

## CSE Harmful Elements Analysis Tool

The CSE Harmful Elements Analysis Tool<sup>1</sup> was created to help parents, school administrators, educators, and other concerned citizens assess, evaluate, and expose harmful elements within comprehensive sexuality education (CSE)<sup>2</sup> curricula and materials. For more information, visit [www.stopcse.org](http://www.stopcse.org).

### Analysis of *You, Your Life, Your Dreams: A Book for Caribbean Adolescents* Based on 15 Harmful Elements Commonly Included in CSE Materials

**CSE HARMFUL ELEMENTS SCORE = 15/15**

*You, Your Life, Your Dreams: A Book for Caribbean Adolescents* contains 15 of the 15 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:** *You, Your Life, Your Dreams* is a “peer education manual” that claims to be a culturally appropriate program for Caribbean communities, yet it promotes highly controversial materials that run counter to the religious and cultural values of many, if not most, Caribbean families and faith groups. Developed by Family Care International, a U.S.-based abortion and sexual rights advocacy group, this program is really just a cleverly disguised Western program, encompassing the same standard controversial elements typical of CSE curricula.

A message in the foreword of the manual from Edwin W. Carrington, Secretary General of CARICOM, recognizes that the sensitive nature of the issues requires the “careful use of the materials ... within the context of legal frameworks of our societies and also their own cultural and religious environments.” Yet the manual, intended to be read by youth, encourages promiscuity and sexual pleasure as “rights” for children, and addresses issues such as homosexuality, masturbation, and abortion in a less than “careful” manner, including by using graphic drawings of nude adolescents and male and female genitals, and drawings that instruct youth how to put on a condom. The manual also instructs children on anal and oral sex.

One stated purpose of *You, Your Life, Your Dreams* is to ensure the sexual and reproductive health of youth as they transition to adulthood by, among other things, preventing (1) unwanted pregnancy, (2) coercive or abusive sexual activity, (3) unsafe abortions, and (4) sexually transmitted infections (STIs), including HIV/AIDS. Unfortunately, while these goals are laudable, there are some glaring omissions with regard to sexually transmitted diseases and risk factors of contraceptives in the manual, and it is riddled with inaccurate and even dangerous information that ultimately will produce the very consequences it intends to eradicate.

While the authors claim the information in the manual is “validated by young people,” the program fails to provide the education and skills that have been proven to ensure the best outcomes for youth and society as a whole.

*You, Your Life, Your Dreams* is recommended as a resource for Caribbean countries as part of the Health & Family Life Education project on the website of the UWI Open Campus Health & Family Life Education in the Caribbean. Partners in this project include CARICOM, UNFPA, UNICEF, UNESCO. (See at <http://open.uwi.edu/hflecaribbean/comment/reply/415/14672>)

<sup>1</sup> 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](http://www.stopcse.org) for a blank template or to see analyses of various CSE materials.

<sup>2</sup> 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.

The UNESCO HIV and Health Education Clearinghouse also recommends the manual in their Resources here: <https://hivhealthclearinghouse.unesco.org/library/documents/you-your-life-your-dreams-book-caribbean-adolescents-english-speaking-caribbean>

**Format and Target Age Group:** The CARICOM Secretariat and the United Nations Population Fund (UNFPA) Caribbean Office partnered with FCI to produce the three-volume life skills program directed to **adolescents age 10 to 19**. The manual contains a great deal of information that is highly inappropriate for young adolescents and especially inappropriate for children as young as 10 years old. **Warning:** Graphic pictures and inappropriate content for young children from this manual are included in the Appendix

**Planned Parenthood Connections:** There are six references to Planned Parenthood or Planned Parenthood publications in the bibliography. (Vol. 3 pg. 174 – 178)

HARMFUL CSE ELEMENTS	EXCERPTED QUOTES FROM CSE MATERIAL
<p><b>1. SEXUALIZES CHILDREN</b></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 graphic materials, teach explicit sexual vocabulary, or encourage discussion of sexual experiences, attractions, fantasies or desires.</i></p>	<p>“<b>We have sexual feelings</b> and may not always know what to do about them.” (Vol. 1, pg. 2)</p> <p>In a section teaching about the individuality of the rate of growth spurts during puberty, an illustration of six naked 13-year-old male and female children shows the differences in various physical characteristics, including height, female breast size, amount of pubic hair, and male penis/genital size. This drawing can be seen at the bottom of this document. (Vol 1, pg. 10)</p> <p>“This fluid comes out of the penis when a man ejaculates or ‘comes’”. <b>Ejaculation is the climax of sexual excitement</b>; though keep in mind that we don’t necessarily ejaculate every time we have an erection.” (Vol. 1, pg. 19)</p> <p>“<b>An erection can happen when a penis is touched or caressed</b>, when you are excited by a sexual thought, or by the sight of someone you find attractive.” (Vol. 1, pg. 19)</p> <p>“Wet dreams only happen when we are asleep. Many boys who wake up to find that they have ejaculated recall that they were <b>dreaming about something sexually arousing</b>, but we can have a wet dream even if we have not been having a sexy or erotic dream.” (Vol. 1, pg. 20)</p> <p>“Breasts are very sensitive to touch for many women. <b>Touching and caressing your breasts is very pleasurable and can be sexually exciting</b>. It is important that you learn how and when to obtain pleasure fondling your breasts. Since this is part of the sexual foreplay and exciting for your partner as well, it is also important to establish your boundaries and discuss them with your partner beforehand.” (Vol. 1, pg. 26)</p> <p>“<b>The vagina is also extremely sensitive to touch and is the centre of orgasms in women</b>, no matter how the orgasm is primarily brought about (see Chapter 9). Stimulation of any sexually sensitive zone can provoke a vaginal orgasm in women.” (Vol 1. Pg. 28)</p> <p>[Following an anatomical description of the clitoris:] “When stimulated it enlarges — similar to what happens to the penis—and <b>results in great pleasure and sexual arousal, sometimes ending in orgasm</b>. In fact, stimulation of the clitoris is essential for some women to bring about orgasm.” (Vol 1. Pg. 28)</p> <p>“<b>We are sexual beings from the time we are born.</b>” (Vol. 2, pg. 79)</p> <p>“... think about our choices related to sexual activity. <b>There are several options: masturbation, different levels of sexual practices such as cuddling, fondling, kissing, having sexual intercourse, or abstinence.</b>” (Vol. 2, pg. 79)</p>

