

Statement 1

My name is _____, and I represent Protect Arizona Children, a coalition of concerned individuals and organizations throughout our state composed of parents, grandparents, teachers, lawyers, medical and mental health professionals, youth, legislators, religious leaders, and other concerned citizens.

The following are just some of the Arizona organizations we represent who have come together out of great concern for our children to form the Protect Arizona Children Coalition.

Mommy Lobby AZ
Opt Out AZ
Arizona Substitute Teachers
Teachers Parents Advocates United
Defenders of Liberty International
Family Watch International
Big Ocean Women
Purple for Parents
Eastern Arizonans for Families
Family Dynamics International
The Classroom Code of Ethics for Public Schools K-12
and Southern Arizona Families Empowering Their Youth (SAFETY)
Arizona Family Council
4Tucson

Protect Arizona Children also represents a number of prominent national organizations including the American College of Pediatricians, the Child Protection League, Catholic Social Workers National Association, and Parents Rights in Education.

On behalf of all of our members and member organizations representing thousands of stakeholders throughout our state, we strongly urge this board to refrain from opening up Arizona's sex education rules and regulations for any new amendments as we believe such an action will unleash a mountain of controversy, contention, and division in our state.

We are greatly concerned that a request by Senator Martin J. Quezada to consider amendments to the sex education rules proposed by an anonymous group of "stakeholder organizations that also worked to repeal the no promo homo law" was granted by the board when such privileges were not granted to other stakeholders who would also like to make changes to the rules.

We express our great concern that such amendments to our state regulations were already posted on the board's website prior to this meeting, long before the board addressed the decision whether to even open up the sex ed rules and regulations for amendments.

We believe this was unfair and that the only way to remedy this situation would be for the board to also consider amendments from other stakeholders on the same basis that Senator Quezada's amendments were considered.

If the regulations are opened up for any amendments, you should know that our coalition has a list of over 30 specific amendments we feel would be mandatory to also incorporate, as we feel it is our obligation to safeguard Arizona's children by adding critical additional protections to the rules.

We have provided for each of you a list of these amendments with the rationale behind each one. We hope you will take the time to go through each of these amendments, which all serve to protect the health and rights of Arizona's children.

Statement 2

My name is _____ and I am _____.

To illustrate why opening up our state's sex education regulations will only create more contention, I ask you to look around at all the stakeholders in this room.

We believe everyone here has the best interest of Arizona's children in mind, but each person here will also likely have a different opinion and probably a very strong opinion on what is appropriate to teach children about sex and at what age. I ask everyone present—people representing all segments of our population—what do you think is appropriate sex education? Where do you draw the line? Or is there a line?

Is holding hands ok? Probably. Kissing? Necking? Petting on top of clothes? Under clothes? Sexual intercourse? Anal or oral sex? What about masturbation? Is it good or bad? Should masturbation be encouraged or discouraged? Or should that topic be entirely avoided? Do children have sexual rights? What about sexual orientation and gender identity? Some of the most controversial issues of our day. Should children be taught there are multiple sexual orientations and gender identities? Should they be taught that homosexuality and gender identity are genetic, learned, or changeable? Do governments know best what children should be taught on all of these things?

If there are a hundred people in this room, there may be a hundred different opinions on what children should be taught.

We hope these questions will cause all of us to pause and help lead to a board decision not to reopen our sex education rules and regulations. Surely, Arizona's children deserve the best chance at a healthy future.

Statement 3

My name is _____, and I am _____. I would also like to provide the board with several reasons why we must not open up our state education rules for changes. I will do this by first asking the board to consider the make-up of an average classroom of sixth graders in a public school in Arizona.

What type of children might be found in such a classroom? Some of the children in such a class would be sexually innocent. Some might be sexually experienced. Some may be just awakening sexually. Some have been sexually abused. Others may have a pornography addiction. And some may be hypersensitive and traumatized by discussions on sexual issues. Then there is the potential religious make-up of the children—some may be atheists, others Christians, Muslims or Jews, some of no faith. Then we have their parents to factor in. And if we just look around this room at the disparate groups with opposing views, how is it going to be possible to select a sex education approach or curriculum that will be acceptable to all the parents of these 6th grade children? And since they are all going to be at different stages of sexual development, how do you prevent giving too much too soon or introducing sexual concepts that children have never even heard of and are not ready for?

