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

Get Real: Comprehensive Sex Education That Works 6th Grade

Based on 15 Harmful Elements Commonly Included in CSE Materials

CSE HARMFUL ELEMENTS SCORE = [14 OUT OF 15]

Get Real: Comprehensive Sex Education That Works contains [14 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: Get Real is a middle school curriculum produced by Education, Training and Research (ETR) and Planned Parenthood League of Massachusetts (PPLM). It is targeted at children in Grades 6, 7 and 8, or 11-14 year olds. Children are encouraged to think about and discuss sex and sexuality in a number of ways. Lessons include a lot of open discussion of a variety of sexual behaviors. Children are taught about condoms and, optionally, how to use them. Masturbation is encouraged through extensive discussion of the practice and frequent assurance that "it's okay."

While a number of activities are ostensibly designed to prompt family discussion and include parents, the very same activities encourage students to form their own values, emphasizing that those values may be different from their parents'. The teacher also provides information about "other resources" to answer their questions. Resources listed in the curriculum include Planned Parenthood and similar graphic resources.

Target Age Group: This is the rubric for the sixth grade curriculum (11-12 year olds).

Planned Parenthood Connections: This curriculum is produced by Planned Parenthood League of Massachusetts and ETR.

For more information on *Get Real: Comprehensive Sex Education That Works* see https://www.etr.org/ebi/programs/get-real/.

HARMFUL CSE ELEMENTS	EXCERPTED QUOTES FROM CSE MATERIAL
1. SEXUALIZES CHILDREN	"adolescents require a comprehensive understanding of sexual health, sexuality and protection methods, which they will need when they become sexually active." (p. iii)

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.

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.

Get Real defines abstinence as "voluntarily choosing not to engage in certain sexual behaviors, including any sexual behaviors that can result in pregnancy or STIs, including HIV. People may have different ideas about what constitutes abstinence, from no sexual contact of any kind, including kissing, to abstaining only from sexual intercourse, and all points in between." (p. 6-66)

Note: This definition of abstinence comes from Sexuality Information and Education Council of the United States (SIECUS), an organization which provides a great deal of sexually explicit information and is closely linked to Planned Parenthood. The definition implies that the only sexual behaviors to avoid are those that can cause pregnancy or an STI.

"Explain that Get Real is about more than discussing sexual behavior." (p. 6-2)

"Ask students: What rights do you need to have in order to feel safe talking about body changes and sexual health?" (p. 6-2)

"What would you need to do to help your classmates feel safe talking about body changes and sexual health?" (p. 6-2)

"Encourage students to interact and begin talking about sexuality." (p. 6-3)

"What if the question were to find someone who knew a slang word for the body part "breast"? What does that say about our society's comfort level around sex/sexuality /body parts?" (p. 6-4)

"What is the difference between sex and sexuality? Elicit a definition of "sex" from the students (biological sex or sexual behaviors) and explain that sex is one part of sexuality. Emphasize that sexuality is not one defined thing but a combination of many aspects, including values, relationships, self-expression, and romantic or sexual feelings. Stress that sex is one part of sexuality and that throughout the Get Real classes, students will be looking into all that makes up sexuality, including puberty, body functions and feelings." (p. 6-4)

"Inform students that romantic relationships with people who are significantly older are **much more likely** to be sexual than when people date someone close to their own age." (p. 6-23)

"Troy got an erection in math class today. He hopes no one saw it." (p. 6-58)

"How do you think a person knows for sure whether he or she is **ready to have sex**?" (p. 6-59)

"1. Your friend sent a sexy picture of herself to her crush. Without her knowledge, someone emailed it to everyone you know. What do you do? 2. You overhear your older sister talking to her boyfriend about having sex. Your sister tells you to swear you won't tell anyone. She says it's none of your business. What do you do?" (p. 6-76)

"Divide students into groups of four or five. Instruct them to brainstorm as a group all the things, including topics, messages and SEL skills that help define "sexuality." Their goal is to come up with more ideas than any other group." (p. 6-80)

"Ask students to think of all the parts of sexuality that came up during the brainstorming for the review contest. Prompt: "Think of someone younger who looks up to you. What message would you want to give this person about sexuality?"" (p. 6-82)

"Remember, sexuality isn't just about sex. Sexuality includes gender, reproduction and sexual activity, but it's also much more. Sexuality involves feelings, attitudes, intimacy, caring, messages about being male and female, body image and sexual orientation." (p. 6-85)

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 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.

