

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

Putting the C in CSE: Standards for Content, Delivery, and Environment of Comprehensive Sexuality Education

Based on 15 Harmful Elements Commonly Included in CSE Materials

CSE HARMFUL ELEMENTS SCORE = 15 OUT OF 15

***Putting the C in CSE: Standards for Content, Delivery, and Environment of Comprehensive Sexuality Education* 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 publication is not a specific CSE program but is instead a set of standards on what the content of CSE programs should cover. It is also a guide for teachers in how to properly deliver CSE material to learners. These standards outline a sexual-rights based, sex-positive approach to teaching adolescents. They specifically state that an abstinence-only approach is ineffective and should not be used.

Target Age Group: No specific age group is given. “In the standards, we use the terms children, adolescents, and young people, and learners. By ‘learners’ we mean children, adolescents, and young people who participate in CSE sessions in formal and non-formal settings” (p. 5).

International Connections: Plan International; Sida, the Swedish International Development Cooperation Agency; Ministry for Foreign Affairs of Finland (MFA); Finland’s Development Cooperation

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 many of their peers are sexually active. May glamorize sex, use</i></p>	<p>“As part of an assignment, young people can collect and write stories about sexuality in the community. They can find out what positive and negative stories exist about sexuality and CSE in the community by talking to relevant stakeholders.” (p. 13)</p> <p>“Educators of younger children (i.e. below the age of 15) can find a sex-positive approach to CSE challenging due to socio-cultural taboos a round [sic] discussing sexuality openly.” (p. 29)</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.

graphic materials, teach explicit sexual vocabulary, or encourage discussion of sexual experiences, attractions, fantasies or desires.

“CSE programmes mainly focus on the dangerous sides of digital sex. However, **digital spaces can provide access to information, that young people cannot find elsewhere.** Social media also allows them to discuss personal issues with others, including sexual topics. They can **practice communicating about sex.**” (p. 30)

“CSE programmes need to include the following points:

- Explaining how physical aspects of sexuality work, **including arousal, desire, and orgasm**, with information on different ways to enjoy sex together or alone.
- How children, adolescents, and young people can take responsibility for their physical and emotional sexual and reproductive health and wellbeing...
- **Improving young people’s confidence regarding sex and sexuality.** Sexual confidence is a state of mind...
- Helping young people to find credible information about sex and sexuality online while staying safe.” (p. 31)

“Sex does not always take place in one physical space; it can also happen digitally. It is about **voluntarily sharing (private) photos, videos or texts of a sexual nature.** This is increasingly a part of sexual contact between (young) people all over the world.” (p. 30)

“Explain that penetrative sex can be as pleasurable as non-penetrative/ outercourse sex (outside vagina/anal), for example, mutual masturbation or oral sex. Discuss possible **advantages and challenges of engaging in outercourse practices.**” (p. 32)

“Use language you and learners feel comfortable with. For example, **ask learners what words they know for penis, vagina, intercourse, gay and lesbian and agree which words to use.** It is important to question and discuss words that are denigrating or discriminating.” (p. 51)



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(p. 53)

2. TEACHES CHILDREN TO CONSENT TO SEX

“The laws on **age of consent may create indirect barriers to young people’s access to SRH services.** CSE programmers need to keep in mind that laws on

