

CSE Harmful Elements Analysis Tool

The CSE Harmful Elements Analysis Tool¹ was created to help parents, school administrators, educators, and other concerned citizens assess, evaluate, and expose harmful elements within comprehensive sexuality education (CSE)² curricula and materials. For more information, visit www.stopcse.org.

Analysis of **High School FLASH** 3rd Edition Based on 15 Harmful Elements Commonly Included in CSE Materials

CSE HARMFUL ELEMENTS SCORE = [15 OUT OF 15]

High School FLASH, 3rd Edition contains [15 out of 15] of the harmful elements typically found in CSE curricula or materials. The presence of **even one of these elements indicates that the analyzed materials are inappropriate for children**. Having several of these elements should disqualify such materials for use with children.

Program Description: High School FLASH is a sexuality curriculum designed for high school youth ages 14-18. This curriculum teaches youth where they can go to find protection or have an abortion and frequently refers students to Planned Parenthood resources. It normalizes anal and oral sex and gives detailed instruction on consenting to sexual acts. *FLASH* includes same-gender role play scenarios and heavily emphasizes transgender ideology, going so far as to avoid using the word ‘woman’ and to instead use the term ‘person with a uterus and ovaries’. This curriculum is being used in California, Illinois, Texas and Washington.

Target Age Group: Grades 9-12

Planned Parenthood Connections: The advisory board of these standards includes members from **Planned Parenthood Federation of America, SIECUS, Advocates for Youth, and GLSEN**. This curriculum recommends **Planned Parenthood** as a resource for professional development for teachers.

HARMFUL CSE ELEMENTS	EXCERPTED QUOTES FROM CSE MATERIAL
<p>1. SEXUALIZES CHILDREN</p> <p><i>Normalizes child sex or desensitizes children to sexual things. May give examples of children having sex or imply many of their peers are sexually active. May glamorize sex, use</i></p>	<p>“Relatively universal values include things such as: Elementary school-aged children should not have sex.” (p. 17)</p> <p>Note: <i>This makes it seem like it might be ok for children past elementary age to have sex.</i></p> <p>“Many teens successfully use birth control and condoms” (Lesson 1, p. 4)</p> <p>“The other night while they were texting things got heated and they sent some</p>

¹ The CSE Harmful Elements Analysis Tool was created by Family Watch International. Family Watch is not responsible for the way in which the tool is used by individuals who do independent analyses of CSE materials. Visit www.stopcse.org for a blank template or to see analyses of various CSE materials.

² CSE programs are often labeled as comprehensive sex education, sexual education, sexuality education, anti-bullying programs, sexual and reproductive health education, Welcoming Schools programs, and even family life, life skills or abstinence plus education programs, etc. Regardless of the label, if program materials contain one or more of the 15 harmful elements identified in this analysis tools, such materials should be categorized as CSE and should be removed from use in schools.

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

very sexy messages to each other. Joey asked for a picture, and **Jaz sent a picture of herself without a shirt on.**" (Lesson 8 – Online Safety)

"So far Jenna and her boyfriend Trevor have only met online and their communication includes **sexting and sending sexy photos.**" (Lesson 8 – Online Safety)

"They are planning on meeting on Friday for dinner and then **staying over at a motel.**" (Lesson 8 – Online Safety)

"Let's imagine that each person in class represents a couple who has **had vaginal sex several times a month** over the course of a year." (Lesson 10, p. 9)

"What do you think is the best method of birth control for a couple that doesn't want to get pregnant or get an STD and **is having vaginal sex?**" (Lesson 10, p. 10)

"For people who **are having vaginal or anal sex**, the best way to avoid getting or giving an STD is to use a condom every time." (Lesson 11, p. 6)

"I want to start by letting you know that **many teens successfully use condoms.** In fact, teens use condoms more often than adults!" (Lesson 11, p. 8)

"Write a story or skit about a couple who have been dating for a few months and are talking about **taking their relationship to the next level by having oral, anal or vaginal sex.**" (Lesson 11 – Preventing HIV and Other STDs)

"Approximately **half of all teens are sexually active**, making high school an important time to both support abstinence and to teach students condom skills." (Lesson 12, p. 4)

"Remind students that **most teens successfully use condoms**, and that they are easy to get and to use." (Lesson 12, p. 12)

"Lena is 17 years old. **The person Lena used to have sex with** told her she needs to get tested for chlamydia." (Lesson 13 – Testing for HIV and Other STDs)

2. TEACHES CHILDREN TO CONSENT TO SEX

May teach children how to negotiate sexual encounters or how to ask for or get "consent" from other children to engage in sexual acts with them.