We don't envy your job as state board of education members. You truly have a difficult task and a critical stewardship and responsibility as sex education is a highly sensitive and controversial topic that has wide-ranging implications for children that can carry lifelong implications.

The Protect Arizona Children Coalition affirms that parents have the primary responsibility for directing and guiding the education of their children in sexual matters. This is because parents know best what their children need, which is why our legislators have affirmed in ARS 1-601, [quote] "The liberty of parents to direct the upbringing, education, health care and mental health of their children is a fundamental right." [end quote]

If anything, we should be empowering parents to educate their children on sexual matters rather than expanding our sex education. Therefore, for the aforementioned reasons, we are asking the board not to open up our sex education rules, which will lead to the expansion of sex education in our state.

Statement 4

My name is _____. I am _____.

I propose the following amendment to Section A in the sex ed rules and regulations.

Instruction in sex education (and then this language would be inserted) (including education on the prevention of Sexually Transmitted Infections (STIs) and Sexually Transmitted Diseases (STDs) including HIV/AIDS (hereafter referred to as "STIs/STDs including HIV/AIDS")) in the public schools of Arizona shall be offered only in conformity with the following requirements.

The American Sexual Health Association uses the terms "Sexually Transmitted Diseases" and "Sexually Transmitted Infections" conjointly because there are two distinct meanings. Technically, STIs and STDs differ. Having an STI means that an individual has an infection but that it has not yet developed into a disease. Take HPV (human papillomavirus) for instance: Typically, a woman with HPV does not have any symptoms, but she carries the virus. She has an STI; but if she develops cervical cancer from HPV, she now has an STD since cancer is a disease. The same is true for individuals who have chlamydia or gonorrhea infections that develop into pelvic inflammatory disease (PID).]

Statement 5

My name is _____ and I am _____.

With regard to the proposed amendment to change the word “shall” to “may” referring to sex-segregated sex education instruction in 1. C. i, we propose maintaining the current language as it stands without any amendments ensuring that sex education instruction be given separately to girls and boys. We urge the board to maintain the current language, which was put there for several very important reasons. While we recognize that there is a new trend to have children discuss sensitive sexual matters in a coed setting, we would like the board to consider some of the following potential negative outcomes when children discuss such sensitive matters.

1. For children who have been sexually abused by a member of the opposite sex, discussing sexual matters in a mixed setting can be a huge emotional trigger.

A number of sex education programs require children to be instructed in sexual matters in a mixed setting in order to, among other things, desensitize them to sexual concepts or to facilitate role plays where girls and boys have sex or seduce each other. Consider the following inappropriate activities from the comprehensive sex education program published by Advocates for Youth, the youth partner of Planned Parenthood titled, “Rights, Respect, Responsibility.” Please note that this program has been implemented in the Sunnyside School District in southern Arizona.

“Divide the class into pairs. Once they are settled, say, ‘For the purposes of this activity, I’m going to ask you to pretend you are in a romantic and sexual relationship.’” (Grade 10, Lesson 4, p. 3)

Role Play Scenario C: “You think you know what person 2 wants – that’s the way your relationship has always been. You’re more outgoing, they’re more quiet and reserved and they expect you to take charge and make decisions. That’s how it is where you’re from. So you’re going to let them know that tonight is the night – you’re going to have sex together for the first time.” (Grade 10, Lesson 1, p. 5)

2. Children are less likely to ask questions in a mixed setting.

For this reason, we urge the board to retain the current language in 1. C. i.

Statement 6

My name is _____ and I am _____.

