

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 *Self-Care Toolkit on SRHR and HIV for Young People* Based on 15 Harmful Elements Commonly Included in CSE Materials

CSE HARMFUL ELEMENTS SCORE = 10 OUT OF 15

Self-Care Toolkit on SRHR and HIV for Young People 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: “It is all about empowering all Young People involved in You(th) Care and beyond, partners at regional, national, and local levels to: Increase their understanding of self-care and its principles, coping strategies, and rights-based responses. It is all about protecting our rights to bodily autonomy and integrity, and tackling the key SRHR challenges we face in Kenya, Tanzania, Zambia, and the East and South African regions. Equip self-care champions like you with the resources and know-how to be super effective advocates! Let us rock it and make sure self-care is included in the health system.” (p. 5)

Target Age Group: Youth

International Connections: Aidsfonds, ARASA, Ambassador for Youth and Adolescent Reproductive Health Programme (AYARHEP), Children’s Dignity Forum (CDF), Copper Rose Zambia (CRZ), Network for Adolescent and Youth of Africa (NAYA), The National Network of Young People Living with HIV and AIDS in Tanzania (NYP+), Paediatric AIDS Treatment for Africa (PATA), and Global Network of Young People Living with HIV (Y+ Global).

For the complete text of *Self-Care Toolkit on SRHR and HIV for Young People* see:

https://drive.google.com/file/d/1wq2i61JgqljtnOMDmS4ce5EiaT5FShf/view?usp=drive_link

HARMFUL CSE ELEMENTS	EXCERPTED QUOTES FROM CSE MATERIAL
<p>1. SEXUALIZES CHILDREN</p> <p><i>Normalizes child sex or desensitizes children to sexual things. May give examples of children having sex or imply</i></p>	<p>Toolkit Objective: “Increase their understanding of self-care and its principles, coping strategies, and rights-based responses. It is all about protecting our rights to bodily autonomy and integrity, and tackling the key SRHR challenges we face in Kenya, Tanzania, Zambia, and the East and South African regions.” (p. 5)</p> <p>“HIV self-testing allows young people to regularly test themselves, adopt low-</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><i>many of their peers are sexually active. May glamorize sex, use graphic materials, teach explicit sexual vocabulary, or encourage discussion of sexual experiences, attractions, fantasies or desires.</i></p>	<p>risk sexual behaviors, and maintain good sexual health to continue preventing HIV.” (p. 18)</p>
<p>2. TEACHES CHILDREN TO CONSENT TO SEX</p> <p><i>May teach children how to negotiate sexual encounters or how to ask for or get “consent” from other children to engage in sexual acts with them.</i></p> <p><i>Note: “Consent” is often taught under the banner of sexual abuse prevention. While this may be appropriate for adults, children of minor age should never be encouraged to “consent” to sex.</i></p>	<p>“Taking care of your sexual health is empowering! Understanding your body, negotiating for safer sex, and making informed decisions keep you safe and confident in your relationships.” (p. 7)</p> <p>“Empower yourself to identify and negotiate the use of HIV prevention methods, like condoms, oral and injectable PrEP, PEP, U=U, dapivirine ring. Make your own choices in a relationship, including negotiating abstinence if that is what you decide.” (p. 15)</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>No evidence found.</p> <p><i>Note: Though this program does not specifically promote oral and anal sex, it does link to Scarleteen and other resources that do.</i></p>
<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</i></p>	<p>“Shout-out to the amazing adolescent girls and young women, young people living with HIV, young sex workers, young people who use drugs and awesome young people who identify as LGBTIQ+. You(th) Care Partners from Kenya, Tanzania, and Zambia, you all totally rocked it and made a huge difference!” (p. 4)</p>

<p>homosexuality or homosexual sex.</p>	
<p>5. PROMOTES SEXUAL PLEASURE</p> <p><i>Teaches children they are entitled to or have a “right” to sexual pleasure or encourages children to seek out sexual pleasure. Fails to present data on the multiple negative potential outcomes for sexually active children.</i></p>	<p>No evidence found.</p> <p>Note: <i>Though this program does not promote sexual pleasure, it does link to Bedsider and other resources that do.</i></p>
<p>6. PROMOTES SOLO AND/OR MUTUAL MASTURBATION</p> <p><i>While masturbation can be part of normal child development, encourages masturbation at young ages, which may make children more vulnerable to pornography use, sexual addictions or sexual exploitation. May instruct children on how to masturbate. May also encourage children to engage in mutual masturbation.</i></p>	<p>No evidence found.</p> <p>Note: <i>Though this program does not promote masturbation, it does link to Amaze and other resources that do.</i></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>