	<p>“Every person has sexual feelings, every person is different, and every person will need to decide if, how, and when to act on these sexual feelings. <b>Every person is a sexual being from birth until death.</b> Being sexual can mean ...</p> <ul style="list-style-type: none"> <li>• Touching your own body.</li> <li>• Feeling attracted to another person.</li> <li>• Making up erotic stories in your head.</li> <li>• Having sexy thoughts or feelings “ (Vol. 2, pg. 79)</li> </ul> <p>“Sexuality is an important, joyful, and natural part of being a person. It is a form of communication and <b>a source of pleasure</b>, health, and tenderness that is expressed through looks, hugs, kisses, and cuddling. These are referred to as sexual practices. It also includes sexual intercourse in all of its forms.” (Vol. 2, pg. 79)</p> <p><b>“There is more than one way of living your sexuality and expressing your sexual feelings, and all of them can be joyful and fulfilling.”</b> (Vol. 2, pg. 79)</p> <p>“You know when you start feeling sexually aroused in the way your body reacts. An obvious physical sign of sexual feeling is <b>erection of the penis for boys, whereas girls often experience wetness in the genital area.</b>” (Vol. 2, pg. 82)</p> <p>“What should you do about your sexual feelings? First, keep in mind that sexual intercourse is only one way that people express sexual feelings and there are plenty of other ways people sexually express themselves—from talking to each other and holding hands, to hugging, cuddling, kissing, and touching each other. <b>These ways of expressing sexual feelings can be very arousing and satisfying</b>, and they carry little risk of HIV infection Your whole body may feel very sensitive and stimulated, possibly staying at this level of sexual excitement for a long time without having to go further. Or, <b>you may want to go further and involve your genitals by caressing and rubbing them.</b>” (Vol. 2, pg. 82)</p> <p>“Sexual intercourse (often referred to as “sex” or “having sex”) occurs when two people put their bodies close together and <b>the male’s erect penis goes into the body of his partner.</b>” (Vol. 2, pg. 83)</p> <p>“Also, even without intercourse, <b>if you have an orgasm by touching and cuddling someone else and if you are naked</b> and the semen is released close to the vagina, there is a risk of pregnancy or HIV infection.” (Vol. 2, pg. 84)</p> <p>“Sex can be a pretty steamy subject. But <b>if you hope to understand anything about pleasing yourself or your (potential) partner(s)</b>, you need to understand how your body works during sex.” (Vol. 2, pg. 85)</p>
<p><b>2. TEACHES CHILDREN TO CONSENT TO SEX</b></p> <p><i>May teach children how to negotiate sexual encounters or how to ask for or get “consent” from other children to engage in sexual acts with them.</i></p> <p><b>Note:</b> “Consent” is often taught under the banner of sexual abuse prevention. While this</p>	<p>“Are you a sexually healthy individual? You are if you: <b>Discuss sexuality with your partner before having sexual relations.</b>” (Vol. 2, pg. 81)</p> <p>“It is important to know that not all physical touching leads to sexual excitement. If a person is pushed unwillingly into sexual activity, they are not likely to be excited or take pleasure from it. <b>Sexual excitement usually only happens when people are relaxed and consent to the sexual activities in which they are taking part.</b>” (Vol. 2, pg. 83)</p> <p>“... <b>becoming sexually active is a deliberate decision a person takes.</b> When you have sex, it is not nature overcoming you. It is you who make a decision. In fact you make many decisions about sex: <b>When? With whom? Why? Where? What kind of sex?</b> How often? With or without a condom? Where do you get contraceptives?” (Vol. 2, pg. 90)</p>