<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>sexuality issues are often based on religious values or norms.” (p. 12)</p> <p>“Age of consent: Plan International supports laws that recognise children, adolescents and young people as rights-holders with evolving capacities and the maturity to make decisions about their own health, including their sexual and reproductive health and rights.” (p. 42)</p> <p>“For example, some 15-year-olds may be capable of making informed choices about getting involved in a sexual relationship with someone of their own or similar age. They may well be capable of understanding the risks involved, taking the necessary precautions and making informed judgments about the nature of the relationship they are embarking on.” (p. 42)</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>“Explain that penetrative sex can be as pleasurable as non-penetrative/ outercourse sex (outside vagina/anal), for example, mutual masturbation or oral sex.” (p. 32)</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 homosexuality or homosexual sex.</i></p>	<p>“...[H]omosexuality is still illegal in many countries. This makes this topic and discussion of LGBTIQ even more challenging to address in the classroom. As a programmer, it is important to explain the laws and discuss the complexity of an issue and to focus on fairness, tolerance and solidarity.” (p. 12)</p> <p>“You also need to be respectful of diverse sexual orientations, gender identities and expressions, and sexual activities so that all kinds of learners feel accepted and able to ask question.” (p. 16)</p> <p>“Ensure it is inclusive and respectful of diversity and non-judgmental of gender and sexuality.” (p. 18)</p> <p>“The issues of gender and sexual diversity are often neglected or are only superficially addressed in CSE.” (p. 21)</p> <p>“The CSE programme needs to address the heightened vulnerability of marginalised and excluded young people to violence, including young LGBTIQ people, those with disabilities, girls in extreme poverty and young people in conflict-affected areas. This could include creating a ‘safe space’ intervention.” (p. 26)</p> <p>“Many existing CSE programmes do not discuss sexual diversity or they simply give ‘additional’ information. Often it is assumed that everyone is heterosexual,</p>

a man or a woman, and any other orientation or identity is bad or needs explanation. CSE needs to **challenge heteronormativity** both in discussing topics and through processes.” (p. 35)

“**Coming out,**’ disclosing to people around you **your sexual orientation or gender identity,** is one of the dilemmas that young people face and will want to discuss with you. Research findings suggest that for openly LGBTIQ young people, having a strong relationship with their parents is good for their mental health an [sic] self-esteem, and may prevent them from having suicidal feelings, from substance use, and unsafe sex.” (p. 35)



(p. 36)

“Alternatively, when discussing falling in love, **mention that people fall in love with a friend of the opposite sex and others with a friend of the same sex.** In this case, the sensitive words of gay, lesbian or homosexual might be avoided but your lessons could still address more than only heteronormative situations.” (p. 36)

“An effective way to introduce these topics and to explain sexual identity, sexual orientation, sex, etc., is by using interactive exercises that help break down different concepts. Plan International has several resources for this, including:

- **‘Adolescents in all their Diversity’** which includes pre-and post-workshop online components as well as detailed activities to run face-to-face.
- Champions of Change module: **‘We are Diverse!’** which focuses on individual knowledge, attitudes, practices and skills **concerning sexual orientation,** gender identity and expression, and sex characteristics (SOGIESC).” (p. 37)

“**Social justice for all, including LGBTIQ,** may be applied and implemented differently in various national legal, political and cultural contexts, but the ultimate aim in CSE should always be to **advance inclusivity towards sexual and gender diversity,** addressing the needs and rights of all young people.” (p. 37)

“Explain and discuss all the **abbreviations in LGBTIQ (lesbian, gay, bi-sexual, trans, intersex, queer/questioning)** as well as the differences in needs of each subgroup.” (p. 38)