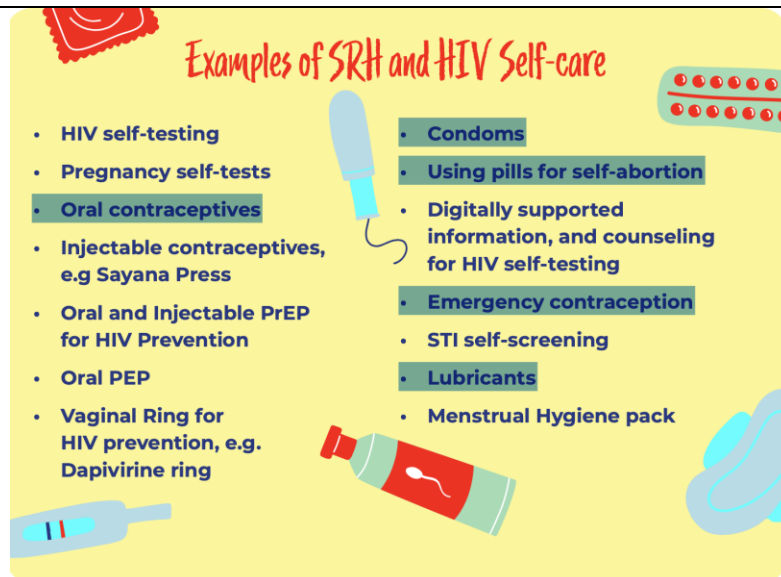
<p>8. PROMOTES PREMATURE SEXUAL AUTONOMY</p> <p><i>Teaches children they can choose to have sex when they feel they are ready or when they find a trusted partner. Fails to provide data about the well-documented negative consequences of early sexual debut. Fails to encourage sexually active children to return to abstinence.</i></p>	<p>“Autonomy: It is all about YOUR choices! You have the right to decide what is best for your SRH and HIV care based on your beliefs and background.” (p. 6)</p> <p>“Sexual and Reproductive Health and HIV self-care is all about your physical, emotional, and social well-being concerning sexuality, relationships, and reproductive choices.” (p. 7)</p> <p>“Why is self-care getting so much love lately? It is all about empowering! You get to make informed choices about your health and well-being! Plus, it tackles barriers to accessing healthcare, keeps things private, and works together with existing healthcare systems. It is all about using technology and flexibility to meet YOUR needs and improve your health!” (p. 7)</p> <p>“SRHR self-care refers to strategies that allow individuals to take control of their own sexual and reproductive health needs. These strategies allow individuals to make informed choices and decisions regarding their sexual and reproductive health needs and to do so free from discrimination, coercion and violence. It is all about your physical, mental, and social well-being concerning sexuality, relationships, and reproductive choices. This allows individuals to achieve bodily autonomy and integrity.” (p. 12)</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>“In a village, Amara (18 years) and Tonde (19 years) fell in love. As their relationship blossomed, they began exploring intimacy without protection.” (p. 10)</p> <p>“Regular self-testing, sampling, and monitoring are essential for good health and well-being. It helps prevent diseases, like HIV and self-testing for safer sex decisions.” (p. 14)</p> <p>“HIV self-testing allows young people to regularly test themselves, adopt low-risk sexual behaviors, and maintain good sexual health to continue preventing HIV. Oral PrEP, the Dapivirine vaginal ring, injectable Cabotegravir and condoms are all HIV prevention methods.” (p. 18)</p>
<p>10. PROMOTES TRANSGENDER IDEOLOGY</p> <p><i>Promotes affirmation of and/or exploration of diverse gender identities. May teach children they can change their gender or identify as multiple genders, or</i></p>	<p>“The following may cause mental health issues related to SRHR and HIV: Stigma and discrimination can really affect your mental well-being. Fear of judgment or isolation because of your sexual orientation, gender identity, or HIV status can lead to stress and anxiety.” (p. 21)</p>

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.

