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

Reducing the Risk, Revised 5th Edition

Based on 15 Harmful Elements Commonly Included in CSE Materials

CSE HARMFUL ELEMENTS SCORE = [15 OUT OF 15]

Reducing the Risk, Revised 5th **Edition 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: Reducing the Risk is a sexuality curriculum designed for youth ages 14-18, though it is also found in middle schools being taught to children as young as 12. While it purports to be an abstinence-based program, the teacher's manual reveals the deceptiveness behind this label. "This program uses a specific definition of abstinence: abstinence means choosing not to do any sexual activity that carries a risk for pregnancy or STD/HIV." (Teacher's Manual, p. 15) This definition of abstinence gives a false equivalency between abstaining from sexual activity and having "safer sex" with a condom.

This is a highly controversial program that uses explicit details to encourage youth to use protection in order to avoid HIV and other STDs. Proper condom use is demonstrated on a wooden penis model. Students brainstorm how to make condom use more romantic and have a homework assignment to go shopping for condoms. *Reducing the Risk* uses role plays (with gender-nonspecific names assigned) to teach youth how to negotiate sexual situations. It teaches where they can go for STD testing without parental knowledge. This program promotes masturbation, early sexual autonomy, and diverse sexual orientations. *Reducing the Risk* is being used through federal grant money in Arizona, California, Connecticut, Florida, Georgia, Idaho, Indiana, Kentucky, Michigan, Minnesota, Mississippi, Montana, Nevada, New Hampshire, New Jersey, New York, Ohio, Oregon, South Carolina, South Dakota, Vermont, Virginia, Washington, West Virginia, and Wyoming.

Target Age Group: Ages 14-18, though it is taught in some middle schools to children as young as 12.

Planned Parenthood Connections: ETR, the publisher of Reducing the Risk, has a member of PPFA on their Board of Directors.

HARMFUL CSE ELEMENTS	EXCERPTED QUOTES FROM CSE MATERIAL
1. SEXUALIZES CHILDREN	Role Play 1.1A: "Lee and Lee have been going out for 3 months, and, although
	taking it slow, they've been getting closer to having sex . They're sitting on the

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. sofa together, **kissing and touching**." (*Teacher's Manual, p. 19*) Note: At the end of the role play, Lee and Lee have unprotected sex and get pregnant.

"Explain that for this activity, exchanging signatures with someone **represented having sex with that person**." (Teacher's Manual, p. 30)

"Michael was dating Jaidyn and **only having sex with her**. Then one night at a party, he **drank too much and had sex with someone else**. After that, he continued to only have sex with Jaidyn. Is this serial or overlapping?" (*Teacher's Manual, p. 32*)

"Ask students to assume everyone is having overlapping sexual relationships, and no one is using condoms." (Teacher's Manual, p. 33)

"Red alert signs usually occur about 20 minutes to an hour before the high-risk moment when...you may have **done a lot of touching** and are feeling close." (Teacher's Manual, p. 89)

"Signs of Sex: We make and take chances to touch; We touch each other in more ways and are getting excited; We're drinking and touching" (Teacher's Manual, p. 92)

"Myth or Fact: If a guy **pulls his penis out of a girl in time** (before he ejaculates), he can be sure to prevent pregnancy." (Teacher's Manual, p. 128)

"[The HPV vaccine] is recommended for girls and boys **ages 11 and 12**, because the shots work best when **given before a person has had sex**." (*Teacher's Manual, p. 129*)

"Have a monogamous relationship with only one partner who doesn't have HIV...and who never has sex with anyone else. (Note: This choice isn't realistic for many teens because they tend to be involved in a series of relatively short-term relationships.)" (Teacher's Manual, p. 157)

"You and your boyfriend/girlfriend have been going out for a while. From the beginning you **touched and kissed a lot**. On his/her birthday...you begin **kissing and touching and feeling really good**." (Student Workbook, p. 13)

The party is at a friend's house and the parents are gone. A lot of **kids are getting high and some couples are leaving – maybe to have sex**." (Student Workbook, p. 19)

Role Play 10.3: "You know no one will be home for 2 hours. You're **kissing and touching** and your boyfriend (girlfriend) lets you know he (she) wants to have sex." (Student Workbook, p. 39)

"Imagine that you have a younger sister who is **12 years old**. She tells you she **wants to have sex** with her boyfriend." (Student Workbook, p. 43)

Role Play 16.3: "You've decided that you **don't want to have unprotected sex** with your boyfriend or girlfriend. On this evening, you both have been watching TV. You decide to lie down on the couch together. You remember that this is exactly what happened **the last two times you had sex** without protection." (Student Workbook, p. 55)

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. "The role plays are an essential and powerful part of Reducing the Risk. At first, students may be hesitant about their performances, but they soon begin to enjoy these opportunities and use them to great advantage. Teachers will help students by continuing to encourage them to practice their interpersonal skills in the role plays. The more students practice effectively saying no to sex (or to unprotected sex), the more likely they will be to use these skills in real life." (Teacher's Manual, pp. 2-3)

"Instruction on boundaries and respecting another person's NO – both verbal and nonverbal – regardless of perceived clarity can be included to help young people understand the **two-way nature of consent...**" (Teacher's Manual, p. 55)

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.