"Teacher Note: In discussing assertive communication, be sure to model examples of passive communication and aggressive communication to show assertive communication as a positive contrast. For students who have difficulty standing up for themselves, be sure to discuss the **benefits of assertive communication** and show the connection between clear communication and healthy relationships." (p. 6-11)

Note: This is far beyond the ability of an 11- or 12-year-old especially when applied to communication regarding sexuality.

"Introduce the concept of consent: getting a person's **permission to engage in an activity**. Explain that consent is important in everything from teasing to sexual behavior." (p. 6-23)

"Any sexual behavior (talking, kissing, touching, sex) should be **mutually consensual**. Both people must agree to participate." (p. 6-23)

"Consent is about **doing something because you want to**, not because you feel pressured or manipulated." (p. 6-23)

Refusal Skills Demonstration: "Process a scenario and **demonstrate key refusal skills."** (pp. 6-81 and 6-82)

"1. In which situation is a person giving consent for sexual activity?

- a. If they say "yes" enthusiastically
- b. If they are drunk and go along with it
- c. If they don't say anything
- d. If they are pressured into saying yes" (p. 6-93)

Note: The preceding examples lead children as young as 11 to consider consenting to sexual activity.

3. PROMOTES ANAL AND ORAL SEX

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.

"Teacher Note: Definitions: Vaginal sex: penis to vagina, **Anal sex**: penis to anus, **Oral sex**: mouth to genitals (penis or vulva)" (p. 6-65)

"Intercourse, including oral, vaginal or anal intercourse" (p. 6-104)

"When discussing sexual behaviors that can result in pregnancy or STIs, you should briefly **define oral, anal and vaginal sex** as follows:

Vaginal sex: penis to vagina Anal sex: penis to anus

Oral sex: mouth to genitals (penis or vulva)" (p. 6-134)

"Sexual abstinence: Choosing not to engage in behaviors that could lead to pregnancy or STI transmission, including vaginal, anal and oral intercourse." (p. 6-141)

Note: This definition implies that the only sexual behaviors to avoid are those that can cause pregnancy or an STI.

"Discuss motivations for sex and define sexual abstinence. State that, before talking about sexual abstinence, it's important to first ask why people might choose to have sexual intercourse (define if needed as vaginal, **oral and/or anal**)." (p. 6-65)

4. PROMOTES HOMOSEXUAL/ BISEXUAL BEHAVIOR

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.

"Prostate: a gland under the bladder that contains pleasure sensors and produces fluids that mix with sperm to make semen." (p. 6-31)

5. PROMOTES SEXUAL PLEASURE

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.

"Penis: an organ made of soft, spongy tissue and blood vessels, used for reproduction, urination and **pleasure**. When the penis becomes erect, or "hard," its tissues fill with blood. This is called an erection." (p. 6-31)

"Vagina: the passageway that connects the uterus to the outside of the body. It serves as the birth canal and provides a way for menstrual fluid to leave the body. It is also used for pleasure." (p. 6-41)

"Clitoris: a small mound of skin that contains many nerve cells and is very sensitive to touch. Its only purpose is pleasure. It is located between the labia at the top of the vulva." (p. 6-41)

"Sexual behavior usually involves touching oneself or another person or persons in ways that stimulate sexual feelings and pleasure." (p. 6-104)

6. PROMOTES SOLO AND/OR MUTUAL MASTURBATION

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.

"Teacher Note: ...masturbation is brought up in Activity 6.6-3 as a **healthy part of sexual activity** that some (though not all) people choose to engage in. See the Teacher's Guide pages for further explanation." (p. 6-51)

"Teacher Note: **Defining Masturbation -** You will most likely need to **define masturbation for the class** and offer more information about it, as discussed in the Teacher's Guide pages." (p. 6-54)

"Vincent overheard his older brother telling a friend **that he masturbated**. Vincent isn't sure what masturbation is." (p. 6-58)

May instruct children on how to masturbate. May also encourage children to engage in mutual masturbation. "Sexual behavior usually involves touching oneself or another person or persons in ways that stimulate sexual feelings and pleasure. Sexual behavior can include many different acts:

Talking about sex

Kissing

Hugging

Massage

Masturbation

Intercourse, including oral, vaginal or anal intercourse" (p. 6-104)

"Q: What is masturbation?