11. PROMOTES CONTRACEPTION/ABORTION TO CHILDREN

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.

May encourage the use of contraceptives, while failing to present failure rates or side effects.



(p. 7)

“And finally, self-administration! It is like self-injection, but you can use other ways to take medication too. Like **self-administering self-abortion pills**. For more information on self-administered abortion, read: WHO recommendations on self-care interventions and Understanding abortion.” (p. 12)

“**Safe sex practices: Super important!** Use condoms like a pro and explore PrEP for added protection against HIV and other STIs.” (p. 32)

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

“**Creating an SRHR and HIV peer support group:**

- Partnering – identify potential partners, like NGOs providing SRHR and HIV self-care services in your area.
- Define your purpose – Set clear goals for the support group to improve collective care and support self-care, along with ground rules.
- Define participants and mobilization strategies.
- Facilitation – Decide on a facilitator’s role, either one person or rotating roles, ensuring a safe space.
- Structure of meetings – Determine meeting frequency, timing, and duration.
- Logistics – Plan for refreshments, transportation, and any required materials.” (p. 25)

abortion.

“Key Points to Remember:

- **When creating a peer support group**, there is no one-size-fits-all approach. The most important thing is to ensure the group is safe and respectful for all participants.
- Encourage open discussions and provide practical coping strategies in peer support groups to support SRHR and HIV self-care.
- Healthcare providers play a vital role in promoting collective care for improved self-care, offering correct information, and improving access to SRHR and HIV services.
- Involving communities in **SRHR interventions for young people** can create a whole system of collective care, supporting their journey towards better self-care. Young people need empathy, understanding, and support in their mental well-being journey, and self-compassion is essential in taking care of their mental health.” (p. 26)

“Strategies for **advocating self-care in healthcare** settings include:

- Raising awareness and education campaigns: Educate healthcare professionals about youth SRHR and HIV self-care.
- Collaborating: **Partner with youth-led organizations** for a bigger impact.
- Policy advocacy: Engage policymakers to prioritize youth SRHR and HIV self-care.
- Promote youth-friendly spaces: Create comfortable environments in healthcare settings.
- Mobilizing youth voices through social media.
- Organizing creative community events e.g. music galas.” (p. 27)

“Below are some channels we can use - please do add more!

Social Media: Share information, stories, and hashtags.

Blogging/Vlogging: Create content on SRHR and HIV.

Collaborating: Partner with organizations and campaigns.

Workshops/Webinars: Educate and engage people.” (p. 28)

“Let’s create an advocacy plan using the steps below:

1. **Think about the aspect of self-care you want to collectively advocate for.**
2. Determine your stakeholders who are the people who can change your issue, who are the people who are likely to oppose and who are the people who can support you.
3. What strategy would you like to use to implement your advocacy plan?
TIP: Choose a method that best suits the population you intend to reach with your advocacy messages on self-care.
4. What channels will you use?
TIP: Consider the most effective ways to spread awareness and empower others to prioritize self-care.
5. What is your timeline?
6. How will you know if you have been successful or not?
TIP: Set a clear goal and objectives for your advocacy plan.” (p. 28)