<p><i>may be appropriate for adults, children of minor age should never be encouraged to “consent” to sex.</i></p>	<p>“It’s very important to be able to <b>tell your partner how you feel and what you do</b> and do not want to do. <b>Many people feel uncomfortable and embarrassed talking about sex, but it usually gets easier with time and practice.</b>” (Vol. 2, pg. 92)</p> <p>“<b>Think about what you want</b> and what you don’t want to do.” (Vol. 2, pg. 92)</p>
<p><b>3. NORMALIZES ANAL AND ORAL SEX</b></p> <p><i>Introduces these high-risk sexual behaviors to children and may normalize them. May omit vital medical facts, such as the extremely high STI rates (i.e., HIV and HPV) and the oral and anal cancer rates associated with these risky sex acts.</i></p>	<p>“Did you know that there are other types of sex and intercourse besides vaginal sex? Vaginal sex is the best known type of sexual practise. <b>But there are other kinds such as anal sex and oral sex.</b>” (Vol. 2, pg. 84)</p> <p>“<b>Anal sex is the stimulation of the anus during sexual activity. It can be done in several ways: manually, orally (anilingus), or by anal intercourse that is the insertion of a man's penis into his partner's rectum.</b> Anal sex is often thought of as an activity in which men who have sex with men engage, but it is also practised by heterosexual couples. <b>It can be pleasurable</b> but it can also be a source of discomfort..” (Vol. 2, pg. 84)</p> <p>“<b>Oral sex or oral-genital sex means both mouth contact with the vagina, which is called cunnilingus, and mouth contact with the penis, which is called fellatio.</b> Either form of oral sex can be done with one partner stimulating the other individually or both partners doing it simultaneously. The latter is called “69” because the position of the couple in simultaneous stimulation resembles this number. Although these are very common sexual practises and for many people quite enjoyable, some people have reservations about them.” (Vol. 2, pg. 84)</p> <p>“Before engaging in sexual activity of any kind, everyone should be sure that they and their partners are free from STIs, particularly HIV. Remember that the anus and genitals should be clean before performing <b>oral sex.</b>” (Vol. 2, pg. 84)</p> <p>“Many people have great reservations regarding [oral and anal sex], mostly based on cultural notions and on legal and religious restrictions that are still very powerful. In some contexts, these practices, <b>especially anal sex and fellatio</b>, may be associated with pressured sex, often involving some degree of violence. <b>All in all, an individual’s sexual practises should be private decisions. Sex is very intimate, and sexual relationships are to be pleasurable and satisfying.</b> Couples should feel comfortable together and able to discuss openly all of these forms of sexual expression..” (Vol. 2, pg. 84)</p> <p>“According to the [definition of moral virginity], any person who has experienced <b>sexual intercourse, that is penetration, whether it is vaginal, oral, or anal</b> is not a virgin anymore.” (Vol. 2, pg. 87)</p>
<p><b>4. PROMOTES HOMOSEXUAL/ BISEXUAL BEHAVIOR</b></p> <p><i>Promotes acceptance of and/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>“<b>Are You a sexually healthy individual? You are if you: Affirm your own sexual orientation and respect the sexual orientation of others.</b>” (Vol. 2, pg. 81)</p> <p>“<b>Some people feel romantically and sexually attracted to people of the same sex. This is called homosexuality.</b> Some men feel attracted to men and are called “gays”, and some women feel attracted to women and are called “lesbians”. Furthermore some people are attracted to both men and women, and are called bisexuals.” (Vol. 2, pg. 82)</p> <p>“<b>At some point in their lives, most people have sexual feelings, thoughts, dreams, and attractions to someone of the same sex.</b> Two close friends (either two boys or two girls) might have a crush on each other. They like being together and at times feel physically attracted to each other. Some people find these feelings confusing or upsetting, but they are normal and it is also part of discovering and developing our</p>

	<p>sexual identity.” (Vol. 2, pg. 82)</p> <p><b>“Some people are consistently attracted only to people of the same sex;</b> being homosexual is for them a life option. The realisation that you are homosexual can be painful because you may feel very different than your peers and you may find it difficult to accept and express your sexual feelings or to share this with others.” (Vol. 2, pg. 82)</p> <p><b>“In many contexts homosexuality is considered something that is wrong and homosexual practices may even be censured by law.</b> Regardless of the context, homosexuals, both gays and lesbians, shouldn’t be rejected or discriminated against.” (Vol. 2, pg. 82)</p> <p><b>“You can feel desire for someone of the same sex or the opposite sex.”</b> (Vol.2, pg. 85)</p>
<p><b>5. TEACHES CHILDREN ABOUT SEXUAL PLEASURE</b></p> <p><i>Teaches children about sexual pleasure. May tell them they are entitled to or have a “right” to sexual pleasure or may encourage children to seek out sexual pleasure.</i></p>	<p>“Although sometimes the size of the penis is associated with masculinity or sexual performance, this is a myth. <b>Sexual performance and pleasure do not depend on penis size.</b> The size of the penis actually has little effect on the enjoyment of sexual activity. In fact, sexual enjoyment is mostly determined by how you feel and your state of mind. It’s the relationship that counts—not the size or shape of the penis.” (Vol 1, pg. 16)</p> <p><b>“What is true is that both circumcised and uncircumcised males can enjoy sex and please their partners.”</b> (Vol 1, pg. 17)</p> <p><b>“Do you know there are myths about the penis? A small penis cannot please a sexual partner. False! The size of the penis has little effect on the enjoyment of sexual intercourse.”</b> (Vol. 1, pg. 18)</p> <p><b>“Breasts are very sensitive to touch for many women. Touching and caressing your breasts is very pleasurable and can be sexually exciting.</b> It is important that you learn how and when to obtain pleasure fondling your breasts. Since this is part of the sexual foreplay and exciting for your partner as well, it is also important to establish your boundaries and discuss them with your partner beforehand.” (Vol. 1, pg. 26)</p> <p><b>“The vagina is also extremely sensitive to touch and is the centre of orgasms in women,</b> no matter how the orgasm is primarily brought about (see Chapter 9). Stimulation of any sexually sensitive zone can provoke a vaginal orgasm in women.” (Vol. 1, pg. 28)</p> <p><b>“When stimulated [the clitoris] enlarges —similar to what happens to the penis—and results in great pleasure and sexual arousal, sometimes ending in orgasm.</b> In fact, stimulation of the clitoris is essential for some women to bring about orgasm.” (Vol. 1, pg. 28)</p> <p><b>“Female vaginal fluids also change with sexual arousal.”</b> (Vol. 1, pg. 29)</p> <p>Sex is very intimate, and <b>sexual relationships are to be pleasurable and satisfying.</b>” (Vol. 2, pg. 84)</p> <p><b>“During the excitement phase, the body responds to this feeling of desire and prepares for sexual contact:</b> muscles tense, and heart rate and blood pressure increase. In both men and women, nipples may get hard, and women’s breasts enlarge. Blood flow increases to the genitals, so that the clitoris swells or the penis becomes erect. In women, the vagina lubricates itself; in men, the scrotum thickens and the testes move closer to the body.” (Vol., 2, pg. 85)</p>

