



- ✓ Valuing Students
- ✓ Empowering Parents
- ✓ Enlightening Communities

“SEX ED” is NOT Comprehensive Sexuality Education

Contrary to popular belief, those who oppose Comprehensive Sexual Education (CSE) are not against sex ed. Typical accusations include cultural ignorance, and uncaring attitudes about premarital pregnancy, which is completely false.

Parents today want their children to be knowledgeable about their developing bodies, understand the risks associated with sexual relations at an early age with multiple partners, including pregnancy, HIV, and STI prevention. Although CSE curriculums address these issues, the underlying premise, and actual curriculum focus is of greatest concern.

Alfred Kinsey, considered the father of CSE, built it on the premise children are born sexual beings. And because of it, they have a right to sexual pleasure by themselves, or with a partner. Even more incredulous is the notion children should be involved in regular sexual activity to maintain good health. Inspired by these theories, current law provides children rights to sexual privacy and autonomy, birth control, and abortion, purposely excluding parents. According to Kinsey followers, most societal sexual and gender norms, especially those based in religious beliefs are considered repressive, even unhealthy, and should be changed.

Kinsey was not a medical doctor; he was a homosexual pedophile who came to his conclusions by molesting children as young as 2 months of age, and for “sexual research” purposes encouraged others to do the same. He then documented how many orgasms the child could achieve in a given period of time. In his book, “Sexual Behavior in the Human Female”, he claims that the children’s “definite pleasure from the situation” was evidenced in their “screams,” “convulsions,” “hysterical weeping,” “fighting,” and “striking the partner (adult)”.

Because all CSE programs share the same goals, Kinsey’s ideas about sexuality and children are evidenced in the various curricula such as FLASH, The Great Body Shop, The 3 Rs, and many others. Classroom leaders encourage students to experiment with sex and sexuality, to whatever “feels right” for them with a consenting partner, and to be “safe” using recommended forms of birth control.

For example, CSE strives to establish a positive learning environment encouraging students to use birth control. Positive features of each birth control method are reinforced, while risk factors are either glossed over or avoided. Statistical facts such as failure rates are replaced with feelings and opinions; “is very effective”, “works better than most people may think.” Parents who really care about their children want them to have a thorough knowledge of risks, both physical and emotional, in order to make an informed decision about sexual activity, or any other risky behavior.

CSE teaches the Kinsey notion students have the right to explore all types of sexual activity, including oral and anal. According to the CDC, since CSE was introduced in Washington state the rates of oral cancers and STIs in youth 15-25 have skyrocketed. CSE does not do a good job of explaining the most common STIs (gonorrhea, and chlamydia) can live on parts of the body not covered by a condom, therefore one is at great risk of contracting an STI even when using a condom. There is no mention of the dangers associated with anal sex; incontinence, anal tears, fissures. The fact condoms are not created for anal sex and commonly break, is replaced with the lie that using a condom assures students' safety.

Remember, Kinsey's ideas: children are sexual from birth and good health includes sexual activity? Who would have thought grade school children as young as 5 years of age would be introduced to sexual touching. CSE instructs Kindergarten children the medical lie that "sex " is not biology but now called gender, is determined by a strong feeling. In fact students are welcome to come to school the next day dressed as another gender, because biological sex is assigned by a doctor, not determined by a person's chromosomes.

Parents are concerned with the blatant desire of school staff to step into their role, turning children against parents by keeping life changing health decision making from them. CSE curriculums without exception encourage students' right to privacy and autonomy, excluding their parents. The overriding theme promotes independent decision making regarding sexual activity, birth control, abortion, and all health related services. Washington state law provides minors the right to access without parental knowledge or consent. Parents "finding out" their child is sexually active is often cited as a barrier to students using condoms. Child Protective Services is suggested as an example, when middle school students are asked to list helpful healthcare resources. "Parents" are not included among recommendations.

Statistics show when students abstain from, or delay sexual activity, not only is pregnancy, or contracting STIs avoided, but they are confident, less likely to suffer from depression, excel academically, and have a positive outlook for the future.

Parents want their children to understand their developing bodies, fetal development, pregnancy prevention, and HIV and STIs prevention. They want their child to avoid or delay sexual activity. They want them to know the facts about birth control, and the risks, both physical and emotional, related to sexual activity, insuring a happier, healthier outcome for their future as an adult, a spouse, and a parent. CSE does not provide that perspective.