 75)

"Explain only that you are going to **discuss the different kinds of romantic and sexual relationships** that people can have." (p. 75)

"**If the group suggests either a male or female homosexual couple**, the facilitator should put the name of a heterosexual couple in column two and the names of a male or female homosexual couple in column three (depending on the names that were initially provided for column one)." (p. 76)

"Do you believe that women and men have the right to be affectionate and **sexually intimate with their same sex**?" (p. 76)

"Nearly **everyone has a sexual orientation** – that is, you are romantically and sexually attracted to either men, women, or both. Women who have sex with women and men who have sex with men **may identify as lesbian, gay or bisexual** – or they may not use any label at all. Although we do not know precisely what determines a person's sexual orientation, we do know that is [sic] formed early in life, is not chosen by the person, and cannot be changed, although because of social taboos and homophobia, it might be hidden. Such social taboos and homophobia can put gay and lesbian youth at particular risk for violence, discrimination, depression, and self-destructive behaviors like drug and alcohol abuse or suicide. It is important to work to dispel myths and promote respect for the **right of women and men to express their sexual orientation** free from discrimination." (p. 76)

"**Lesbophobia**: While the etymology, or roots, of the word indicates a fear of lesbians, the term has come to be used to describe the rejection and/or aversion to these women and their sexuality. Lesbophobia is often manifested in discriminatory actions, frequently violent, that indicate hatred based solely on the sexual orientation of the women." (p. 76)

	“Homophobia: While the etymology, or roots, of the word denotes a fear of homosexuals (gays and lesbians), the term has come to describe the rejection and/or aversion to these individuals and homosexuality, found in new dictionaries. Homophobia often manifests as discriminatory actions that are frequently violent, that indicate hatred based solely on the sexual orientation of the individual.” (p. 76) “Woman, 17 years old, student. She has had boyfriends, but a few years ago discovered an interest in dating girls. Has had a steady girlfriend for one year.” (p. 91)
5. PROMOTES SEXUAL PLEASURE <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>	“It is not necessary to have a relationship with another person to experience sexuality, and sexuality and pleasure can be experienced in many ways, including physically, emotionally, spiritually and intellectually. Sexuality can also be a source of energy and inspiration for various activities and experiences.” (p. 48) “Being able to touch our bodies and learn about its subtleties, desires, pleasures and pains is an important way of getting to know our bodies and being able to express and enjoy our sexuality more fully.” (p. 48) “The clitoris is made up of the same type of tissue as the head of the male’s penis and is very sensitive and is responsible for a woman’s sexual pleasure. Its stimulation can cause a woman to feel an intense feeling of pleasure called an orgasm.” (p. 56) “The ejaculation of the sperm produces an intense feeling of pleasure called an orgasm.” (p. 57) “In other words, women who feel they have the right to experience pleasure with whomever they choose, and who believe themselves capable of determining the right moment to have children, tend to be healthier and happier in relationships and, more generally, in life.” (p. 61) “Among other factors, condoms can play an important role in ensuring that both men and women have the right to healthy and pleasurable sexual relations.” (p. 61) “Individuals have the right to experience pleasure in diverse ways as long as there is consent on the part of everyone involved. In this way, a respect for sexual diversity is fundamental to guaranteeing the right to sexual pleasure.” (p. 61) “Right to live out sexuality without fear, shame, false belief and other impediments to the free exercise of desire. People of all ages have the right to experience and seek out sexual pleasure.” (p. 65) “Is it easy for a woman to speak to a partner about other things related to sex, such as what gives her pleasure? Why or why not? How is pleasure related to