	<p>“With stimulation, usually involving physical contact, the excitement phase gradually becomes the plateau phase. The contact does not have to be genital contact or intercourse; <b>kissing or touching of almost any part of the body can have the required effect.</b> During the plateau, the body remains at a heightened state of arousal.”</p> <p>“<b>Genitals are usually the most sensitive parts of a person’s body,</b> but for most people, other areas can also cause arousal when touched. These places, called erogenous zones, often include breasts, feet, or ears. Just about any part of the body can be an erogenous zone.” (Vol., 2, pg. 85)</p> <p>“Orgasm: The Climax. <b>When sufficiently aroused, both women and men may experience orgasm.</b> During orgasm, certain hormones called endorphins are released into the body, bringing intense pleasure and relaxation. At the same time, both women and men experience a loss of muscle control, and increased heart rate and blood pressure. For most women, stimulation of the vagina alone is not sufficiently stimulating to cause orgasm. <b>Orgasm usually also requires more direct stimulation of the clitoris.</b> For men, orgasm is usually accompanied by ejaculation. During ejaculation, the prostate gland and seminal vesicles contract, forcing semen out of the penis. <b>Some women, about 10%, also ejaculate fluid from their vagina at orgasm.</b>” (Vol., 2, pg. 85)</p> <p>“After orgasm, the body relaxes in a phase called resolution. Heart rate slows and blood pressure lowers; nipples, clitoris, penis all lose their tension and become soft. The scrotum relaxes, allowing the testes to drop away from the body once again. Most men experience a “refractory” period during which time they can’t get another erection. Refractory periods are usually briefer in younger men and longer in older men. <b>Most women, on the other hand, can have repeated orgasms right after the first one.</b>” (Vol., 2, pg. 85)</p> <p>“Making It ‘Good’. <b>For sex to be ‘good’, both partners need to be relaxed and at ease.</b> Some people take longer than others to become comfortable with a possible new partner, even if they’re sexually attracted. And once involved, the process of figuring out what is and isn’t enjoyable during sex can take a long time and requires trust and respect.” (Vol. 2, pg. 85)</p> <p>“<b>Being sexually healthy means that we can express our sexuality in a way that is pleasurable and fulfilling both for ourselves and our partner,</b> without putting either of us at risk.” (Vol. 2, pg. 95)</p> <p>“<b>Sex should be pleasurable for you.</b>” (Vol. 3, pg. 128)</p>
<p><b>6. PROMOTES SOLO OR MUTUAL MASTURBATION</b></p> <p><i>While masturbation can be part of normal child development, encourages masturbation at young ages, making children more vulnerable to pornography use, sexual addictions or sexual exploitation. May describe</i></p>	<p>“Breasts are very sensitive to touch for many women. <b>Touching and caressing your breasts is very pleasurable and can be sexually exciting. It is important that you learn how and when to obtain pleasure fondling your breasts.</b> Since this is part of the sexual foreplay and exciting for your partner as well, it is also important to establish your boundaries and discuss them with your partner beforehand.” (Vol. 1, pg. 26)</p> <p>“Do you know the facts about the vagina? There are many myths about the vagina. Here are some: It is obscene to touch the vagina. Not true! <b>Your vagina is a part of your body, and as such, you are free to touch it in private.</b> Unless you feel comfortable and have given consent, no one except you should touch your vagina.” (Vol. 1, pg. 27)</p> <p>“These ways of expressing sexual feelings can be very arousing and satisfying, and they carry little risk of HIV infection. Your whole body may feel very sensitive and stimulated,</p>

*masturbation or provide instruction on how to masturbate. May encourage children to engage in mutual masturbation.*

possibly staying at this level of sexual excitement for a long time without having to go further. **Or, you may want to go further and involve your genitals by caressing and rubbing them.**" (Vol. 2, pg. 82)

"Sex can be a pretty steamy subject. But if **you hope to understand anything about pleasing yourself** or your (potential) partner(s), you need to understand how your body works during sex." (Vol. 2, pg. 85)

**"Masturbation is the act of touching oneself in a sexually stimulating way, and it is another way that people sometimes express their sexual feelings.** Apart from the external genitals, our bodies have "erogenous zones" which are particularly sensitive to touch and respond by sexual arousal." (Vol. 2, pg. 86)

**"Both men and women can satisfy their sexual feelings and experience sexual pleasure through masturbation."** Most people masturbate sometime or other during their lives. Some people start masturbating when they are children and continue to do so all their lives. Some start during puberty; others start when they are adults. Other people never masturbate, and others feel that having sexual fantasies and masturbating conflicts with their religious or moral beliefs. (Vol. 2, pg. 86)

"There are myths that are meant to discourage people from masturbating. Here are some myths about masturbation:

- Masturbating makes you insane.
- Masturbating makes you grow hair on the palms of your hands, causes pimples on your face, or makes you go blind.
- Masturbating makes you pale.
- Masturbating makes you use up all your sperm, or causes you to stop menstruating.
- Masturbation makes you weak and makes it impossible to bear children.
- Masturbation causes you to lose your sexual desires.
- Masturbation makes you become a proud and self-centred person.

None of these myths are true. ... **masturbation is a normal part of the human experience. It is normal if you do masturbate,** and it is normal if you don't. Masturbation is only considered a problem when it is excessive, when a person cannot function or get through daily tasks without masturbating." (Vol. 2, pg. 86)

**"Experts in human sexuality consider masturbation one normal way for people to get to know their bodies and feelings,** and to express their sexuality without risking pregnancy or STIs, including HIV and AIDS. Nothing bad will happen to your body, even if you masturbate a lot. Your genitals might get sore from rubbing them too much. On rare occasions, a boy may contract non-specific urethritis (NSU), which is an inflammation of the urethra from excessive rubbing." (Vol. 2, pg. 86)

"Safer sex means sexual practices that greatly reduce your chances of getting STIs, including HIV, or getting pregnant. **If you want totally safe sex—100% sure safe sex—then the best choices for you are masturbation** (see Chapter 9 on masturbation), abstaining from rubbing genitals or sexual intercourse, **and using sex toys.**" (Vol. 2, pg. 104)

"... masturbation is totally safe. The only body fluids and private parts you are in contact with are your own. You cannot get infected with anything, and you cannot get yourself or anyone else pregnant. **Sex toys or sex aids (the most popular ones being vibrators) are devices which are made to enhance sexual pleasure.** They are used mainly on the genitals or around the genitals. You can use a sex toy by yourself or as a couple. If you