A: Masturbation is defined as touching, rubbing, and/or fondling one's own sex organs for pleasure and stimulation. There are no medical or safety concerns for people who **choose to masturbate**. It is a personal decision and a normal behavior for people **of all ages**. People may have different opinions about masturbation, often based on cultural or religious reasons. It's important to know that **it's OK to choose to masturbate**, and it's OK to choose not to masturbate." (p. 6-106)

"You may also **include information here about masturbation** as it relates to wet dreams, erections, etc. You might tell students that as they are starting to have sexual feelings, erections and wet dreams, masturbation may become a topic of conversation and questions." (p. 6-118)

"Masturbation is defined as touching, rubbing or fondling one's own sex organs for pleasure or stimulation. Masturbation is done to cause pleasurable sexual sensations and may result in orgasm. Masturbation is a safe sexual behavior because there is no risk for STIs or pregnancy. Masturbation, along with all other sexual activities, is something people may choose to do or not to do throughout their lives based on personal values. It's important for educators to talk openly about masturbation and dispel any myths about the health risks of masturbation. It should also be acknowledged that people have different beliefs and values about masturbation." (p. 6-130)

"The most important messages to emphasize:

- Masturbation is a healthy way to explore one's own body to find out what feels good.
- It's OK if someone masturbates. It's OK if someone doesn't masturbate.
- The idea of "too much" masturbation is a myth. Some people masturbate more often, some less often.
- In order to normalize masturbation, don't associate it solely with males.
- Whether to masturbate is a private decision, and masturbation should be done privately.
- Many males and females masturbate at various points in their lives." (p. 6-130)

"In scenario 1, Vincent's older brother talks about masturbating. Help the students process this scenario by asking the following questions: What slang words or phrases have you heard for masturbation? Do they apply to girls or boys? Why do you think that is? Discuss how masturbation is common for both males and females. This may also be a good point to talk about double standards regarding sexual desire." (pp. 6-130 and 6-131)

"Teen Talk: Sex and Masturbation: www.plannedparenthood.org/teen-talk/sex-masturbation/masturbating-25057.htm" (p. 6-131)

7. PROMOTES CONDOM USE IN INAPPROPRIATE WAYS

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.

Condoms are listed as an optional material for Lesson 6.4, Male Anatomy and Reproduction. (p. 6-29) *Remember that this course is aimed at sixth graders, who are ages 11-12.

"Discuss the role of condoms: Using the information provided in the box, explain the role of condoms in preventing these consequences (pregnancy and STIs). Emphasize that the healthiest choice for sixth graders is not to have vaginal intercourse. Condoms are the best choice for protecting against both pregnancy and possible STI transmission if a person is having sexual intercourse." (p. 6-33)

Note: Telling sixth graders that they shouldn't engage in intercourse but that condoms will keep them safe if they do, while also showing condoms and/or discussing how they work along with discussing consent, communicates an implied message that they can go ahead and engage as long as they use a condom.

"Explain the terms "protected sex" and "unprotected sex." Ask students what can happen without condom use (pregnancy, STI transmission). Ask students **where people their age** can get condoms. If appropriate, and as time permits, you may choose to show the students a condom and describe how it should be used." (p. 6-33)

"Teacher's Note - How Condoms Work: Condoms work to prevent pregnancy by covering the penis. This creates a barrier that stops the sperm and semen from entering the female reproductive organs. With a condom, the ejaculation is caught in the tip of the condom, which prevents the possibility of a sperm reaching an egg and creating a pregnancy. And, if either sexual partner has an STI, the condom also prevents the bacteria or virus from being transmitted from one person to the other.

"For a condom to be used properly, it needs to be put on **after the penis is erect but before contact** with the sexual partner. After ejaculation, the base of the condom should be held around the penis as it is withdrawn, to ensure that none of the semen or sperm leaks out. Condoms should be used only once. They should not be carried around in a pocket or wallet, because heat can weaken the condom over time." (p. 6-33)

"State reasons why postponement and condom use are healthy behaviors for sixth-graders." (p. 6-63)

Note: Just 30 pages earlier, "avoiding vaginal intercourse" was the healthiest behavior. Now postponement and condom use are identified as equally valuable, with condom use being identified as a "healthy behavior" for an 11-12 year old child.

"Using condoms can help reduce the risk significantly. The only way to know for sure if a person has an STI is to **get tested**." (p. 6-107)

This program seeks to:

- "Increase awareness of consequences when condoms and/or other protection methods are not used
- Increase knowledge of correct and consistent use of condoms and other protection methods
- Increase perceived risk in having an older partner
- Increase positive attitudes toward condoms and/or other protection methods
- Promote SEL skills to increase use of condoms and/or other protection methods Increase self-efficacy to demand the use of condoms and/or other protection methods" (p. x)

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.