Note: "Consent" is often taught under the banner of sexual abuse prevention. While this may be appropriate for adults, children of minor age should never be encouraged to

Note: *While people who engage in sex should always get consent beforehand, children of school age should be discouraged from engaging in sex at all, not encouraged to get consent for sex.*

"FLASH lessons prepare students to... **confirm consent** before engaging in sexual activity" (p. 10)

"Key Concept: Everyone has a right **to say who touches their body and how.**" (Lesson 5, p. 2)

"Key Concept: **Permission or agreement is required** to engage in all sexual activity." (Lesson 5, p. 2)

"**What is consent?** Permission or agreement to engage in sexual activity. Why should people **always make sure they have consent** before sexual activity? Using force or coercion to make someone have any type of sex, or having any type of sex with someone without that person's consent, is sexual assault."

<p><i>“consent” to sex.</i></p>	<p>(Lesson 7, p. 9)</p> <p>“There is consent for the kiss. There is no consent to do anything further at this point, therefore Tyra should ask. She could say, “Do you want to go further?” or “What do you want to do next?” or “Can I take your shirt off?”” (Lesson 7, p. 11)</p> <p>“Prompt: List 1 or 2 things someone can do to ensure there is consent for a kiss.” (Lesson 7, p. 12)</p> <p>Bottom Line Statements: “It’s important to have permission or agreement before having sex with someone.” (Lesson 14 – Communication and Decision Making)</p> <p>“It’s important to only have sex with people who are sober and awake, so they can give consent to have sex.” (Lesson 14 – Communication and Decision Making)</p>
<p>3. PROMOTES ANAL AND ORAL SEX</p> <p><i>Normalizes these high-risk sexual behaviors and may omit vital medical facts, such as the extremely high STI infection rates (i.e., HIV and HPV) and the oral and anal cancer rates of these high-risk sex acts.</i></p>	<p>“Sexual behavior describes what someone does sexually – oral, anal or vaginal sex, making out, etc.” (Lesson 4, p. 7)</p> <p>“Abstaining from oral, anal and vaginal sex means a person does not have to worry about pregnancy or STDs.” (Lesson 9, p. 2)</p> <p>“There is very little risk of getting or transmitting HIV from oral sex.” (Lesson 11, p. 4)</p> <p>“Benefits of Using Condoms: Variety – colors, flavors, sizes” (Lesson 12, p. 8)</p> <p>“Once the condom is on, the couple has vaginal or anal sex.” (Lesson 12, p. 10)</p> <p>The vagina condom “can also be used during anal sex with the inner ring removed.” (Lesson 12, pp. 11-12)</p> <p>“Both partners need to be responsible for birth control and STD protection if they are having vaginal or anal sex.” (Lesson 14, p. 2)</p>
<p>4. PROMOTES HOMOSEXUAL/BISEXUAL BEHAVIOR</p> <p><i>Normalizes or promotes acceptance or exploration of diverse sexual orientations, sometimes in violation of state education laws. May omit vital health information and/or may provide medically inaccurate information about homosexuality or homosexual sex.</i></p>	<p>“Students will be much more able to personalize health information and acquire new skills if they feel seen and respected for their genders and gender identities, races and ethnicities, abilities and disabilities, sexual orientations, and varying body types.” (p. 11)</p> <p>“Key Concepts: A person knows their sexual orientation because of who they feel attracted to, not because of who they have sex with.” (Lesson 4, p. 2)</p> <p>“Sometimes sexual behavior matches a person’s sexual orientation, and sometimes it does not. For example, a person who identifies as straight might have had sex or made out with someone of the same gender.” (Lesson 4, p. 7)</p> <p>“In our society, how are people given the message that being straight is the ‘right’ or ‘normal’ way to be? How can these messages harm or limit people? Then lead a class discussion about the ways society places expectations on people to be heterosexual and gender conforming.” (Lesson 4, p. 8)</p> <p>Scenario set-up: “On Saturday night, Aleesha had sex with her girlfriend even</p>