	<p>“For young LGBTIQ people it is often very difficult to ‘come out’ to their parents and family. They fear rejection and very negative reactions. Some parents do reject their child for being LGBTIQ, they try to change them, are shocked, or are silent.” (p. 78)</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>“CSE addresses sex and sexuality from a holistic perspective, looking at positive experiences such as pleasure, rather than focusing on negative ones such as risks and fear.” (p. 6 and p. 28)</p> <p>“Sessions need to address sexuality and the physical and emotional aspects of sexual relations in a similar way for girls and boys. For example, boys need to understand how girls can enjoy sexual relationships.” (p. 26)</p> <p>“Demystify myths around gender and sexuality, including that girls enjoy sex less than boys.” (p. 27)</p> <p>“The position and status of different gender identities need to be considered. Messages should emphasise that girls are capable, and can be in control, both generally and more specifically by learning how to enjoy sex, how to resist unwanted or unprotected sex and to insist on condom use, safety and their enjoyment.” (p. 27)</p> <p>“Therefore, CSE should address sexuality and sexual relationships not only from a risk perspective but also include positive and pleasurable aspects.” (p. 28)</p> <p>“Although there is no universal definition of sexual pleasure, a good starting point for describing ‘sex-positive’ approaches is: An attitude that celebrates sexuality as an enhancing part of life that brings happiness, energy and celebration. Sex-positive approaches strive to achieve ideal experiences, rather than solely working to prevent negative experiences.” (p. 29)</p> <p>“In its broadest sense, sex positivity is the idea that all sex, as long as it is consensual, is a positive thing. Sexual pleasure is the feeling we get when we are sexually aroused.” (p. 29)</p> <p>“Sex-positive CSE ultimately aims to support children, adolescents, and young people to achieve sexual wellbeing for themselves, and to realise their sexual rights and the rights of others. A focus on pleasurable, positive sexual experiences can help to open discussions towards safer sexual behaviours and stronger negotiation skills.” (p. 29)</p> <p>“Sexual pleasure and sexual wellbeing have an impact on sexual and reproductive health and social change. For example, CSE can provide an important forum for building solidarity between young people with varying degrees of access to privileges and sexual rights, including LGBTIQ and young people with disabilities.” (p. 29)</p> <p>“Positive approach:</p> <ul style="list-style-type: none"> • Includes messaging on sexuality as a source of pleasure and wellbeing

	<p>for everyone and highlights the importance of achieving ideal sexual experience.</p> <ul style="list-style-type: none"> • Recognises that sexual pleasure is an important reason why people have sex and that pleasure determines how we make decisions in our sex lives. • Actively promotes pleasure as a key ingredient for people to practise safer sex and use protection. • Promotes reflection and discussion on the links between sexual pleasure and sexual health, such as self-determination, consent, privacy, safety, communication, diversity, negotiation and confidence. • Promotes normalising messages about sexual pleasure within a sexual health and human (sexual) rights framework.” (p. 31) <p>“Introducing and discussing sexual enjoyment can be difficult because of feelings of shame and embarrassment, you will notice that by practising talking about sex and sexuality will make it easier and it will help learners to feel safe and free to talk about sensitive issues. You can start your CSE lessons by asking questions that allow opinions to be shared without self-disclosure.” (p. 32)</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>“CSE programmes need to include the following points: ...Explaining how physical aspects of sexuality work, including arousal, desire, and orgasm, with information on different ways to enjoy sex together or alone.” (p. 31)</p> <p>“The topic of masturbation can be particularly pertinent for young people, who are starting to explore their sexuality.” (p. 32)</p> <p>“Explain that masturbation can be a positive way to get to know your own body, without risk of STIs or pregnancy.” (p. 32)</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</i></p>	<p>“This evidence also states that messages should be clear and precise. For example, if you tell learners to wear condoms, explain exactly how, where and why they should wear a condom, preferably demonstrating the correct method of using a condom (WHO, 2013).” (p. 16)</p> <p>“Example condom use:</p> <ul style="list-style-type: none"> • Demonstration: show how to use a condom – little interaction. • Discuss personal attitudes/values towards condom use by group discussions (e.g. when a girl has a condom in her bag, she is asking for it) – interactive. • Practice skills: in communication and condom use (e.g. role play, practising rolling of condom on each other’s fingers) – interactive.” (p. 63)