"Abstinence from vaginal, **oral and anal sex** reduces the risk of cervical cancer, which is linked to HPV infection." (*Teacher's Manual, p. 47*)

"Condoms must be used from start to finish during every act of vaginal, anal or oral intercourse." (Teacher's Manual, p. 113)

"Put the condom on the head of the erect penis before there is any contact between the penis and the vagina, anus or mouth." (Teacher's Manual, p. 114)

"Anyone who has unprotected **vaginal or anal sex** with someone who has HIV can get HIV. There is also some risk of transmission through **oral sex**, but it is much lower." (*Teacher's Manual*, p. 156)

"To eliminate the risk of HIV: Don't have sex. This includes vaginal, anal and oral sex." (Teacher's Manual, p. 157)

"HIV and other STDs can be passed through vaginal, anal and oral sex." (Teacher's Manual, p. 163)

"Behaviors with some risk of HIV: **Oral and anal sex** using a condom; **Oral sex** without a condom" (*Teacher's Manual, p. 169*)

"Behaviors with high risk of HIV: **Anal sex** without a condom" (*Teacher's Manual, p. 169*)

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.

"Over the course of the role-play activities, students will be in a position where they must role-play sexual pressure situations with **classmates of both a different and the same gender**. This may be awkward for teens who are sensitive to the suggestion of same-sex romance, for teens who **identify as gay or lesbian**, or for teens who are **transgender or gender nonconforming**. It's important to address this situation directly and proactively." (*Teacher's Manual, p. 71*)

"Explain that they need to take their roles seriously **because teens of all sexual orientations and gender identities** need to learn how to resist sexual pressure and protect themselves." (*Teacher's Manual, p. 71*)

"Teens of all sexual orientations and gender identities need to know how to protect themselves from unplanned pregnancy." (Teacher's Manual, p. 129)

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.

"Abstaining may ultimately help people **be better lovers**; it allows them to explore a wide range of ways to express love and sexual feelings." (*Teacher's Manual, p. 47*)

"Additionally, couples shouldn't rely on withdrawal since it requires them to interrupt sex exactly when they don't want to." (Teacher's Manual, p. 100)

"The clitoris is a pea-shaped organ full of nerve endings...The only known function of the clitoris is to provide sexual pleasure." (Teacher's Manual, p. 208)

"During sexual arousal, the penis becomes firm and erect so it can shoot sperm as deep as possible into the woman's vagina." (Teacher's Manual, p. 212)

Role Play 9.2 has two kids discussing condom use: "I just don't like to stop what's going on. You lose something. And...I like the way it feels without it. It feels more...well, natural." (Student Workbook, p. 37)

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. May instruct children on how to masturbate. May also encourage children to engage in mutual masturbation.

"Behaviors w/ no risk of HIV: **Masturbation**" (Teacher's Manual, p. 169)

"Behaviors w/ some risk of HIV: **Mutual masturbation**" (*Teacher's Manual, p. 169*)

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.

"Practice unrolling a condom over 2 fingers or a **penis model** (recommended)." (*Teacher's Manual, p. 109*)

"Describing how condoms are used, with visual aids to assist the instructions, offers the most effective approach to condom education." (Teacher's Manual, p. 110)

"Demonstrate how a condom is used...Make sure to stress the importance of holding the condom around the base of the penis when the penis is pulled out of the partner's body." (Teacher's Manual, p. 111)

"Unwrap the condom and **unroll it over the penis model...**showing how much space to leave at the tip, how to hold the end of the condom, and how to unroll and remove the condom." (*Teacher's Manual, p. 111*)

"Hold onto the base of the condom while the **still-erect penis is gently pulled out of the partner's body**." (*Teacher's Manual, p. 114*)

"To avoid pregnancy and STD, the male should **pull the penis out very soon after ejaculating, while the penis is still hard...**" (*Teacher's Manual, p. 128*)

"These are things you can do or say to yourself to make using a condom easier: DOUBT – I'll look like a beginner if I don't know what to do with the condom; DOUBT-BUSTER ACTION – I'll **practice putting a condom on my fingers** so I'm sure I'll know how." (Teacher's Manual, p. 177)

"Using Protection – Use the Condoms: Who would bring out the condoms? What would he/she say? What would be the most romantic way to use the condom? What might go wrong? What would you do to save the evening?" (Student Workbook, p. 50)

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.