The direct parental involvement in the sex education of children has been shown to have a strong impact on the choices children make regarding sexual behavior. In fact, an HIV/AIDS prevention program in Africa called “Stay Alive” (available at StayAlive.org), which has reached two million children and parents in 15 African countries was found to effect a 61 percent reduction in the pregnancy rate in Kenya. The key that was attributed to the success of the program was the required parental involvement. At the end of each lesson, children were sent home with a homework card listing three questions for them to discuss with a parent or guardian regarding the sex education concepts taught that day. They were required to obtain a signature from a parent verifying that they had the discussion. This opened up communication channels between parents and children in a way that empowered parents to discuss sex education with their children and to share their family values regarding the same. Such an approach would be a

concrete and positive way to implement ARS 15-102 calling for schools to identify “opportunities for parents to participate in and support classroom instruction at the school.” We urge the board to involve parents in the sex education of their children by amending section 1.c.ii of the sex ed rules and regulations as submitted.

Statement 7

My name is _____ and I am _____.

I urge the board to consider an amendment to section 1.a. iii as follows:

Delete: Elective sex education lessons shall not exceed the equivalent of one class period per day for 1/8 of the school year for grades K-4.

And add this language: No sex education (including instruction on the prevention of STIs/STDs including HIV/AIDS) shall be given in grades K-5.

There are certain types of information that young children are just not prepared to handle emotionally. The type of knowledge imparted to younger children should align with their cognitive abilities, and sex ed information in a classroom setting should be reserved for older children.

Statement 8

My name is _____ and I am _____.

I urge the board to delete the phrase “shall be age appropriate” in section 3 a of the sex education rules and regulations.

The term “age appropriate” was once an effective standard that served to protect children from exposure to harmful and explicit sexuality education. This is no longer the case. Consider for example, the fact that even a World Health Organization publication, Standards for Sexuality Education in Europe considers the following sex-education to be “age-appropriate”

“Give information about enjoyment and pleasure when touching one’s own body; early childhood masturbation.” (For ages 0-4, Matrix, p. 38)

“Give information about pleasure, masturbation, orgasm” (For ages 9-12, Matrix, p. 44)

Consider also the highly age-inappropriate curriculum “Making a Difference” intended for youth ages 11-13. Three Arizona entities, the Arizona Department of Health, Arizona Youth Partnership, and Child & Family Resources in Arizona received federal funding to implement this program.

“You can clearly see that sexual expression is not just about having vaginal, oral, or anal sex. People can express themselves sexually with a wide range of behaviors.” (Making a Difference p. 68)

Statement 9

My name is _____ and I am _____.

In section A.1.a we propose the addition of the following language:

“Sensitive topics such as sexual orientation, gender identity, solo or mutual masturbation, anal sex and oral sex shall not be taught in Arizona schools.”

Unfortunately, this amendment is needed because sex education is already being implemented in Arizona that promotes mutual and solo masturbation. Consider this excerpt from “Rights, Respect, Responsibility” that has been implemented in the Sunnyside school district in southern Arizona.

“No Risk for STDs: Mutual masturbation, Solo Masturbation”

STD Smarts game question: “Which one is riskiest if done with a partner who has an STD? • Tongue kissing, mutual masturbation, using a public toilet. (Note to the Teacher: Be sure to clarify that ‘mutual masturbation’ refers to two people touching each other’s genitals). (“Rights, Respect, Responsibility” Grade 7, Lesson 5, p. 33)

Please consider adding this language.

Statement 10

My name is _____. I am _____.

Section A.1.a. must be amended to include the following language:

“Sensitive topics such as sexual orientation, gender identity, solo or mutual masturbation, anal sex and oral sex shall not be taught in Arizona schools.”

Both the "Rights, Respect, Responsibility" program and the "Making a Difference" program promoted by Planned Parenthood and already being implemented in Arizona normalize oral sex, which is a felony offense for children of minor age.

This quote is from "Making a Difference":

“You can clearly see that sexual expression is not just about having vaginal, oral, or anal sex. People can express themselves sexually with a wide range of behaviors.” (p. 68)

Note: Why are children, aged 11-13, which is before they are legally able to consent to sex, being told they can choose the kind of sexual behavior to participate in?