	<p>are sharing a sex toy with your partner make sure to wipe it clean before giving it to your partner so that you don't exchange body fluids. Also remember to clean the sex toy after use." (Vol. 2, pg. 104)</p> <p>"There are ways to avoid getting STIs, including HIV: Do not have sexual intercourse. Postpone or stop sexual relations and <b>stick to masturbation</b>, kissing, and hugging." (Vol. 2, pg. 112)</p>
<p><b>7. PROMOTES CONDOM USE IN INAPPROPRIATE WAYS</b></p> <p><i>May encourage the use of condoms by calling them "safe" and even "fun" or pleasurable. May use sexually explicit methods (i.e., penis and vagina models, seductive role plays, etc.) to promote condom use to children. May provide medically inaccurate information on condom effectiveness and omit or deemphasize failure rates. May imply that condoms will provide complete protection against pregnancy or STIs.</i></p>	<p><b>Note:</b> <i>There are no data in the manual informing children of the failure rates of condoms resulting in pregnancy, which according to one study can be over 25 percent over a two-year period. The program also fails to inform children that condoms do not protect against STDs spread by skin-to-skin contact, such as herpes or genital warts caused by the Human Papillomavirus (HPV).</i></p> <p>"The last component of the [ABC] strategy and perhaps the most important for sexually active adolescents is the correct and consistent use of condoms. This means, <b>when you decide that you and your partner are ready for sex, be sure to always use a latex condom correctly.</b> You have the right and the knowledge <b>to protect yourself!</b>" (Vol. 2, pg. 91)</p> <p>"Do you know there are myths about the penis? Boys with penises that are too big or too small cannot use condoms Not true! <b>Condoms are made to fit tightly and everyone can use them.</b>" (Vol. 1, pg. 18)</p> <p>"Some people worry that a latex condom will not be able to hold all 500 million sperm. But those sperm are very, very small, and <b>provided a condom is put on correctly and used consistently, it will be able to hold them all</b> (see Chapter 10 for more on condoms). Also, sperm cannot cross the latex wall and condoms are carefully tested." (Vol. 1, pg. 20)</p> <p><b>"If you decide to say 'Yes' to sex, you must practise safer sex to avoid pregnancy, HIV and AIDS, and other STIs. Therefore: No condom, no sex."</b> (Vol. 2, pg. 91)</p> <p>If you and your partner or partners use latex condoms every time you have sexual intercourse, you should continue to do so! Many people start out using latex condoms, but after a while they start to think: "I trust my partner. We can stop using condoms." This is a big mistake! Some people think that using a latex condom is a sign of mistrust. <b>On the contrary, using a latex condom is proof that you love and care for your partner.</b> Even if you and your partner or partners have check-ups and do not have any STIs, <b>it is best to continue using latex condoms to avoid pregnancy and catching or passing on STIs.</b>" (Vol. 2, pg. 96)</p> <p>"If you do have sex, always use a latex condom. <b>If used correctly and consistently, latex condoms can protect you from HIV and other STIs.</b>" (Vol. 2, pg. 99)</p> <p><b>"Using a latex condom during every sexual intercourse to avoid giving the virus to someone or getting more viruses into your body."</b> (Vol. 2, pg. 102)</p> <p><b>"If used correctly and consistently, latex condoms provide very good protection against pregnancy and STIs,</b> including HIV and AIDS. Latex condoms keep bacteria and viruses in the vagina, anus, or mouth from coming in contact with the penis, and they prevent sperm, bacteria, and viruses in semen from entering the other person's body." (Vol. 2, pg. 105)</p> <p><b>Note:</b> <i>Again, there is no mention that HPV, which causes cervical cancer, is contracted</i></p>

	<p><i>by skin-to-skin contact and that a condom will not prevent infection.</i></p> <p><b>“Many</b> people who use latex condoms say they make sex more enjoyable for both partners because both can relax more when they are not worried about the possibility of pregnancy or getting an STI. Some men also say that using a latex condom helps them to avoid ejaculating or “coming” too soon and thus giving more pleasure to their partners.” (Vol. 2, pg. 107)</p> <p>“[The female condom’s] benefits: <b>It is the only barrier method controlled by the woman that protects against STIs/HIV, AIDS, and pregnancy.</b> It gently lines the vagina and does not cover the penis tightly.” (Vol. 2, pg. 108)</p>
<p><b>8. PROMOTES EARLY SEXUAL INDEPENDENCE</b></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.</i></p>	<p>“Taking risks is not necessarily bad, but <b>it is important that we take calculated risks that we can handle.</b> To do this, we must have enough information to evaluate the risk, try to anticipate the consequences of our decisions, and trust in our own capacities to respond responsibly... . One important sign of maturity is to be aware of our abilities and limits, and to take calculated risks.” (Vol. 1, pg. 3)</p> <p><b>“All adolescents should be able to make decisions about their sexuality,</b> and decide without pressure whether or not to have sex, and when and whether or not to have children. To do this, young people need access to information, counselling, and health care services.” (Vol. 1, pg. 6)</p> <p>“All in all, <b>an individual’s sexual practises should be private decisions.</b> Sex is very intimate, and sexual relationships are to be pleasurable and satisfying.” (Vol. 2, pg. 84)</p> <p>“But the truth is that becoming sexually active is a deliberate decision a person takes. <b>When you have sex, it is not nature overcoming you. It is you who make a decision.</b> In fact you make many decisions about sex: When? With whom? Why? Where? What kind of sex? How often? With or without a condom? Where do you get contraceptives? (Vol. 2, pg. 90)</p> <p>“There’s important information we should know about staying healthy and protecting ourselves from sexual and reproductive health problems. <b>Our sexual and reproductive rights include having access to this information and to appropriate health services.</b>” (Vol. 2, pg. 95)</p>
<p><b>9. FAILS TO ESTABLISH ABSTINENCE AS THE GOAL</b></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><b>Note:</b> Instead of strongly discouraging children from engaging in sex at an early age, this program, like most CSE programs, focuses on helping children decide <i>if</i> they are going to delay having sex, temporarily, until some vague, undetermined time when they feel they are “ready” to have sex.</p> <p>“Life skills are just as important as knowing the facts of life. For example, you may know that unprotected sex can lead to pregnancy and STIs, including HIV and AIDS. With this in mind <b>you may decide that you want to abstain from having sex for the time being,</b> and you use assertiveness with your boyfriend or girlfriend to communicate your point.” (Vol. 1, pg. 6)</p> <p><b>“Decisions about sexual intercourse involve you and your partner...”</b> (Vol. 2, pg. 92)</p> <p>“In brief, there are three ways to avoid STIs, including HIV: 1. Abstaining from sexual intercourse. <b>Delay the beginning of your sex life</b> or stop having sexual intercourse.” (Vol. 2, pg. 96)</p>