"Acknowledge that it's sometimes hard to practice abstinence." (Teacher's Manual, p. 48)

"Lead students in a discussion that focuses on what to do to avoid unwanted or unprotected sex." (Teacher's Manual, p. 90)

"The homework assignment (of shopping for protection) gives students the **experience of preparing to obtain protection**." (*Teacher's Manual, p. 99*)

"Students prepare to **locate clinics** in their area and make plans for contacting one to get information about protection. Students then apply their knowledge about protection to **decide which method(s) might be best for them**." (*Teacher's Manual, p. 109*)

"Ask about the confidentiality policies at the clinics and the importance of these policies. (Pull for the idea that sex and sexuality are private and that **people should and do have control over their choices** to use birth control from clinics or drugstores.)" (*Teacher's Manual, p. 176*)

"Ask if anyone found a clinic that is especially easy to get to from their home or

high school without a car." (Teacher's Manual, p. 177)

"All youth benefit from conversations that allow them to...determine when they are ready to engage in safe, consensual sexual activity." (Teacher's Manual, p. 204)

'Shopping Information Form' requires students to **visit two stores to price condoms**. Students note the brand name, price, whether it is lubricated and has a reservoir, how comfortable they are buying protection there, and the store's hours of operation. (Student Workbook, p. 31)

'Visit or Call a Clinic' assignment requires students to **research a family planning clinic**. Students determine location and hours, services available, price of consultation, confidentiality policy, and their level of comfort visiting this clinic. (Student Workbook, p. 33)

'The Way to the Clinic' assignment requires students to **map the route to the clinic** and determine which mode of transportation is most effective in getting there. (Student Workbook, p. 34)

Role Play 11.2: "You and your boyfriend/girlfriend have had sex without using protection. You just found out a close friend is pregnant and you don't want it to happen to you." (Student Workbook, p. 45)

"Picture a time in your life when you would be **ready to have sex**." Students then write about how they would take steps to use protection. (Student Workbook, p. 49)

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.

"As a result of participating in classes that use this curriculum, students will be able to: Recognize that abstaining from sexual activity **or using contraception** are the only ways to avoid pregnancy, HIV and other STDs." (*Teacher's Manual, p. 1*)

"This program uses a specific definition of abstinence: abstinence means choosing not to do any sexual activity that carries a risk for pregnancy or STD/HIV." (Teacher's Manual, p. 15)

"Tell students this activity will help them understand the risks of having sex without using protection." (Teacher's Manual, p. 16)

"The second part of this activity shows how risk changes when people **abstain or use protection** correctly and consistently." (*Teacher's Manual, p. 17*)

"When people have **more sexual partners** and don't always use a condom, they're at greater risk of getting an STD." (*Teacher's Manual, p. 33*)

"Class 2 reminds students that there are only two ways to avoid pregnancy and STD/HIV – not having sexual intercourse (abstaining) or consistently using protection." (Teacher's Manual, p. 43)

"Give students no more than 5 minutes to write down what they might say in the role play to avoid **unprotected sex**." (Teacher's Manual, p. 71)

"Remind students that there are two ways to avoid pregnancy and HIV: **say no to sex, or use protection**." (*Teacher's Manual, p. 89*)

"Yellow alerts are signals that there may be a **risk of unprotected sex** in the future and that you should slow down and prepare yourself to avoid pregnancy or infection." (Teacher's Manual, p. 89)

"As a homework assignment, students **research prices and descriptions of nonprescription (protection) products.**" (Teacher's Manual, p. 97)

"Explain that, **for people who choose to have sex**, using a latex condom offers the best protection against HIV and other STDs." (*Teacher's Manual, p. 111*)

"When using a condom, use a lubricant that isn't oil based." (Teacher's Manual, p. 127)

"Taylor and Bobby have gone out for a long time but have never had sex. One day they go to Bobby's sister's apartment. She is in the bedroom with her boyfriend. In the living room, Taylor and Bobby start to kiss and warm up to each other. What can Taylor or Bobby do to avoid sex or unprotected sex?" (Teacher's Manual, p. 137)

"Tony and Dylan...start to kiss and undress each other. Dylan reaches into a jacket pocket, and realizes that the condom they planned to use is gone... What can Tony and Dylan do to avoid unprotected sex?" (Teacher's Manual, p. 139)