This is from "Rights, Respect, Responsibility":

Yellow Light behavior: “Oral stimulation of the vulva (female genitals) with a dental dam (latex barrier)” (Facilitator’s Manual, p. 61) Yellow/Red Light behaviors: “Oral stimulation of the penis without a condom;”

“Low Risk for STDs: Vaginal, anal or oral sex using a condom correctly” (Grade 7, Lesson 5, p. 33)

Assertive Communication Worksheet: “Why don’t we just have oral sex? You can’t get STDs from it.” (Grade 7, Lesson 9, p. 7)

“Ask students, ‘When do you think someone is ready to have sex – either oral, vaginal or anal - with their partner?’” (Rights, Respect, Responsibility” Grade 9, Lesson 7, p. 1)

Consider also Yellow Light behavior: “Oral stimulation of the vulva (female genitals) with a dental dam (latex barrier)” (Facilitator’s Manual, p. 61)

This is an outrage. Children must be protected from such curricula that promote high-risk sexual and illegal behaviors.

Statement 11

My name is _____. I am _____.

We propose that section 3.a.ii have the following language added:

“In no case shall role-playing exercises be used where children are asked to portray a situation where one student is seeking consent for sexual behavior from another student or engaging in any type of sexual behavior.”

While the current sex education rules require sex education to include “instruction on how to say ‘no’ to unwanted sexual advances,” which may sound reasonable, a number of sex education programs in our state implement this seemingly helpful provision in highly controversial ways. For example, some comprehensive sex education programs currently being implemented in Arizona instruct youth in role play exercises to seduce each other and to practice soliciting consent for sex, despite the fact that ARS 3-1407 establishes sexual intercourse or mouth to genital contact as a felony offense for minors. Consider the following examples:

Role Play Scenario C from “Rights, Respect, Responsibilities”: “You think you know what person 2 wants – that’s the way your relationship has always been. You’re more outgoing, they’re more quiet and reserved and they expect you to take charge and make decisions. That’s how it is where you’re from. So you’re going to let them know that tonight is the night – you’re going to have sex together for the first time.” (Grade 10, Lesson 1, p. 5)

In the “Making a Difference” curriculum, instructors are told to use role plays to allow students to “practice negotiation and refusal skills in real life situations” (p. 85) Consider the following case study role play, “Jolie and Malik: “Jolie is 13 and Malik is 16... Malik really likes Jolie.

Lately his friends have been teasing him, telling him to make his move to have sex with her. He agrees and begins to pressure her. ...She is turned on by Malik but is not ready for sex. ... Jolie and Malik are making out on the couch at his house. His parents won't be home for a while. Things begin to get hot and heavy. They both are very sexually excited. How can Jolie avoid having sexual intercourse?" (Student Workbook, p. 8)

Please include this language to protect our children.

Statement 12

My name is _____ I am _____.

Although we recognize that as per ARS 15-716 "Instruction on acquired immune deficiency syndrome" is required to be "medically accurate," we oppose adding additional language to the rules requiring sex education instruction to be medically or scientifically accurate for the following reasons:

There is widespread disagreement in the medical and scientific fields regarding what is "medically" or "scientifically" accurate. Dairy is good for you, dairy is bad, fats are good for you, fats are bad for you, keto eating is healthy, or it is unhealthy. With regard to positions on what is medically or scientifically accurate in sex education, the conservative American College of Pediatricians has quite the opposite position than that of the more liberal American Academy of Pediatricians.

In addition, there are multiple studies that purport to show that comprehensive sex education (CSE) is effective in preventing teen pregnancy and STDs/STIs, yet a recent scientific assessment of the effectiveness of CSE in America's schools over the last 25 years was recently published by the Institute for Research and Evaluation found the exact opposite. The authors reviewed sixty rigorous studies of 40 school-based CSE programs; studies that were peer reviewed for selection based on research quality by either the Department of Health and Human Services (HHS), the United Nations Educational, Scientific and Cultural Organization (UNESCO), or the CDC. When the reviewers applied evaluation standards from the field of prevention and research they found far more evidence of CSE failure than success as follows:

- **Teen Pregnancy:** Only one of the 40 school-based CSE programs evaluated by the 60 studies reported a reduction in teen pregnancy, but that effect did not extend beyond the end of the program, and a subsequent study in a different location found the same program actually increased pregnancy rates.
- **STI Prevention:** None of the school-based CSE studies demonstrated a reduction in teen STIs: in fact, only two measured it.
- **Teen Abstinence:** Although four of the 60 school-based CSE studies reported 12-month post-program increases in teen abstinence, 12 other studies of the same programs found no such positive effects and one negative effect. (See the full report at sexedreport.org.)