<p><i>good options for children.</i></p>	<p><b>“Wait as long as possible before starting sex</b> because sex is the main way that HIV is transmitted.” (Vol. 2, pg. 99)</p> <p>“Since only abstinence is 100% effective in preventing unwanted pregnancies and HIV and STI infections, the ABC approach proposes that young people practice sexual abstinence until they are fully informed and prepared to engage in sexual activity. <b>This means delaying having sex until you are emotionally ready</b> and that you and your partner know the risks and responsibilities involved and how to protect yourselves. <b>This behaviour is of course recommended for very young adolescents who are in the process of discovering their sexuality and their sexual feelings and who are not yet prepared to negotiate safer sex.</b> Many older adolescents and young people also practise abstinence for different reasons, including religious beliefs. Also, anyone who has been sexually active can opt for abstinence at a certain stage later in life. Nevertheless, opting for abstinence should not preclude education on sexual and reproductive matters. <b>Everyone should have information and develop skills to lead a healthy sexual life,</b> even if they choose to delay sexual activity or abstain from sex until marriage. Sooner or later you will have to make choices and you will need both the information and the skills to do so.” (Vol. 2, pg. 91)</p>
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<p><b>10. PROMOTES GENDER CONFUSION</b></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 gender ideologies. Fails to teach that most gender-confused children resolve it by adulthood and that extreme gender confusion is a mental health disorder (gender dysphoria) that may be helped with therapy.</i></p>	<p><i><b>Note:</b> Rightly so, this program includes some information about gender stereotypes and gender violence. However, there are also references to choice and to individuals “deciding” how they want to identify themselves. Though this program is not as blatant as most CSE programs in this regard, it is designed to lay the groundwork for greater acceptance of the idea that an individual can change genders.</i></p> <p>“Adolescence is a time when many people become more aware of their <b>sexual identity</b> and sexual orientation. <b>Sexual identity is the way in which a person identifies himself or herself as male, female or some combination of the two.</b>” (Vol. 2, pg. 82)</p> <p>“<b>There is more than one way of living your sexuality</b> and expressing your sexual feelings, and all of them can be joyful and fulfilling. It may be helpful to know that <b>sex refers to the biological characteristics that define a man and a woman, while gender is how men and women are defined socially and culturally.</b>” (Vol. 2, pg. 89)</p>
<p><b>11. TEACHES ABORTION/ CONTRACEPTION</b></p> <p><i>May present abortion as a safe or a positive option, while omitting data on the many potential negative physical and mental health consequences.</i></p>	<p><b>Abortion</b></p> <p>“When performed by trained medical personnel under hygienic conditions, <b>abortion is a very safe medical procedure, one that is even safer than childbirth.</b>” (Vol. 3, pg. 120)</p> <p>“<b>A woman that undergoes an abortion,</b> whether natural or induced, <b>should receive counselling</b> since it is a strong emotional strain.” (Vol. 3, pg. 120)</p> <p><b>Contraceptives</b></p>

May teach children they have a right to abortion and refer them to abortion providers.  
May encourage the use of contraceptives, while failing to present failure rates or side effects.

**Note:** The program manual includes a great deal of information on oral birth control pills, injections and implants, but fails to mention the wide range of potential side effects or complications. With regard to oral contraception, the manual fails to inform students that, statistically, teens are less likely to be consistent in taking the required daily pill. According to the American Academy of Pediatrics, oral contraceptive pills (OCPs) “failure rates range between 5% and 8% with typical use and for adolescents may reach 15% to 26% because of noncompliance. Adolescents may have difficulty complying with OCPs because of forgetfulness, attempts to hide contraception from parents, and inconsistency of sexual relations, among other reasons. The National Survey on Family Growth reported that as many as 42% of adolescents 15 to 19 years of age missed 2 or more pills in a 3-month period. (The official journal of the American Academy of Pediatrics, Nov. 2007, VOL. 120 / ISSUE 5. Found at <http://pediatrics.aappublications.org/content/120/5/1135#ref-57>)

“There are much better and more effective ways to prevent unintended pregnancies, such as abstaining from sexual intercourse and **practicing safer sex by using condoms and contraceptives.**” (Vol. 1, pg. 30)

“There are much better and more effective ways to prevent unintended pregnancies, such as abstaining from sexual intercourse and **practicing safer sex by using condoms and contraceptives.**” (Vol. 1, pg. 30)

“**There are many different kinds of contraceptives that are perfectly safe for adolescents.**” (Vol. 3, pg. 121)

“**“Are you a sexually healthy individual? You are if you: Use contraception effectively to avoid unintended pregnancy.”** (Vol. 2, pg. 81)

**Note:** This infers that having sex for teens, as long as it is contracepted, makes for a healthy teen.

### **Emergency Contraception (EC)**

**Note:** While mainstream professional medical organizations define pregnancy as beginning when a fertilized embryo is implanted in the uterine wall, others define pregnancy as beginning at the moment of conception, i.e. when the egg is fertilized with a sperm forming an embryo. Since emergency contraception can prevent the implantation of an embryo, for those who define life as beginning at conception, emergency contraception is considered to be an abortifacient. Therefore, for many, promoting EC to children is the equivalent of promoting abortion to them.