	women’s sexual and reproductive rights?” (p. 67) “As women, you have the right to make decisions regarding your body. This includes having information about and access to prevention methods AND the skills to negotiate the use of these prevention methods with your partners. Whether in a new or long-term relationship, communication is always important – knowledge, communication and protection today make you less worried about the possible consequences for tomorrow, and make sex more fun and pleasurable.” (p. 67) “Silence in relation to female sexuality increases women’s vulnerability to STDs, unwanted pregnancy and other ills: where there are fewer chances to talk about sexuality, there are fewer opportunities for women to reflect about safer and more pleasurable sexual practices.” (p. 87) “Tell them to write the following words as headings to the columns: Risks/Harm; Pleasures; Protection Factors. In the middle column, the groups should write the things that give them pleasure. In the left column, the groups should describe risks/harm associated with the pleasure. In the right column, the groups should write protection factors, that is, things they can do to ensure that the thing that gives them pleasure does not cause them harm or minimizes harm.” (p. 105) “Why is it important to think about the protective factors associated with those things that give us pleasure?” (p. 105)
6. PROMOTES SOLO AND/OR MUTUAL MASTURBATION <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>	“In <i>Once upon a Girl</i>, identify and discuss the differences in the masturbation scenes involving the main female character and her brother.” (p. 53) “Does society treat women’s and men’s sexual desire differently? If yes, why? What is the link between masturbation and sexual rights?” (p. 53) “What is masturbation? Masturbation is defined as rubbing, stroking, or otherwise stimulating one’s sexual organs – penis, clitoris, vagina, and/or breasts – to get pleasure or express sexual feelings. Masturbation is normal and one of the ways we discover more about our bodies. Many people, males and females alike, masturbate at some time in their lives. There is no scientific evidence that masturbation causes any harm to the body or mind. The decision about whether or not to do it is a personal one. Some cultures, religions, and individuals oppose masturbation. If you have questions or concerns about masturbation, you should talk to a trusted adult such as a parent, teacher, faith leader, or health provider.” (p. 59)
7. PROMOTES CONDOM USE IN INAPPROPRIATE WAYS <i>May inappropriately eroticize condom use (e.g., emphasizing</i>	“If available, try to bring some samples of male and female condoms to the session, so that the young women can see what they look and feel like and learn about correct usage.” (p. 66) “Do you think a woman should buy and/or carry condoms?” (p. 66)

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.

“What are some ways that young women can **overcome difficulties in discussing issues like condom use** and pleasure with a partner?” (p. 67)

“**The Female Condom:** The female condom is a polyurethane sheath or pouch about 17 cm (6.5 inches) in length. Worn by a woman during sex, it entirely lines the vagina and helps to prevent pregnancy and sexually transmitted diseases (STDs) including HIV/AIDS.” (p. 68)

“A woman can **use the female condom** if her partner refuses to use the male condom. It can be inserted up to 8 hours before intercourse so it **does not interfere with the moment**. Polyurethane is thin and conducts heat well so sexual intercourse can still feel sensitive and natural.” (p. 68)



(p. 68)



(p. 71)

	“Can you use the female condom the first time you have sex? The female condom can be used the first time you have sex. For some women, the insertion of the condom may cause some bleeding (e.g. through the breaking of the hymen), however this does not mean that the woman lost her virginity because of the condom.” (p. 69) “Is there a possibility of it coming out of the vagina? The vagina is a muscle that opens to receive a penis, a condom, a tampon, or another object. Once introduced, the vagina automatically closes around the object.” (p. 69) “Another initiative, called ‘Catholics for a Free Choice’, developed the campaign ‘Condoms4Life’, a global effort to raise consciousness about the negative effects of the prohibition of condoms by Catholic bishops.” (p. 88) “The main method of preventing HIV among sexually active people is the condom, a barrier method that impedes the entrance of the virus and other sexually transmitted diseases into the body.” (p. 88) “The female condom (see Resource Sheet 16A) is another option for the prevention of HIV if a couple engages in vaginal penetration and can be a tool for promoting the self-confidence and sexual autonomy of women, as well as promoting equity in sexual relations.” (p. 88)
8. PROMOTES PREMATURE SEXUAL AUTONOMY <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>	“Sexual rights include the right to live out our sexuality with pleasure and without guilt shame, fear or coercion, independent of our civil status, age or physical condition.” (p. 61) “All people have the right to live out their fantasies as long as they do not harm others; to opt whether or not to be sexually active; to choose when they will have sexual relations; and to choose the practices that bring them pleasure, as long as there is consent from both parties (when both are adults).” (p. 61) “Right to express sexuality independent of reproduction. Each person has the right have sex without wanting to have children.” (p. 65) “In order to prevent HIV among young women, we must promote young women’s access to information about sexuality and their ability to make decisions about their own bodies and health.” (p. 88)
9. FAILS TO ESTABLISH ABSTINENCE AS THE EXPECTED STANDARD <i>Fails to establish abstinence (or a return to abstinence) as the expected standard for all school</i>	“It is also essential to keep in mind that talking about the body and sexuality entails more than the provision of information on biology and physiology. For example, in addition to information about contraceptives, it is important that discussions about sexuality also include opportunities to speak openly about fantasies, curiosities, fears and prejudices related to sexual experiences.” (p. 49) “Sexual and reproductive health includes being able to have a safe and satisfactory sexual life, the freedom to reproduce and to decide whether, when