This evidence suggests therefore, that many CSE programs that claim to be medically and scientifically accurate and "evidence-based" are actually not telling the truth.

Please do not accept any amendments that include the deceptive phrase “medically and scientifically accurate,” a phrase that is used to advance medically or scientifically inaccurate and ineffective sex education programs.

Statement 13

My name is _____ I am _____.

We propose the following amendment to section A.1.a: “Sensitive topics such as sexual orientation, gender identity, solo or mutual masturbation, anal sex and oral sex shall not be taught in Arizona schools.”

Sexual orientation is one of the most controversial issues of our day with widespread disagreement on how it should be addressed. Are people “born that way,” and can they change? Can a person choose not to act out on homosexual feelings? Also, research shows that temporary confusion during adolescence is common. In fact, temporary adolescent confusion is so common that some researchers question whether it is even appropriate to ascribe a sexual orientation to adolescents since all categories of sexual orientation, except heterosexuality, diminish rapidly over time.

Premature labeling of adolescents as homosexual can be harmful. Yet many “*comprehensive sexuality education*” courses, and statements by authority figures, and organizations often tell youth who may be temporarily confused or questioning that all homosexuals are “*born that way,*” and if they experience any same-sex attraction, they are permanently “*gay.*” These youth may also be encouraged to act out sexually on these attractions to find out if they are homosexual. This can lead to a premature self-labeling that can put youth at a high risk for a number of negative mental and physical health consequences.

Homosexual adolescents have an increased risk for many health problems. According to the American Academy of Pediatrics, “*Adolescents and young adults who adopt the homosexual lifestyle are at increased risk for mental health problems, including major depression, anxiety disorders, conduct disorders, substance dependence, and especially suicidal ideation and suicide attempts.*”

Suicide risk is higher for adolescents who identify as homosexual. A U.S. study found that for every year an adolescent postpones identifying as homosexual, the suicide risk drops by 20 percent.

Since issues around homosexuality are highly contested and controversial with major policy battles around the U.S. over therapy for same-sex attraction, Arizona schools would do best to allow this controversial topic to be addressed by families, rather than to spark bitter policy battles in the schools.

Statement 14

My name is _____ I am _____.

Please amend section A.1.a to include this language: “Sensitive topics such as sexual orientation, gender identity, solo or mutual masturbation, anal sex and oral sex shall not be taught in Arizona schools.”

Just like “sexual orientation,” “gender identity” is also one of the most controversial issues of our day, sparking similar widespread disagreement across our nation and state. In schools at the center of the debate is whether children should be affirmed as something other than their biological sex or whether they should be helped to accept and to embrace the biologically gendered reality of their body. Certainly, a public school classroom is not the place to resolve such serious questions, nor is a teacher equipped or qualified to handle such matters, especially when children with gender confusion have higher rates of suicide. A decision for a child to attempt to “transition” to the opposite sex can lead to serious health consequences including infertility for life.

According to Dr. Paul McHugh, University Distinguished Service Professor of Psychiatry at Johns Hopkins Medical School and a leading authority on gender confusion:

“When children who reported transgender feelings were tracked without medical or surgical treatment at both Vanderbilt University and London’s Portman Clinic, 70%-80% of them spontaneously lost those feelings.”

According to the American College of Pediatricians: *“A number of mental health professionals who have successfully treated gender dysphoria in youth stress that the ‘affirmation’ of children’s gender confusion by allowing them to behave and be treated as the opposite sex reinforces this mental disorder and renders the success of therapy less likely.”*

Finally, the head of the Child and Adolescent Gender Identity Clinic in Toronto, Canada, Dr. Kenneth Zucker, also one of the leading authorities in the world on gender disorders, has treated over 500 children with gender confusion. Dr. Zucker found that in the vast majority of cases, therapy focused on reducing the psychopathology within the family has resulted in the child’s acceptance of their birth sex.

For all of these reasons such issues are best addressed by parents and should not be a focus in sex education.