<p><i>or deemphasize failure rates. May imply that condoms will provide complete protection against pregnancy or STIs.</i></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>“We have clear evidence that abstinence-only or abstinence-based education is ineffective, while CSE that promotes a positive view of sexuality and aims to enable learners to achieve ideal sexual experiences is more effective (UNESCO, 2018 a). You need to show you are comfortable about talking openly and positively about sexuality, sex and relationships, and what consent means.” (p. 16)</p> <p>Note: <i>Studies debunking this claim can be found at www.sexedreport.org.</i></p> <p>“Only by tackling the full range of topics will CSE truly enable learners to develop the attitudes and skills they need to take charge of their bodies, fertility, sexual activity – and to be able to freely decide whether, when and with whom they want to have sex or have children with.” (p. 18)</p> <p>“It is important therefore to allow them to make their judgments about their sexual lives while providing them with all the information and skills they will need.” (p. 20)</p> <p>“As sexual development starts already from birth, it is important to start CSE at a young age. CSE can help children to explore their sexual feelings and can support them in their sexual development.” (p. 43)</p> <p>“You need to be clear that you trust young people to be capable of making their own judgments and that most young people intend to manage their sexual health and relationship choices well, even if they make mistakes and have challenges along the way.” (p. 51)</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</i></p>	<p>“We have clear evidence that abstinence-only or abstinence-based education is ineffective, while CSE that promotes a positive view of sexuality and aims to enable learners to achieve ideal sexual experiences is more effective (UNESCO, 2018 a).” (p. 16)</p> <p>“Considerable scientific evidence accumulated over the past 20 years has found that abstinence-only programmes are not effective at preventing pregnancy or STIs, nor do they have a positive impact on age at first sexual intercourse, on the number of sexual partners, or other behaviours (Santelli et al., 2017).” (p. 16)</p> <p>Note: <i>Studies debunking these claims can be found at www.sexedreport.org.</i></p> <p>“Abstinence is still seen as an important – sometimes the only – behavioural message in a CSE programme due to prevailing cultural norms. In theory, abstinence is 100 per cent effective at preventing pregnancy and STIs. However, worldwide, many young people who intend to practise abstinence fail to do so, and they often also fail to use condoms or other forms of contraception when</p>

<p><i>good options for children.</i></p>	<p>they do have intercourse.” (p. 16)</p> <p>“Research in Africa shows that abstinence messages do not have much effect on the attitudes of young people, especially not on boys (Guttmacher, 2017).” (p. 16)</p> <p>“Ensure [the CSE programme] does not include abstinence-only approaches or fear-based messages which have been proven to be ineffective.” (p. 18)</p> <p>“You may need to reflect on your perspective about young people’s sexuality – i.e. if you believe that they need to be fearful of sex and abstain until marriage, you will need to understand why it is important to provide young people with a positive view of sexuality, which enables them to enjoy their bodies and enhances their sexual wellbeing.” (p. 20)</p> <p>“CSE should eventually go beyond the myth-busting of virginity (e.g. linking the hymen with sexual activity). It should no longer use the word and explain more about how first sexual experiences for both boys and girls can be safe and enjoyable.” (p. 26)</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 may present other unscientific and medically inaccurate theories. Fails to teach that most gender-confused children resolve their confusion by adulthood and that extreme gender confusion is a mental health disorder (gender dysphoria) that can be helped with mental health intervention.</i></p>	<p>“Gender: The concept of gender refers to the beliefs, expectations and norms about the roles, relations and values attributed to girls and boys, women and men. These expectations and norms are socially constructed; they are neither invariable nor are they biologically determined, and they can change over time.” (p. 22)</p> <p>“Gender identity: the personal sense of one’s gender. The innermost concept of self as male, female, a blend of both, or neither – how individuals perceive themselves and what they call themselves. One’s gender identity can be the same or different from their sex assigned at birth.” (p. 22)</p> <p>“Gender expression: the external appearance of one’s gender identity, usually expressed through behaviour, clothing, haircut or voice, and which may or may not conform to socially defined behaviours and characteristics typically associated with being either masculine or feminine.” (p. 22)</p> <p>“Transgender: An umbrella term for people whose gender identity and/or expression is different from cultural expectations based on the sex they were assigned at birth. Being transgender does not imply any specific sexual orientation. Therefore, transgender people may identify as straight, gay, lesbian, bisexual, etc.” (p. 22)</p> <p>“Gender equality: Gender equality means that all persons, regardless of their gender, enjoy the same status in society; have the same entitlements to all human rights; enjoy the same level of respect in the community; can take advantage of the same opportunities to make choices about their lives, and have the same amount of power to shape the outcomes of these choices. Gender equality does not mean that women and men, or girls and boys are the same. Women and men, girls and boys, and individuals with other gender</p>