<i>age children. May mention abstinence only in passing.</i> <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>	and how many times to do so, and the necessary information and access to efficient, safe and appropriate family planning methods.” (p. 61) “To promote a discussion about the prevention of STIs and HIV/AIDS through sexually pleasurable relations, and the importance of talking with partners about condom use and the prevention of pregnancy and STI/HIV.” (p. 66) “How is a woman who has more than one sexual partner perceived by her peers? By men? By her community in general? Are men who have more than one partner perceived differently?” (p. 67) “Just as the decision to have sex should be discussed, so should the decision about contraception and prevention of unplanned pregnancy.” (p. 70) “After they had been dating for a few months, they decided to have sex for the first time. Joana thought it felt strange, but it didn’t hurt as much as her friends said it would, nor did she feel nervous about talking with Leo about using a condom. However, one time while they were having sex, the condom broke and Joana was not using any other type of birth control.” (p. 70) “Woman, 26 years old, secretary in an accounting firm. Has been dating Tiago for 4 years and during this time she has had sexual relations with other men.” (p. 91) “Woman, 20 years old, works during the day and studies at night. Likes to go out and has sex with all the guys that she finds attractive.” (p. 92) “Woman, 15 years old, student. Likes to help her mom, has several friends, and is dating a 17-year-old guy. He is the first person with whom she has had sex.” (p. 92) “Sarah and Fred have been dating for several months. On Fred’s birthday, Sarah organized a surprise party for him. She invited all of their friends and even got her older brother to buy some beer for the party. Fred was indeed very surprised and both he and Sarah drank and danced a lot at the party. That night they had sex without a condom.” (p. 109) “Maria and Jose are both 17 and have dated for one month. They both talk about getting married one day. Last week they went to a party together and ended up having sex without using protection against STIs or pregnancy. Maria now regrets the fact that they didn’t use protection, and feels like Jose talked her into it. She wonders what she could have done differently. Jose doesn’t know why Maria won’t return his phone calls.” (p. 131)
10. PROMOTES TRANSGENDER IDEOLOGY <i>Promotes affirmation of and/or exploration of diverse gender</i>	“To understand the differences between sex and gender and reflect on how gender norms influence the lives and relationships of women and men.” (p. 19) “Some participants might confuse gender with sexual orientation. It is important to clarify that gender is a socio-cultural construct by which certain attitudes and

<i>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>	behaviors are assigned to individuals based on their physical and hormonal attributes. Sexual orientation, on the other hand, is the feeling of being able to relate romantically and sexually towards someone of the opposite sex (heterosexual), the same sex (homosexual), or persons of both sexes (bisexual). Independent of one's sexual orientation, every individual is influenced by social expectations based on their sex.” (p. 19) “During the activity, the facilitator might want to discuss how transgender and transsexual people do not fit within these traditional gender and sex categories. Transgender people do not identify with the gender to which they were assigned at birth, such as an individual who was born female but identifies as male. Transsexual people are those who choose to medically transition to the gender that feels right for them. Intersexuals (also known as hermaphrodites) are persons born with partially or fully developed pairs of female and sex organs [sic].” (p. 19) “Gender identities are also interlinked with race, culture, social class and sexuality, and it is important to work with young women to question those qualities and expectations that are imposed upon them and to ensure that these do not limit their individual aspirations.” (p. 24)
11. PROMOTES CONTRACEPTION/ABORTION TO CHILDREN <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> <i>May encourage the use of contraceptives, while failing to present failure rates or side effects.</i>	“Suggested story for group discussion: Maria is pregnant but does not want to go through with the pregnancy. However, she lives in a country where abortion is illegal. She decides to take some pills that a friend recommends and ends up with such intense bleeding and cramps that she needs to go to a hospital. Upon arriving at the hospital, she is placed on a gurney and left for ten hours before being attended. When the doctors and nurses finally take care of her they are extremely rude and say that she deserves to go to jail for having tried to induce an abortion. Which of Maria's rights were violated?” (p. 21) “Emergency contraception is essential for women who experience rape or other forms of non-consensual sex. It can significantly reduce a women's [sic] risk of pregnancy if used properly within 72 hours after unprotected sexual intercourse. Unfortunately, due to legal barriers and other systematic restraints around the world, many women do not have knowledge of or access to this option.” (p. 37) “The birth control pill also played an important role in changing the perception of female sexuality, creating new discussions and debates in the field of reproductive health around themes such as sexual freedom, pleasure, desire and sexual violence.” (p. 62) “It is important to keep in mind, when discussing the right to abortion, as well as other sexual and reproductive rights, that diversity and individual choice are at the heart of what is meant by a 'right.' We, the authors of this manual, feel that it is the responsibility of the secular state to guarantee a woman's freedom of choice in relation to abortion.” (p. 62) “Right to insist on the practice of safe sex to avoid pregnancy and prevent sexually transmitted infections including HIV. Each person can demand the use