[From a section on emergency contraception:] “**This is a method that you can use immediately after having unprotected sex to prevent pregnancy;** for example, if you forgot to use a condom or if the condom breaks or slips off accidentally (which is very rare if they are used properly). It is not a permanent method and should not be used frequently. As the name states, it is a useful solution in emergencies.” (Vol. 3., pg. 122)

“Emergency contraception is becoming more widely available these days. **If you do have unprotected sex and are very worried about pregnancy, you can rush to a health worker and ask about emergency contraception** within 72 hours (three days).” (Vol. 3., pg. 122)

“**Taking emergency contraception involves swallowing a set combination of contraceptive pills over a 12-hour period within 72 hours of the unprotected**

	<p><b>intercourse.</b> These pills can make you feel sick to your stomach, or cause you to vomit. Emergency contraception prevents about 3 out of 4 pregnancies that would otherwise have occurred, but it does not cause abortion.” (Vol. 3., pg. 122)</p> <p>“If you engage in unprotected sex, <b>go immediately to a clinic and ask for emergency contraception.</b> It can prevent pregnancy if taken within 72 hours of unprotected sex.” (Vol. 3, pg. 126)</p>
<p><b>12. PROMOTES PEER-TO-PEER SEX ED/SEXUAL RIGHTS ADVOCACY</b></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 controversial sexual rights (including a right to CSE itself) or to promote abortion.</i></p>	<p>“There’s important information we should know about staying healthy and protecting ourselves from sexual and reproductive health problems. <b>Our sexual and reproductive rights include having access to this information and to appropriate health services.</b>” (Vol. 2, pg. 95)</p> <p>“<b>It’s your right to receive quality health care in all matters regarding your sexuality.</b>” (Vol. 2, pg. 97)</p> <p>“<b>All adolescents have the right to information and counselling on contraception and to family planning methods.</b>” (Vol. 3, pg. 121)</p> <p>“If you are sexually active or are planning to be so in the near future, you should visit a health centre and inform yourself and your partner of your contraceptive options. <b>Remember you have a right to information and to good quality contraception counselling and services.</b>” (Vol. 3, pg. 121)</p> <p>“<b>Remember you have a right to information and contraception services. If you are sexually active, you should visit a health centre and demand these services.</b>” (Vol. 3, pg. 126)</p>
<p><b>13. UNDERMINES TRADITIONAL VALUES AND BELIEFS</b></p> <p><i>May encourage children to question their parents’ beliefs or their cultural or religious values regarding early sex, sexual orientation or gender identity.</i></p>	<p>“Many people have great reservations regarding [anal and oral sex], <b>mostly based on cultural notions and on legal and religious restrictions that are still very powerful.</b>” (Vol. 2, pg. 84)</p> <p>“Virginity is a concept that means a person has never had sexual intercourse and it applies for both boys and girls. In some contexts in our societies, virginity is considered a virtue, especially in girls who should preserve their virginity until marriage as a symbol of innocence and purity. This is not always true for boys. <b>In many cultures, sexual experience before marriage is encouraged and celebrated in men while condemned in women, which is an example of gender inequality.</b>” (Vol. 2, pg. 86)</p> <p>“We are living during an exciting time with many ideas and options in terms of how we want to live our lives. <b>We can choose the best of both worlds: the best of traditions and the best of modern thinking and progress. We have the choice</b> to embrace what we like and think is good and reject those things which we do not feel are right for us.” (Vol. 1, pg. 63)</p> <p>“As you try to <b>make your own decisions about which traditional and modern customs you want to live by,</b> try to listen and be sensitive to the beliefs of your parents and other family members. It can help if you try to explain your own feelings and thoughts, and ask the adults close to you why they feel the way they do.” (Vol. 1, pg. 63)</p>

**14. VIOLATES OR UNDERMINES 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.*

“Our feelings about our family and our relationships with our parents may also change. **Our parents may give us more responsibilities, which is a sign that they trust and rely on us. But they might also become stricter—keeping us from our friends and trying to make decisions for us about our schooling or our future.**” (Vol. 1, pg. 2)

“**Many parents don’t want to talk about sex with their children**, sometimes because they are afraid to see us as sexual beings, and because they lack the information, and **it can be hard to learn much from them.**” (Vol. 2, pg. 80)

“If you or someone you know is faced with an unwanted pregnancy, get help. Be honest with your parents or guardians about the situation. **If your parents are not helpful, visit a youth centre and ask a youth counsellor for advice about your options.**” (Vol. 3, pg. 121)

“**Parents’ and grandparents’ expectations can seem like a heavy burden sometimes.** We may even feel as though they are so focused on the plans they have for us that they aren’t listening to our ideas. **Some parents do expect a lot from their children, and this can be hard to deal with as we go through puberty and adolescence.**” (Vol. 1, pg. 63)