<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>“Give an example of tests young people can do and how often. For HIV testing, self-tests can be done every 3 months if at risk, or every 6 months with safer sex.” (p. 14)</p> <p>“Advocating for self-care is not just about you, it is about your whole community too! Here is why community-centered self-care advocacy is super important:</p> <ul style="list-style-type: none"> • Community well-being: When everyone in the community practices self-care, it creates a culture of wellness and support, making everyone feel better! • Education and awareness: We need to spread the word about self-care to everyone in the community. Workshops, events, and sharing information can help people learn about self-care. • Inclusivity: Self-care should be for everyone in the community, no matter who they are. • Collaborative approach: Teamwork makes the dream work! We can achieve more when we work together with organizations, healthcare providers, and community leaders. • Resource sharing: Everyone should have access to the resources they need for self-care. This means mental health services, support groups, and more! • Peer support: Supporting each other is a big part of self-care. Peer support groups can be a great way to share experiences and help each other out.” (p. 29)
<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>No evidence found.</p>
<p>15. REFERS CHILDREN TO HARMFUL RESOURCES</p> <p><i>Refers children to harmful websites, materials or outside entities. May also specifically refer children to Planned Parenthood or their affiliates or partners for their lucrative</i></p>	<p>“Explore SRHR self-care interventions existing in your country or community, like HIV self-testing, oral and injectable contraceptives, HPV sampling, adhering to HIV medications, pregnancy testing, taking PrEP and PEP, etc.” (p. 11)</p> <p>“Additional Resources to Explore:</p> <ul style="list-style-type: none"> • Advocates for Youth (www.advocatesforyouth.org): This organization focuses on promoting young people’s sexual and reproductive health and rights. Their website offers educational resources, fact sheets, and advocacy tools.

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.InvestigateIPPF.org)

- **amfAR Youth Resources** (www.amfar.org/youthresources): The Foundation for AIDS Research (amfAR) offers resources specifically aimed at young people regarding HIV prevention, treatment, and support.
- **Bedsider** (www.bedsider.org): This website offers information about birth control methods, sexual health, and relationships. It includes interactive tools to help young people find the right birth control method for them.
- **CDC-Info on Adolescent Health** (www.cdc.gov/healthyouth/index.htm): The Centers for Disease Control and Prevention (CDC) provides information on various aspects of adolescent health, including sexual health, HIV prevention, and self-care tips.
- **Go Ask Alice!** (www.goaskalice.columbia.edu): A health Q&A website run by Columbia University's Health Services. It covers a wide range of topics, including sexual health and self-care for young people.
- **Love is Respect** (www.loveisrespect.org): A website focused on promoting healthy relationships and preventing dating abuse. It offers resources and support for young people navigating relationships.
- **My PrEP Experience** (www.myprepexperience.blogspot.com): A blog that shares personal experiences and information about Pre-Exposure Prophylaxis (PrEP), a preventive HIV medication.
- **Planned Parenthood** (www.plannedparenthood.org): Planned Parenthood provides information on sexual health, birth control, STI testing, and other services. They have a section dedicated to resources for young people.
- **Scarleteen** (www.scarleteen.com): A comprehensive sex education and information website for young people. It covers various topics related to sexual health, relationships, and self-care.
- **Youth Tech Health** (www.yth.org): YTH is a nonprofit organization that uses technology to improve the health and well-being of young people. Their website offers resources and tools on sexual health, including HIV prevention and care.
- **One2OneKenya** (one2onekenya.org/): The place for all young people in Kenya to get accurate information on their sexual and reproductive health.
- **Love Matters Africa:** lovemattersafrica.com/love-relationships/
- **Y+ Global** webpage on self-care: www.yplusglobal.org/projects-self-care-young-people-taking-control/ (pp. 33-34)

“Additional Resources to Listen:

- **Podcast on SRHR and HIV Self-care:** <http://www.youtube.com/watch?v=aHiRzfDviaY>
- **Young Voices; Y+ Global** podcast: www.yplusglobal.org/young-voices-podcast
- **Self-care for Youth by Young, a SCTG Podcast:** www.psi.org/project/self-care/self-care-for-youth-by-youth/
- **The WAVE Podcast paper II:** [Access to sexual and reproductive health and rights for women and girls living with HIV](http://www.wavepodcast.org/access-to-sexual-and-reproductive-health-and-rights-for-women-and-girls-living-with-hiv)

- **Young and Powerful with Choice for Youth, and Sexuality podcasts:** www.choiceforyouth.org/news/podcast/?acceptCookies=64ca4b937b39a
- **Y+ Global Selfcare podcasts:** podtail.com/da/podcast/young-voices-the-y-global-podcast/championing-self-care-lessons-from-nigeria-and-uga/ (p. 34)

“Additional Resources to Watch:

- **WHO Self-care Interventions for Health:** youtu.be/hwGPJDQNYoo
- **What is Self-care: Mental Health Series:** youtu.be/EguDLVf5x_U
- **Self-care:** youtu.be/LY4i5CSn7AA” (p. 34)