of condoms to prevent sexually transmitted infections or to prevent pregnancy.” (p. 65)

“Ask the participants if they have ever heard of **emergency contraception** (if it has not already been brought up by the groups). Present the information from Resource Sheet 17B.” (p. 69)

“It is always best to plan ahead and **practice safer sex**, but if and when you find yourselves at risk of an unplanned pregnancy, **emergency contraception pills** offer an option that, if used correctly, can reduce this risk significantly.” (p. 70)

“**Emergency contraception** only protects against pregnancy when a woman takes them after sex.” (p. 71)

“Discussion Questions:

- How does society portray women who have abortions?
- Do you think that a woman has the right to decide whether or not to continue with a pregnancy? Why or why not?
- Do you think that **women have a right to legal and safe abortions**? Why or why not?” (p. 72)

“**Women may choose abortion for a variety of reasons**: because they do not want children or any more children, because they want to postpone childbearing, because a pregnancy can pose a possible risk to their health or life, or because of coercion, either because they were raped or because a partner is insisting that they have an abortion. Abortion is a reality in every country regardless of its legal status; it is also a very sensitive topic and people often have different moral positions and arguments for or against abortion and a woman’s right to choose to have an abortion.” (p. 72)

“I feel so alone right now. I am in so much pain. I asked my friends for help and that is what I expected – their help! I wanted their support!! Even Peter did not want to be too involved...**he told me to have the abortion** but then wanted no part of it. He told me that it was my problem and that I would have to resolve it on my own since after all I was already 17 years-old...along with a whole host of other things... but I think he did say one thing that is true. It is my body and in the end I am the one who has to resolve this issue...but what he doesn’t understand is that it isn’t easy going through this all alone! In the end Anna, my friend from my dance class, was the person who helped me the most. She listened to me and **understood when I said that I couldn’t have this child now.**” (p. 73)

“**I never thought that one day I would have an abortion**, but I did. And now? The nurse talked to me about using a contraceptive method and told me that I had to return to the clinic in 15 days for another consultation. That day is approaching and I don’t know who will go with me.” (p. 73)

“Despite evidence that the physical, emotional and mental health of thousands

of women around the world is at jeopardy **when abortions are improperly carried out or are made illegal**, abortion continues to be a highly controversial subject, often raising moral, religious, ethical, and legal questions. On one side, there are those who recognize abortion as a public health issue and as **a basic sexual and reproductive right of women.**" (p. 74)

"Discussion of abortion should be contextualized within broader discussions of sexual and reproductive rights, including access to safe and adequate health services and family planning methods. In the case of adolescents and young people, it is important to discuss their specific necessities and the obstacles they face to obtaining proper information and the adult-centric vision which often appears when discussing the sexual and reproductive rights of this age group." (p. 74)

"It is necessary to **emphasize that abortion's illegality condemns all women**. In many cases, women attending obstetrical emergency services while undergoing a provoked or unprovoked abortion, or suffering complications resulting from the abortion, are treated like criminals." (p. 74)

"When an adolescent or adult woman undergoing an abortion reaches a health service facility, the most important thing is that she be properly treated and not judged." (p. 74)

"Fear of rejection: girls may be afraid of losing their boyfriends, and boys may also think that talking about contraceptives can jeopardize the sexual relationship. The quality of the attention given to the young woman – and her partner – **after the abortion** will influence their future decisions regarding their sexual and reproductive behavior. Studies have demonstrated that when partners participate equally in the selection of contraceptive methods, its use becomes more prolonged and efficient." (p. 74)

"In Latin America and the Caribbean, **pro-choice activists** have encountered many cultural, theological, and social barriers to **promoting safe access to abortion services.**" (p. 75)

12. PROMOTES PEER-TO-PEER SEX ED OR SEXUAL RIGHTS ADVOCACY

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.