	<p>identities have different but related needs and priorities, face different constraints, and enjoy different opportunities.” (p. 22)</p> <p>“The binary approach to gender, often used in CSE, ignores its complexity; the classification of gender into male and female does not encompass individuals who are born with non-binary reproductive organs (intersex) and excludes those who identify as lesbian, gay, bisexual, transgender, transsexual, queer and genderfluid, or as the third gender.” (p. 23)</p> <p>“The curriculum should include sessions that explain what gender, sex and sexuality mean, including gender identity and expression; social norms and values around gender, gender roles and expectations, and the fact that these are always changing...” (p. 25)</p> <p>“The position and status of different gender identities need to be considered.” (p. 27)</p>
<p>11. PROMOTES CONTRACEPTION/ABORTION TO CHILDREN</p> <p><i>Presents abortion as a safe or positive option while omitting data on the many potential negative physical and mental health consequences. May teach children they have a right to abortion and refer them to abortion providers.</i></p> <p><i>May encourage the use of contraceptives, while failing to present failure rates or side effects.</i></p>	<p>“Standard 2: Comprehensive information. CSE provides clear, comprehensive, accurate, non-judgmental information and includes substantive discussions on sex, sexuality, relationships and consent, contraceptive choices and abortion care.” (p. 6)</p> <p>“Other evidence states that while CSE should be culturally relevant and age- and context-appropriate, this does not mean avoiding sensitive issues like contraception, including emergency contraception, and abortion, including post-abortion care. It means that you strive to provide the most comprehensive information for learners that helps them clarify their values, understand the choices available, and make decisions that are good for them.” (p. 16)</p> <p>“Provide information on the full range of contraceptive choices and the ones that are available to them, including emergency contraception, safe abortion where legal, and post-abortion care in the event of unintended pregnancy.” (p. 18)</p> <p>“Have CSE content that is based on scientific evidence, and that covers the full range of topics including sex, sexuality, relationships and consent, contraception and abortion.” (p. 18)</p> <p>“Adhering to harmful gender norms results in gender-based violence, less likelihood of contraceptive or condom use, low power of girls and women in sexual relationships, resulting in higher rates of STIs and HIV.” (p. 23)</p> <p>“CSE needs to facilitate access to SRH services including contraceptives, STI/HIV treatment and safe abortion care where legal.” (p. 83)</p>
<p>12. PROMOTES PEER-TO-PEER SEX ED OR SEXUAL RIGHTS</p>	<p>“The United Nations Convention on the Rights of the Child (CRC) states that all young people have the right to complete and evidence-based information, to participation and protection. CSE must take the needs and rights of all children, adolescents, and young people seriously. It must ensure that they know their</p>