Statement 15

My name is _____ I am _____.

Please amend section A.1.a with the following language: “The promotion of abstinence as the expected standard and the healthiest choice for all children of minor age shall be mainstreamed in all sessions in which sex education is taught and shall be the primary message of the

instruction. For the purpose of Arizona public school sex education, abstinence is defined as refraining from any physical contact that is intended to illicit sexual arousal.”

A 2010 study by the U.S. Department of Health and Human Services under the Obama administration found that roughly 70 percent of American parents are opposed to premarital sex generally and for their own adolescents in particular. The vast majority of parents also favored their adolescents receiving sexual abstinence messages in multiple community settings including schools, doctor offices and community organizations.

The survey findings were intended to inform public policy priorities and sex education implementation strategies. Based on these results, a strong risk-avoidance abstinence message should be the federal priority for sex education.” (School-Based Sex Education in the United States *American College of Pediatricians – September 2018*)

Statement 16

My name is _____ I am _____

Please amend Section A.1.a and add “Providers of elective abortion and their affiliates shall be prohibited from delivering instruction or materials in Arizona public schools.”

Organizations or businesses that provide condoms, contraceptives, STD/STI testing and treatment, or abortions have a conflict of interest when it comes to sex education. This is because once sexualized, children can be lifetime paying customers patronizing their clinics. In other words, such businesses have a vested financial interest in sexualizing children. Also, children who are sexually active have a much higher risk for being pregnant and then seeking an abortion from such businesses. Thus, it should be no surprise that Planned Parenthood Federation of America is both the largest provider of comprehensive sexuality education and one of, if not the largest provider of abortion in the U.S. For this reason, Planned Parenthood and other businesses that have similar conflicts of interest should be prohibited from delivering instruction or materials in Arizona public schools.

Statement 17

My name is _____ I am _____

Please amend Section A.1.a to include the following language: All discussion regarding contraception or condoms shall emphasize that the expected standard for children of minor age is abstinence from all sexual activity as per Arizona statute 15-716 and that abstinence is the only 100-percent effective method in preventing pregnancy and STIs/STDs including HIV/AIDS. Students shall also be given information regarding the failure rates of all contraceptive choices. At no time shall children ever be taught that contraceptive use by minors can make sex “safe.”

Unfortunately, too many comprehensive sex education (CSE) programs in our state are teaching children it is up to them to decide if they want to have sex rather than encourage children to delay sexual debut, despite the health risks of early sex. Too many comprehensive sex education

programs also teach children that having sex is ok, as long as they use a condom or contraceptives, completely ignoring all of the other health risks for sexually active children.

Consider the following excerpts from CSE programs in Arizona which illustrate why this amendment is needed:

Making a Difference discusses male and female condoms as barrier methods which help prevent STDs and pregnancy. Instructors are told: “Don’t ‘bash’ condoms or provide exaggerated information on failure rates.” (p. 75) Condoms are mentioned as a way to “prevent pregnancy and STDs.” (pp. 81 and 119)

Behaviors deemed safe include: “Having sex with only one person (being monogamous) if both are virgins, if not virgins and using condoms.” (pp. 119-20)

“Latex condoms are the most common. People who are allergic to latex can use polyurethane or polyisoprene condoms.” (p. 255)

“What are some ways males can participate in the process of using birth control? Wear a latex (or polyurethane/ polyisoprene) condom.” (p. 258) Note: Instructors are told to encourage use of polyurethane condoms as a good alternative. Yet, there is no mention that studies have shown that some synthetic condoms (such as those made of polyurethane, orstyrene, ethylene, butylene, and styrene) have higher breakage rates than natural latex condoms. Also, no failure rates are mentioned nor the fact that some STDs such as HPV are not protected against with condoms as HPV us spread by skin-to-skin contact.

Statement 18

My name is _____ I am _____

I oppose reopening the sex education rules and regulations.

But if the rules are to be reopened, I propose that the language in section A.1.b.iii that reads “THE PUBLIC HEARINGS SHALL ADHERE TO OPEN MEETING LAW REQUIREMENTS PURSUANT TO ARIZONA REVISED STATUTES SECTION 38-431 THROUGH 38-431.09” not be deleted and remain in the sex education rules and regulations.