"Have safer sex that doesn't put you in contact with a partner's blood, semen, or vaginal or rectal fluids. This means using condoms...or having sex play without intercourse." (Teacher's Manual, p. 158)

Role Play 9.2 has two sexually active youth discussing whether or not it's worth it to use a condom: "I'll just have to change my attitude and **be sure we use them**. My life's pretty good now. I want to keep it that way." (Student Workbook, p. 37)

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

"Be sure your reading of the role-play allows for inclusivity and **does not** reinforce one view of gender identity or gender stereotypes." (Teacher's Manual, p. 14)

"Recognize that trauma can arise from power differences due to culture, **gender** and sexual orientation. Use inclusive language that empowers diverse populations. Avoid stigmatizing particular groups of youth or reinforcing limiting stereotypes." (*Teacher's Manual, p. 204*)

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.

Pregnancy Risk Chart: "You did not become pregnant because you decided to use the IUD." (Teacher's Manual, p. 20)

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.

Pregnancy Risk Chart: "You did not become pregnant because you **used a latex condom correctly every time you had sex**." (*Teacher's Manual, p. 20*)

"Methods of birth control that are very effective if used correctly and consistently: abstinence, LARCs (IUD, implant), birth control pill, birth control patch, vaginal ring, Depo-Provera and the latex condom, especially when used with spermicide." (Teacher's Manual, p. 101)

Note: pp. 101-106 discuss risks and advantages of various birth control methods

"In order to prevent pregnancy, **emergency contraception** must be used within 5 days after having unprotected sex." (*Teacher's Manual, p. 106*)

"What did they learn about **types and costs of protection**? Be sure student answers include: It's easily available; **It's inexpensive; It wasn't too embarrassing to look at**." (*Teacher's Manual, p. 176*)

'How Will You Avoid Pregnancy' assignment directs students to determine **which methods of birth control they need more information about** and how they will find that information. (Student Workbook, p. 35)

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.

"It's recommended that facilitators work with a small group of youth to review the **role-plays** and other activities and suggest minor changes to increase relevance before implementation." (*Teacher's Manual, p. 4*)

"Students are presented with 'situations' in which **they must decide as a group** how to handle difficult predicaments." (*Teacher's Manual, p. 133*)

"Put students into **small groups** of no more than 4. Tell them they will **develop a role play** that addresses one of the steps of preparation for using condoms...Have them **write a full script** on a separate sheet of paper." (*Teacher's Manual, p. 172*)

*YAPs (Youth-Adult Partnerships) are frequently established in schools where RTR is offered. Students who have gone through the program are encouraged to join where they spend time promoting the Adolescent Pregnancy Prevention program to their peers.

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.

"At some point in their lives, most people decide they're ready to have sex but not to become a parent." (Teacher's Manual, p. 91)

"What are your conclusions (about the best method of preventing pregnancy)? Circle the numbers that show **which methods seem best for** *you*." (Student Workbook, p. 35)

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.

"You **do not need a parent's permission** to get birth control at a clinic. No one needs to know that you are going to a clinic." (*Teacher's Manual, p. 127*)

"In almost every state, teens can be tested for HIV without parent permission. However, to be sure, teens should check with the test site beforehand to find out what policies are followed. They can ask if they need parental consent for testing or treatment, and whether the clinic will share information with parents." (Teacher's Manual, p. 158)

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 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 "To facilitate the **process of locating a clinic**, teachers who have access to the Internet can **bookmark pages for local clinics** and either project the web pages onto a classroom screen or provide students with a website address. Or, have available one or more local telephone directories." (*Teacher's Manual, p. 109*)

"Besides learning what services are offered at local family planning clinics, this homework assignment asks students to rate their comfort level while at the clinic." (Teacher's Manual, p. 116)

"Select two or three conveniently located clinics (or the clinics that have agreed to participate) from which they can choose." (Teacher's Manual, p. 116)

"Encourage students to **go with their boyfriends or girlfriends**, even those who aren't in the class. Tell students they should **bring back some literature** available from the clinic. This could be a pamphlet describing services." (*Teacher's Manual, p. 116*)

"People who use injection drugs should never share needles. If needles or works are shared or re-used, clean them 3 times with water, 3 times with bleach and 3 times with water before each use." (Teacher's Manual, p. 158)

children for profit see	
www.WaronChildren.org and	
<u>www.InvestigateIPPF.org</u>)	
For more information on <i>Reducing the Risk, Revised 5th Edition</i> see https://www.etr.org/ebi/programs/reducing-the-	

risk/.