"Some middle school students will not identify with the characters in role-play scenarios that deal with sexual activity. To reduce discomfort with these scenarios, teachers can tell students that the characters are older teens or young adults who need advice in order to make decisions." (p.vii)

"If young people have sexual feelings during puberty, does that mean they are **ready to engage in sexual activity**? What's the difference?" (p. 6-53)

"How do you think a person knows for sure whether he or she is **ready to have sex**?" (p. 6-59)

"Ask students how people can know if they're **ready to have sex**. Are they ready when their bodies change? Are they ready when their friends are ready?" (p. 6-65)

"How does delaying sex relate to **responsible decision making**?" (p. 6-59)

"Other people choose to be abstinent until a certain age or until they meet the right person and **feel ready for sex**. Deciding to put off sex until later is called 'postponement.' Can you think of any TV shows where characters have decided to postpone having sex? Why did they postpone?" (p. 6-133)

"Ask students: **What rights do you need to have** in order to feel safe talking about body changes and sexual health?" (p. 6-2)

"How do you think a person knows for sure **whether he or she is ready to have sex**?" (p. 6-59)

"Discuss motivations for sex and define sexual abstinence. State that, before talking about sexual abstinence, it's important to first ask why people might **choose to have sexual intercourse** (define if needed as vaginal, oral and/ or anal)." (p. 6-65)

9. FAILS TO ESTABLISH ABSTINENCE AS THE EXPECTED STANDARD

Fails to establish abstinence (or a return to abstinence) as the expected standard for all school age children. May mention abstinence only in passing. 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.

"When addressing abstinence with teens, educators must recognize that there is a range of ways in which people might define this term, from no sexual contact at all, to abstaining only from sexual intercourse." (p. iii)

"Get Real adopts the definition from the Sexuality Information and Education Council of the United States (SIECUS), which defines abstinence as voluntarily choosing not to engage in certain sexual behaviors, including any sexual behaviors that can result in pregnancy or sexually transmitted infections (STIs), including HIV." (p.iii)

"Teachers Note: People may have different ideas about what constitutes abstinence, from no sexual contact of any kind, including kissing, to **abstaining only from sexual intercourse, and all points in between.** (from SIECUS, "Guidelines for Comprehensive Sexuality Education, K-12")" (p. 6-66)

"People may have **different ideas about what abstinence is**. For some it means no sexual contact of any kind, including kissing. For others it can include everything but sexual intercourse. Still others fall somewhere in between. Some people choose to abstain from sex until marriage. Some decide to put off or postpone having sex until they are older." (p. 6-69)

Multiple-choice question: "Abstinence is:

- a. Breaking the law
- b. Pressuring your friends to do something
- c. Choosing not to engage in certain sexual behaviors
- d. A sexual act" (p. 6-88)

10. PROMOTES TRANSGENDER IDEOLOGY

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.

"Sexuality involves feelings, attitudes, intimacy, caring, messages about being male and female, body image and sexual orientation." (p. 6-85)

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.

Note: Teachers are instructed to "discuss condom use" and "how condoms work." See Section 7 of this analysis for details.

"Explain the terms "protected sex" and "unprotected sex." Ask students what can happen without condom use (pregnancy, STI transmission). Ask students where people their age can get condoms. If appropriate, and as time permits, you may choose to show the students a condom and describe how it should be used." (p. 6-33)

"State reasons why postponement and condom use are healthy behaviors for sixth-graders." (p. 6-63)

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

May train children to teach other children about sex or sexual pleasure, through peerto-peer initiatives. May recruit children as spokespeople to **Note:** This curriculum encourages extensive class discussion about sexual behaviors, with teachers encouraging students to talk. It encourages young children to think about critical value questions in a classroom setting apart from parents. Repeated emphasis on students making their "own decisions," while presenting information that favors early sexual activity, takes advantage of children's natural instinct to independently define oneself which occurs at this age.

"Create group **rights and responsibilities**. **Communicate with peers** about sexuality." (p. 6-1)

advocate for highly controversial sexual rights (including a right to CSE itself) or to promote abortion.

"Teacher Note: Be sure to include "confidentiality" in the list of **Rights and Responsibilities** and to explain your role as a trusted adult and mandated reporter." (p. 6-1)

"Teacher Note - Important rights and responsibilities to include: Feel positive about your sexuality" (p. 6-2)

13. Undermines Traditional Values and Beliefs

May encourage children to question their parents' beliefs or their cultural or religious values regarding sex, sexual orientation or gender identity.

"There are different kinds of values: Personal values come from our own experiences and are not necessarily agreed upon by everyone. For example, someone might tidy his or her room every day because of a value for cleanliness. Or different families may have different beliefs about when it's appropriate for people to begin engaging in sexual activity." (p. 6-69)

Note: The lesson goes on to list two other types of values, "cultural" and "universal." It is significant that values regarding sexual activity are categorized as "personal" and put on the same level as keeping a tidy room. This trivializes the gravity of sexual activity and presents children with the idea that whatever they decide about sexual behavior is acceptable.