<p>ADVOCACY</p> <p><i>May train children to teach other children about sex or sexual pleasure, through peer-to-peer initiatives. May recruit children as spokespeople to advocate for highly controversial sexual rights (including a right to CSE itself) or to promote abortion.</i></p>	<p>rights and that they are actively involved and empowered to make informed decisions.” (p. 7)</p> <p>“Promote rights around sexuality and sexual health and the inherent influence of gender and power (Plan 2018).” (p. 18)</p> <p>“Sexuality education online can create opportunities for young people to help design initiatives that can make them more responsive to young peoples’ needs, as well as help young people develop valuable digital knowledge and skills they need and desire.” (p. 19)</p> <p>“Finally, but most importantly, the programme must enable learners to see themselves as agents of change with the power to make a positive impact on their own lives and relationships, among their families and community, and their larger socio-cultural milieu.” (p. 25)</p> <p>“Young people can be the best advocates for including CSE in the school curriculum or encouraging policy makers to adopt policies that mandate the provision of CSE.” (p. 73)</p> <p>“CSE contributes to the right of young people to lead healthy and safe SRH lives.” (p. 82)</p> <p>“Involve children, adolescents, and young people in all advocacy efforts on CSE.” (p. 90)</p>
<p>13. UNDERMINES TRADITIONAL VALUES AND BELIEFS</p> <p><i>May encourage children to question their parents’ beliefs or their cultural or religious values regarding sex, sexual orientation or gender identity.</i></p>	<p>“CSE is comprehensive. It covers sexual and reproductive health issues, including, but not limited to: sexual and reproductive anatomy and physiology; puberty and menstruation; reproduction, contraception, pregnancy and childbirth; and sexually transmitted infections (STIs), including HIV and AIDS. CSE covers the full range of topics that are important for all learners to know, including those that may be challenging in some social and cultural contexts.” (p. 7)</p> <p>“CSE ... considers young people as autonomous sexual subjects with the right to experience desire, pleasure and happiness in their lives and to have control and agency over their bodies – whether they are sexually active or not.” (p. 7)</p> <p>“How can you make a connection between the values and social norms in your community and the realities of young people’s sexuality and their SRHR?” (p. 10)</p> <p>“It is important to find the right balance between the SRHR of young people and their realities and the values and norms of the community they live in. However, to be contextually relevant does not mean that you cannot address certain issues, including sexual diversity, even when people say that it does not exist in their country/community.” (p. 13)</p> <p>“CSE programmes should strengthen values about sexuality and sexual</p>

	<p>wellbeing from a sexual rights perspective and should be based on evidence-informed guidance.” (p. 14)</p> <p>“CSE needs to address much broader aspects than personal behaviours or beliefs. Effective educational interventions involve challenging social, political, economic and religious structures, systems and inequalities that affect women, youth and marginalised groups.” (p. 14)</p> <p>“Even if there are negative cultural or religious beliefs around sexuality, the programme still needs to explain sexuality in a neutral, clear, respectful, complete, professional and academic way.” (p. 14)</p> <p>“A non-judgmental approach in CSE means that educators and learners can have their own opinions and values and should not be judged for having these.” (p. 17)</p> <p>“One of the essential elements of CSE is to explore personal values and ethical issues, for example, regarding certain sexual practices, pre-marital sex, sexual diversity and abortion.” (p. 17)</p> <p>“Gender is constructed, and reconstructed, through the interaction between families and friends, in schools and communities, and through the media, government and religious organisations.” (p. 22)</p> <p>“Regarding this standard, CSE programmes should gradually support children, adolescents, and young people to increase their knowledge, to help them to explore their values and norms, to improve their self-esteem, their respect for others, to think critically about norms in their society around gender and sexuality, and to make autonomous decisions regarding sex, sexuality and relationships.” (p. 43)</p> <p>“Ensure value clarification is included, and ideas and opinions or values are discussed concerning relevant SRH/contextual topics.” (p. 56)</p> <p>“Plan International’s approach to CSE, which emphasises gender equity, sex positivity and empowerment, requires the use of teaching approaches that help to engage learners and help them to critically analyse their individual situations and social context. This helps learners to adopt a more open attitude towards equity in relationships, gender identity and sexual diversity.” (p. 59)</p> <p>“It is necessary to take a multidisciplinary approach to strengthen young people’s autonomy and agency. There are two ways of considering children’s rights: one is that children are socially competent and are entitled to the same rights as adults.” (p. 77)</p>
<p>14. UNDERMINES PARENTS OR PARENTAL RIGHTS</p> <p><i>May instruct children they have</i></p>	<p>“Assure learners that their privacy is respected. In this way, you serve as a role model for respecting others’ privacy.” (p. 51)</p> <p>“Ask the same of learners; remind them not to disclose information exchanged</p>