**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.

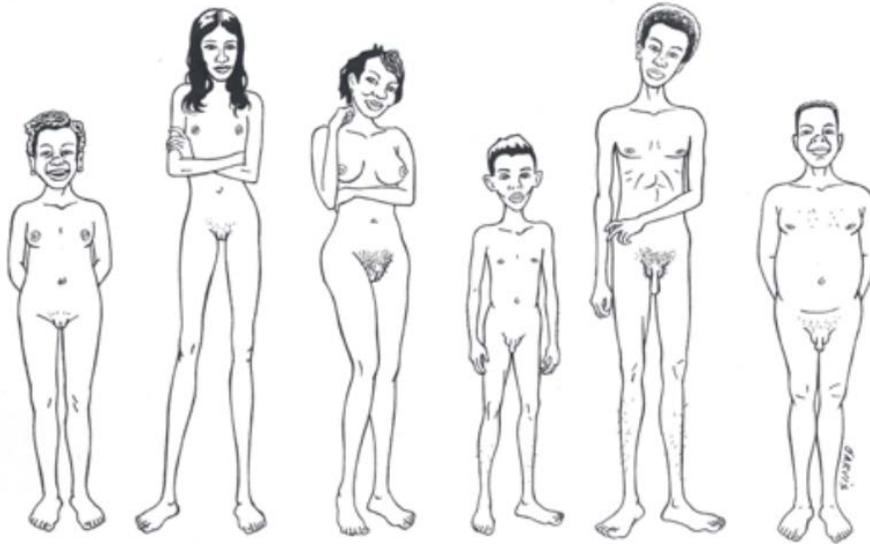
“**If you find yourself faced with an unwanted pregnancy**, do not condemn yourself, and do not try to cope with it alone. Find someone to talk to, someone who can help you make the best of this situation. Don’t make sudden decisions without getting all the information and advice you need or without thinking through all your options carefully. **You should speak with a health worker or youth counsellor; go to a clinic or your local family planning association.**” (Vol. 3, pg. 116)

“**Seek a youth counsellor** when you realise you are pregnant.” (Vol. 3, pg. 117)

**Note:** There are six references to Planned Parenthood or Planned Parenthood publications in the bibliography, three references to the Sexuality Information and Education Council of the United States (SIECUS). Both organizations provide a great deal of sexually explicit information directed to teens that would be considered very inappropriate by many parents. (Vol. 3, pg. 174-178)

**Warning:** Graphic pictures and inappropriate content for young children from this manual are included in the Appendix that follows.

**Appendix:**  
Pictures and Content from “You, Your Life, Your Dreams”



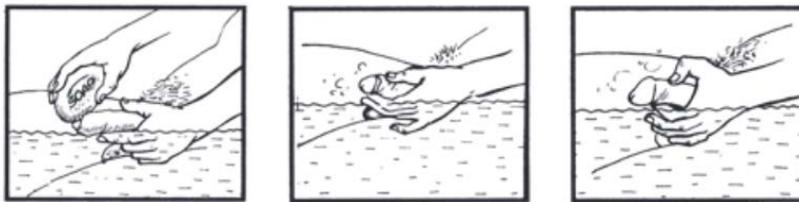
All of these girls are 13 years old, but they are developing at different speeds.

These boys are also 13 years old, and they too are developing at different rates.

Illustration Vol 1, pg. 10

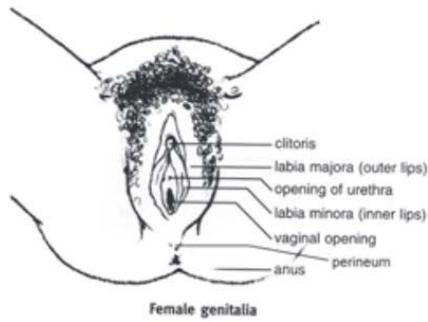
**PRACTISING GOOD HYGIENE**

Whether we are circumcised or not, it is important to wash and clean our penis every day—just as we wash every other part of our body. We should also wash the scrotum, between the scrotum and thighs and in between the buttocks.



If you are not circumcised, roll back the foreskin and wash gently beneath it.

Illustration Vol. 1, pg. 18



Female genitalia (clitoris, labia majora (outer lips), opening of urethra, labia minora (inner lips), vaginal opening, perineum, anus)

Illustration Vol 1. pg. 27



Magazines, music, novels, and advertisements give confusing messages about sex.

Illustration Vol. 2, pg. 81



**The information below from Vol 1, pg. 26- 28, while it may be accurate, isn't appropriate for 10-year-old boys. The manual specifically states that it is important for boys to know about the adolescence of girls.**

DID YOU KNOW that there are myths about breasts? People say a lot of things about breasts that are not true:

1. The sexiest girls have pointed breasts. This is false! Sexiness is a feeling, and different people find different things sexy.
2. Rubbing onions or scallions on nipples or letting insects bite them makes breasts grow faster. Not true! Hormones are what make the breasts develop —nothing else will make them grow faster or slower.
3. Girls with dark skin around their nipples have already had sex. False! Like the colour of your skin, the colour of the ring around the nipples (the areola) is determined by the genetic traits you inherit from your parents.
4. Breasts grow big when girls let boys touch them. Not true! The size of breasts is genetically determined. Nothing you do will make them bigger or smaller.
5. Girls with breasts that droop have already had sex, an abortion, or a baby. False again! Breasts droop because of gravity. If you have larger breasts they are more likely to droop because of their weight.
6. Wearing a bra makes breasts droop. False! Bras actually support breasts. They prevent the skin and breast tissue from stretching and losing their elasticity.
7. Girls with big breasts will have more milk for their babies. False! Milk production does not depend on the size of the breasts. Even small breasts produce enough milk to feed and satisfy a baby.

DO YOU KNOW the facts about the vagina? There are many myths about the vagina. Here are some:

1. The vagina is the dirtiest part of your body. False! The mouth is the dirtiest part of your body. Vaginal fluids and menstrual blood are actually clean, but once they leave the body, bacteria can breed in them and may make them odorous.
2. The vagina is not closed at the end. It is just a big hole. False! The vagina is closed at the end by the cervix. Condoms or tampons will not travel up into the body.
3. It is obscene to touch the vagina. Not true! Your vagina is a part of your body, and as such, you are free to touch it in private. Unless you feel comfortable and have given consent, no one except you should touch your vagina.
4. The vagina is only for the pleasure of men. False! The vagina is part of a woman's body, and it functions as a reproductive organ as well as a source of pleasure for her and for her partner. But it is hers and hers alone!