We oppose the insertion of this requirement as it puts limitations on public input allowing the state Board of Education to severely limit public comments or even to completely disallow any public comment.

Statement 19

My name is _____ I am _____

I oppose reopening the sex education rules and regulations.

But if they are to be opened, I propose the language in section 1.A.b.iv be amended as follows”

“The local governing board shall maintain for viewing by the public the total instructional materials and all supplemental materials including videos, recommended reading, additional resources, handouts, worksheets, posters, brochures, etc. to be used in approved elective sex education lessons within the district. Parents shall be notified by mail, email, and through the parental access on the student’s portal (if available) both one month prior and two weeks prior to instruction that the materials in their entirety are available to view. All materials shall be made accessible to parents and legal guardians on the school premises, and where possible, also be made available online.

Teachers are prohibited from using supplemental sex education materials or bringing in guest speakers without the prior approval of the governing board, and the adherence to parental notification and opt-in requirements.”

These amendments are needed as there have been widespread reports across Arizona that controversial and unapproved materials have been presented to children as part of sex education in public schools. Also these amendments show respect for the liberty rights of parents as required by Arizona law to guide the education of their children. Further, this increases transparency and makes reviewing curriculum and important parental rights more feasible.

Statement 20

My name is _____. I am _____

I oppose reopening the sex education rules and regulations. But if they are to be opened, I propose the language in section A.1.c. to read as follows:

“Sex education topics (such as sexual intercourse, prevention of STIs/STDs including HIV/AIDS) shall only occur in designated sex education classes in which parents have been duly notified and opted in their children. Sensitive topics such as sexual orientation and gender identity shall not be taught in Arizona schools.”

Increasingly, controversial discussions and lessons on sex and sex-related issues have been occurring in public school classrooms without the knowledge and consent of parents causing great concern. This amendment is needed to ensure that activists cannot get around sex education protections for children without being in violation of state school board policy. These topics are too contested, controversial and carry serious health implications that are better dealt with by families.

Statement 21

My name is _____ I am _____

I oppose reopening the sex education rules and regulations. But if they are to be opened, I propose the language in section A.3 be amended to read as follows:

“As per Arizona Revised Statute [Section 8-309](#) regarding the illegality of teen sexting, children shall be informed that it is illegal for a minor to knowingly use an electronic communication device to view or transmit photographs or videos of a juvenile that depict explicit sexual material, and that it is also against the law for a minor to knowingly possess explicit sexual material involving a juvenile. Children shall be taught that “explicit sexual material” can refer to any image or video that depicts nudity, genitalia, sexual activity, sexual conduct, or sadomasochistic abuse. In some cases, such action constitutes a felony.”

Statement 22

My name is _____ I am _____

I oppose reopening the sex education rules and regulations. But if they are to be opened, I propose the language in section A.3 be amended to read as follows:

“As per the U.S. Supreme Court ruling in *Miller v. California*, establishing the Miller test for determining whether materials shall be considered obscene, no obscene materials shall be shown or be considered instructional or educational materials in sex education in the state of Arizona. In addition, as per ARS 13-3506, no material that could be considered “harmful to minors” (including items depicting “nudity, sexual activity, sexual conduct, sexual excitement, or sadomasochistic abuse”) shall be allowed in Arizona schools.”

Statement 23

My name is _____ I am _____

I oppose reopening the sex education rules and regulations. But if they are to be opened, I propose the language in section A.3 be amended to read as follows:

“As per House Concurrent Resolution 2009 which declares pornography a public health crisis in Arizona which can lead to risky sexual behavior and the hyper-sexualization of teens, sex education instruction shall include information on the harms of pornography exposure and viewing for children and equip children with avoidance skills and resources to address addiction.”