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.

during CSE activities, outside the classroom.” (p. 51)

“To discuss sexuality and relationships can be emotionally challenging for individual learners. **Assure your learners that you, as their educator, will keep all discussions confidential.**” (p. 48)

“**Let the learner know your talk together is confidential.** Emphasise that confidential means in this case that others might need to be involved, but that involvement will never be without the learner’s consent or behind the learner’s back.” (p. 49)

“A youth-adult partnership (YAP) implies **equality between generations**; therefore, you will need to address **intergenerational power dynamics**, trust in young people’s abilities and value their life experiences, and learn to share power with them.” (p. 71)

“**Confidentiality is maintained.**” (p. 73)

“In this document we will use the term ‘parents.’ **This includes caregivers, guardians and others directly involved in the daily lives of children, adolescents, and young people.** This could be grandparents, aunts and uncles, and others.” (p. 75)

“Even though the benefits of positive parental involvement are clear, there is a **fine line between parents providing support and parents pushing their own values and beliefs on young people.**” (p. 76)

“Challenges to Parents’ Communication With Their Children About Sex and Sexuality:

- **Parents can have too much control over the (sexual) life of their children.**
- Parents may feel embarrassed and not know when or how to start a conversation.
- Parents may not take the opinions and decisions of their children seriously.
- Parents’ authority and boundary-setting role may mean children keep things from parents.
- Generational patterns around openness on sexuality get repeated.
- Home is not always a safe place.
- It depends how confident and comfortable parents are about sex and relationships.” (p. 76)

“**Often there are families that are more closed and parents or elders expect obedience from their children.** Such families may not encourage children, adolescents, and young people to ask questions. Teachers and educators may find some resistance to discuss CSE lessons with these children, adolescents, and young people.” (p. 77)

	<p>“To be sure you are referring your learner to a [sic] adolescent and gender-responsive clinic, the services/providers need to be: Able and willing to provide SRH services and information to all young people, including young people with disabilities and young people who identify as LGBTIQ non-judgmental promoting children, adolescents and young people’s rights, especially the right to privacy and confidentiality.” (p. 84)</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 services or commodities (i.e., sexual counseling, condoms, contraceptives, gender hormones, STI testing and treatment, abortions, etc.)</i></p> <p><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></p> <p><i>(For more information on how Planned Parenthood sexualizes children for profit see www.WaronChildren.org and www.InvestigateIPPF.org)</i></p>	<p>“CSE ensures strong linkages with relevant adolescent and gender-responsive health services locally, and with child protection services that are also relevant for younger children.” (p. 5)</p> <p>“Where possible, make links with organisations working on sexual diversity and networks of sexual rights activists to learn more about their realities, the language and terminology they use, and their key advocacy messages. Create referral linkages with youth-friendly, and adolescent and gender-responsive SRH services so that you can refer your learners to them if needed.” (p. 18)</p> <p>“Supporting material video: ‘Sexual orientation? Gender identity? What’s the difference?’ found at https://www.youtube.com/watch?v=C63Xn--i13o” (p. 23 and p. 35)</p> <p>“If they want to know how sex works and what it should feel like, they should access more reliable and informative sites like Love Matters – Scarleteen, Laci Green on YouTube, Amaze Org on YouTube, RFSU’s ‘Sex your own way’ booklet, etc.” (p. 33)</p> <p>“Supporting materials: Programming Guidance on Strengthening Our Work on SOGIESC, Adolescents in All their Diversity Module on SOGIESC, Champions of Change Module: We are Diverse!” (p. 38)</p> <p>“With your learners, you can pay a visit to the health clinic and ask the doctors and nurses to explain what they do and how a regular session with a client works.” (p. 84)</p>