“Collective dimension: refers to the **mobilization and empowerment** of a group of people, such as women. Individual empowerment cannot exist without collective gender empowerment within society as a whole. The group educational activities in this manual focus specifically on the individual and interpersonal levels by: **raising young women’s awareness about** gender inequities, **rights and health**; encouraging young women to think actively about their future; providing spaces for them to build positive peer networks; promoting knowledge of and access to supportive institutions; creating spaces for them to express their opinions and be heard; and helping them to develop the skills necessary to act in more empowered ways.” (p. 15)

“Ask the participants what comes to mind when they hear ‘**human rights**.’ On a flip chart write the words and phrases that the participants provide.” (p. 21)

“An important step is to ensure that more women are **aware of their rights and how to exercise them**. In these activities, you will further explore different rights, including **sexual and reproductive rights** and working rights. You should feel encouraged to share these discussions and information with others in your lives and community.” (p. 22)

“**What are Sexual and Reproductive Rights?** builds upon this discussion of human rights and provides an opportunity for in-depth discussion on rights related to sexuality and reproduction.” (p. 22)

“*Exercising My Rights* provides an opportunity for participants to **develop action plans on how to promote rights** around a very specific issue in their community.” (p. 22)

“**Being aware of our sexual and reproductive rights** is an important step toward ensuring our sexual and reproductive health and having more equitable and fulfilling intimate relationships.” (p. 61)

“For example, sex is not always linked to reproduction – **people have the right to experience sexual pleasure** without any intention of reproduction.” (p. 61)

“Rarely is the **right to sexual pleasure** recognized or discussed, and neither are the factors necessary to realize sexual pleasure, which include a positive body image; the capacity to have relationships based on responsibility and respect; and the practice of good sexual health, from prevention of STDs and HIV to regular medical check-ups.” (p. 61)

“The International Conference on Population and Development (1994) and the Fourth World Conference on Women (1995) were international milestones in the **recognition of sexual and reproductive rights**, broadening the language of human rights to include sexuality.” (p. 62)

“Explain to the group that you are going to **talk about sexual and reproductive rights, which are part of human rights**.” (p. 63)

	“What are the biggest obstacles that women face in protecting their sexual and reproductive rights?” (p. 64) “Sexual rights and reproductive rights are fundamental to human rights and belong to both women and men of all ages. These rights include the right to make autonomous decisions about one’s sexual and reproductive life, free from coercion or violence, and the right to the information and methods necessary to make safe and healthy decisions in this area.” (p. 64) “Right to choose sexual partners without discrimination. Each person has the right to choose his or her partner without suffering any discrimination.” (p. 65) “Everyone has the right to their own positions and values and those should be respected. However, it is important to also consider the issue of abortion from a public health and human rights perspective. In places where abortion is legally restricted or not universally available, many girls and women die or suffer disabling injuries trying to end unwanted pregnancies. Often, women from upper socio-economic classes are able to access safe abortion services most easily, even in settings where abortion is restricted or illegal, whereas women from lower income classes are usually only able to access safe services where abortion is legally and freely available, and even then they may face obstacles.” (p. 72) “Activities that encourage participants to reach wider audiences through ‘letters to the editor’ about a specific subject are widely utilized and efficient vehicles for the promotion of a continuous public forum” (p. 125) “Young women must realize both that these laws and norms were created by groups of people – i.e., that they are not innate and immutable – and that they themselves can propose and enact changes to these laws through political mobilization. Through these realizations, young women may begin to develop a critical consciousness and recognize their own power to shape their lives and communities. In this sense, participation becomes an essential tool for both learning and empowerment.” (p. 123)
13. UNDERMINES TRADITIONAL VALUES AND BELIEFS <i>May encourage children to question their parents’ beliefs or their cultural or religious values regarding sex, sexual orientation or gender identity.</i>	“Gender – refers to the socially constructed differences and inequalities between men and women (for example, how they should dress and behave). These ideas and expectations are learned through families, friends, religious and cultural institutions, schools, workplaces and the media.” (p. 13) “Empowered young women... Are encouraged to think actively about the future; Make autonomous decisions about body, health and sexuality.” (p. 14) “Both women and men often face rigid expectations regarding how they should act and what their roles in families, communities and societies should be. These expectations can limit individuals from expressing their full interests or potential, including how they want to dress, who they want to love, what career they choose to pursue, and the roles they want to assume in their intimate and