One activity encourages students to stand up or sit down based on their agreement with a statement. Statements include:

"If two people are in love, they should have sex.

A couple should wait until they're married before trying to have a baby together. It's OK for people in high school to have sex. Having sex makes people cool."

Students then discuss their feelings about the activity, including:

- "3. What can make it difficult to **stand up for personal values?** What does "should" mean? Who decides what "should" happen?
- 5. How does it feel to make a decision that **goes along with your values?** How does it feel to make a decision that **goes against your values?**
- 6. How does it feel to make a decision that **goes along with/ goes against your peers?**" (p. 6-73)

Note: Implies personal values trump traditional or family values. Equates personal choice with personal values.

"State that parents usually take care of most decision making for their young children. Part of growing up, however, is getting the opportunity to make your own decisions. Learning how to make decisions can help young people deal with difficult situations and problems and follow through on their personal goals in ways that match their values." (p. 6-74)

Note: This activity tells children they are old enough to make their own decisions. Within the context of a curriculum about sexual behavior, the implication is that they are old enough to make their own decisions about sex. In addition to undermining family influence, it is legally false.

One of the questions in the Grade 6 Test Question Bank is: "7. One important factor in making a responsible decision is..." The correct answer is: "d. **Examining your personal values**" (p. 6-94)

"Express your opinions. The teacher's role is to provide factual information. Neither peers nor teachers should attempt to change a student's personal values or beliefs. People have the right to their own opinions." (p. 6-100)

"It is a personal decision and a normal behavior for people of all ages. People may have different opinions about masturbation, often based on cultural or religious reasons. It's important to know that it's OK to choose to masturbate, and it's OK to choose not to masturbate." (p. 6-106)

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.

Note: The curriculum repeatedly discusses and reinforces the idea that students can form their own "personal values." This term is used often and could encourage children to express their growing independence by forming values different from their parents'.

"Students who are concerned about asking a parent to participate may be able to complete the Family Activities with an alternate caring adult." (p. vii)

"Be sure to include 'confidentiality' in the List of Rights and Responsibilities" (p. 6-1)

"Teacher Note: Important rights and responsibilities to include:

- Privacy
- Confidentiality" (p. 6-2)

The "Find Someone Who..." handout mentions discussing sexuality with parents or other adults. "Tell students that this class may bring up a lot of thoughts and questions. Encourage them to share their feelings about this class and sexuality with adults who care about them and with whom they feel comfortable discussing sex and sexuality." (p. 6-5)

"Have each student take a minute to write down the names of three adults on their resources sheet that they can go to with questions or concerns about sexuality. This may be a parent, relative, teacher, coach, youth group leader, or other person in their lives. Explain that in addition to the caring adults they have listed, **there are other resources available to help them** address their questions." (p. 6-5)

"It's OK for parents and children to disagree about values. Examining values can be a powerful, positive influence on a child's developing sexuality." (p. 6-8)

"Assertive Communication Activity kit: Your parents say they don't like one of your friends, but that person is really important to you." (p. 6-15)

"Confidentiality. Confidentiality means that personal information will not be shared outside of the classroom with students, parents, other teachers, etc. Explain that one-on-one conversations between the teacher and student can be kept confidential unless the teacher has a concern about personal safety." (pp. 6-100 and 6-101)

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 Robie H. Harris, Children's book author:

It's Perfectly Normal: Changing Bodies, Growing Up, Sex and Sexual Health, illustrated by Michael Emberley

It's So Amazing!: A Book About Eggs, Sperm, Birth, Babies and Families, illustrated by Michael Emberley

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.InvestigateIPPF.org)

It's Not the Stork!: A Book About Birth, Babies, Bodies, Families, and Friends, illustrated by Michael Emberley (p. ii)

Lesson 6.6 Resources:

Teen Talk: Sex and Masturbation: www.plannedparenthood.org/teen-talk/sex-masturbation/masturbating-25057.htm

"The Parent Buzz is a bimonthly newsletter that contains helpful strategies for communicating with kids about sex and sexuality. It's a great resource for information, and offers tips for parents around talking with their children, current information about sexuality issues and trends, links to useful websites, and descriptions of adolescents' developmental stages. To receive The Parent Buzz, please visit www.pplm.org/education to sign up." (p. 6-36)

Note: This curriculum is created by Planned Parenthood League of Massachusetts, showing a clear conflict of interest since Planned Parenthood profits from increased sexual activity among young people.