Because of the widespread availability of Internet pornography that is just a few clicks away from children, we are raising a generation of children who have been exposed to porn at increasingly younger ages. Because of its addictive nature, the damage to young people from pornography is even more serious and far-reaching. Negative outcomes of pornography use in children include:

- Increased rates of depression and anxiety
- Increase in acting out and violent behavior
- Younger age of sexual debut
- Sexual promiscuity
- Increased risk of teen pregnancy
- Distorted view of relationships between men and women

To protect Arizona’s children, we need to do better in helping youth to understand the risk and harms of pornography viewing and to empower youth with the knowledge and skills they need to avoid it.

Statement 24

My name is _____ I am _____

I oppose reopening the sex education rules and regulations. But if they are to be opened, I propose the language in section A.3. b to be amended to read as follows:

“Stress that STIs/STDs including HIV/AIDS ~~sexually transmitted diseases~~ INFECTIONS can have severe short-term and long-term mental and physical consequences and constitute a serious and widespread public health problem. Schools may provide instruction on methods to prevent STIs/STDs including HIV/AIDS in accordance with [proposed amendment] A.1.a.ix wherein it states “All discussion regarding contraception or condoms shall emphasize that the expected standard for children of minor age is abstinence from all sexual activity as per ARS 15-716 and that abstinence is the only 100-percent effective method in preventing pregnancy and STIs/STDs including HIV/AIDS. Students shall also be given information regarding the failure rates of all contraceptive choices. At no time shall children ever be taught that contraceptive use by minors can make sex ‘safe.’”

Research shows that adults, let alone teens, even with the best of intentions seldom are able to use condoms consistently and correctly every time, a standard needed to provide meaningful protection from pregnancy and STIs/STDs. This likely because, as the American College of Pediatrican explains:

“Over two decades of neuroscience research indicates that important regions of the human brain are not fully developed until a person reaches their early to mid-twenties. These regions include the frontal lobes, which are responsible for governing impulse control, anticipation of consequences, judgment, planning, goal-setting, and prioritizing, and the hippocampus and amygdala, which together mediate motivation, memory, attention, and emotional/affective behavior: Thus, the adolescent brain is physiologically geared for risk-taking behavior and impulsiveness with immature processing of information, and failure to anticipate the future impact of behavior, making it “difficult for them to understand and use contraceptive methods effectively and consistently.” In other words, adolescents aren’t neurologically well-equipped for “reasoned action” or “planned behavior,” especially in highly emotional, impulse-driven situations.”

Children deserve to be told the truth so they can make healthy decisions.

Statement 25

My name is _____ I am _____

I oppose reopening the sex education rules and regulations. But if they are to be opened, I propose the language in section A.3.e to be amended to read as follows:

“In addition, as per ARS 13-3506, no material that could be considered “harmful to minors” (including items depicting “nudity, sexual activity, sexual conduct, sexual excitement, or sadomasochistic abuse”) shall be allowed in Arizona schools.”

ARS13-3506 prohibits furnishing a child with items deemed “harmful to minors.” This statute further defines “harmful to minors” to encompass any items depicting “nudity, sexual activity, sexual conduct, sexual excitement, or sadomasochistic abuse.”

Yet multiple sex education programs across the state violate this statute. Consider the following quotes from sex ed programs in our state that violate this law:

Crossword puzzle clue for ‘clitoris’: “My only function is that I feel very sensitive when I’m touched!” (“Rights, Respect, Responsibilities,” Grade 7, Lesson 1, p. 4)

“Max and Julia spend a lot of time together now that they’re a couple. When they find some private time alone, they like to kiss a lot. Max really wants to do something more, and so the next time they’re alone together, he tries to pull Julia’s shirt up and reach for one of her breasts.” (

Crossword puzzle clue for ‘clitoris’: “My only function is that I feel very sensitive when I’m touched!” (Rights, Respect, Responsibilities Grade 7, Lesson 1, p. 4)

“Max and Julia spend a lot of time together now that they’re a couple. When they find some private time alone, they like to kiss a lot. Max really wants to do something more, and so the next time they’re alone together, he tries to pull Julia’s shirt up and reach for one of her breasts.” (“Rights, Respect, Responsibilities,” Grade 6, Lesson 3, p. 4)

“Malik watches porn sometimes when he’s home alone and is nervous about whether he’ll know what to do.” (“Rights, Respect, Responsibilities,” Grade 8, Lesson 2, p. 7)