	family relationships.” (p. 31) “Different types of fundamentalism create strong barriers to young women freely experiencing desire, pleasure and other basic human rights. In a more extreme example, in some countries women endure genital mutilation designed to reduce or eliminate their experience of sexual pleasure.” (p. 88)
14. UNDERMINES PARENTS OR PARENTAL RIGHTS <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>	“Right to sexual health, which requires access to all types of quality sexual health information, education and confidential services. Right to information and confidential services.” (p. 65) “Establish ground rules regarding listening, respect for others, confidentiality, and participation.” (p. 133)
15. REFERS CHILDREN TO HARMFUL RESOURCES <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> <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> <i>(For more information on how Planned Parenthood sexualizes children for profit see</i>	“This manual is also accompanied by a no-words cartoon video called ‘Once Upon a Girl.’” (p. 10) Note: <i>This video shows explicit cartoon images of a naked young woman masturbating while fantasizing about adult men, then having sex and navigating a pregnancy. It can be viewed at this link: https://youtu.be/uX8lyl-5nr4?si=CcNv6KF6iD--l-wp</i> “Taken from AVERT (www.avert.org) and The Female Health Company (www.femalehealth.org).” (p. 68) Note: <i>The Female Health Company Website is no longer in service.</i> “The video <i>Afraid of What?</i> tells the story of a young gay man and helps to promote discussions about homophobia and its consequences on individuals and relationships, including with friends and family (Produced by the H Alliance. For more information visit www.promundo.org.br.)” (p. 78) “Online Resources for Women’s Health: • Atmosfera Feminina www.atmosferafeminina.com.br in Portuguese • Mulheres de olho www.mulheresdeolho.org.br in Portuguese • Manual do adolescente www.adolescente.psc.br in Portuguese • Catolicas pelo direito de Decidir www.catolicasonline.org.br in Portuguese • Women’s Health www.womens-health-clinic.com in English

www.WaronChildren.org and
www.InvestigateIPPF.org)

- **United Nations – Women Watch** www.un.org/womenwatch in English
- **Gender Equality and the Millennium Development Goals** www.mdgender.net in English” (p. 134)

“Online Resources for Sexual and Reproductive Rights:

- **World Health Organization** www.who.int/reproductive-health in English and French
- **Ipas** www.ipas.org in English, Spanish and Portuguese
- **SOS Corpo** www.soscorpo.org.br in Portuguese” (p. 134)

“Online Resources for Sexual Diversity:

- **Gay and Lesbian National Hotline** www.glnh.org in English and Spanish
- **National Association of LGBT Community Centers (NALGBTCC)** www.lgbtcenters.org in English
- **Parents, Families, and Friends of Lesbian ands [sic] Gays (P-FLAG)** www.pflag.org in English
- **Gay Health** www.gayhealth.com in English
- **Gaydar @ Scarleteen** www.scarleteen.com in English
- **Agência GLBTS** www.agenciagls.com.br in Portuguese
- **Freetobeme** www.freetobeme.com/ in English and Spanish
- **Fundación Triángulo** www.fundaciontriangulo.es in English and Spanish
- **ABGLT** www.abglit.org.br in Portuguese, English and Spanish” (p. 134)

“Online Resources for Abortion:

- **National Abortion Federation (NAF)** www.prochoice.org in English, Spanish and French
- **Abortion Access Project** www.abortionaccess.org in English
- **Mujeres en red** www.nodo50.org/mujeresred in Spanish” (p. 135)

Other Online Resources:

- **International Planned Parenthood Federation** www.ippfwhr.org in English and Spanish
- **Planned Parenthood Federation of America (PPFA)** www.plannedparenthood.org in English (p. 135)

Note: Many of these links are no longer active, but they are copied as given in the manual.