	<p>though she wasn't in the mood because she didn't want to hurt her girlfriend's feelings." (Lesson 5 – Undoing Gender Stereotypes)</p> <p>Scenario set-up: "Tony and Andre have also been dating for about 6 months." (Lesson 6 – Healthy Relationships)</p> <p>"Tyra gave a hug. Monica gave a quick kiss, Tyra asked if they could kiss again, Monica laughed and they kissed again." (Lesson 7, p. 11)</p> <p>Refusal Skills Scenario E: "Grace has been with her girlfriend, Brooklyn, for 3 months and is in love." (Lesson 9 – Abstinence)</p> <p>"Jorge and Luis want to stay abstinent, but things have been getting heated." (Lesson 14 – Communication and Decision Making)</p>
<p>5. PROMOTES SEXUAL PLEASURE</p> <p><i>Teaches children they are entitled to or have a "right" to sexual pleasure or encourages children to seek out sexual pleasure. Fails to present data on the multiple negative potential outcomes for sexually active children.</i></p>	<p>"For most women, arousal often includes the clitoris becoming erect, the vagina getting wetter, and the labia swelling." (Lesson 2, p. 10)</p> <p>"For most men, arousal often includes the penis becoming erect, the scrotum moving closer to the body, and a small amount of fluid being released from the penis." (Lesson 2, p. 10)</p> <p>"For all, arousal often includes heartbeat and breathing getting faster, nipples getting erect, and skin becoming more sensitive." (Lesson 2, p. 10)</p> <p>"An orgasm is the release of sexual tension that results in muscle contractions in the pelvic area and a physical feeling of sexual pleasure." (Lesson 2, p. 10)</p> <p>Solution to not liking how condoms feel: "Try to focus on the pleasurable sensation of having sex with a condom." (Lesson 12, p. 8)</p>
<p>6. PROMOTES SOLO AND/OR MUTUAL MASTURBATION</p> <p><i>While masturbation can be part of normal child development, encourages masturbation at young ages, which may make children more vulnerable to pornography use, sexual addictions or sexual exploitation. May instruct children on how to masturbate. May also encourage children to engage in mutual masturbation.</i></p>	<p>"Arousal can result from ... sexual activity with another person or during masturbation." (Lesson 2, p. 10)</p> <p>"Orgasm is a physical response that sometimes happens during sexual activity with another person or during masturbation." (Lesson 2, p. 10)</p> <p>Solution to the problem of not having a condom with you: "Engage in a different sexual activity that doesn't require a condom (i.e. manual stimulation)."</p> (Lesson 12, p. 8)
<p>7. PROMOTES CONDOM USE IN</p>	<p>"A penis model is ideal for demonstrating condoms, if you can obtain one." (Lesson 11, p. 8)</p>

INAPPROPRIATE WAYS

May inappropriately eroticize condom use (e.g., emphasizing sexual pleasure or "fun" with condoms) or use sexually explicit methods (i.e., penis and vagina models, seductive role plays, etc.) to promote condom use to children. May provide medically inaccurate information on condom effectiveness and omit or deemphasize failure rates. May imply that condoms will provide complete protection against pregnancy or STIs.

"Steps in **Condom Demonstration**:

- First, the person looks at the package to check the expiration date and make sure there aren't any holes.
- Then they carefully open the package.
- Before having sex, the condom is placed on the tip of the erect penis. It should look like a little hat, with the rolled side facing out.
- Then the person pinches the tip of the condom and unrolls the rest of the condom all the way down to the base of the penis. Pinching the tip makes a space to catch the semen when the ejaculation happens.
- Once the condom is on, the couple has sex.
- After sex, before the penis gets soft, the condom is held in place while the penis is pulled out.
- The condom is taken off and thrown away. Condoms can only be used once." (Lesson 11, pp. 8-9)

"Tomorrow we will review the steps for using a condom and **everyone will have a chance to practice.**" (Lesson 11, p. 9)

"Give each student a condom and **have the students...practice putting the condom on a penis model or their own fingers.**" (Lesson 12, p. 11)

"Show the class a condom that is worn in the vagina or anus and **demonstrate how a person would insert it**, by squeezing the inner ring and inserting it in a tube formed by your other hand." (Lesson 12, p. 11)

Visual 3: Vagina Condom Script: "The most important step for using this condom is to make sure the penis goes into the condom, instead of to the side of it (**demonstrate with your fingers**)." (Lesson 12, p. 12)

8. PROMOTES PREMATURE SEXUAL AUTONOMY

Teaches children they can choose to have sex when they feel they are ready or when they find a trusted partner. Fails to provide data about the well-documented negative consequences of early sexual debut. Fails to encourage sexually active children to return to abstinence.

"**Be sure that in Grace's responses to Stacia, she does not put Stacia down or call her any names for having made the decision to have sex.**" (Lesson 9 – Abstinence)

Condom Fact Sheet: "There is **no age requirement** to buy condoms." (Lesson 10 – Birth Control Methods)

Emergency Contraception Fact Sheet: "All brands of EC, except Ella, can be bought by men or women **of any age** at the drug store **without a doctor's prescription.**" (Lesson 10 – Birth Control Methods)

"Condoms are **easy to get** at the health clinic or at many stores, and they are very **easy to use.**" (Lesson 11, p. 8)

"Let partner know that you always use condoms **every time you have sex**, no matter what." (Lesson 12, p. 8)

"Explain that students will be researching local clinics that offer **testing for HIV**

	<p>and other STDs and then will share their findings.” (Lesson 13, p. 7)</p> <p>Where to Get Tested Worksheet: “Write driving directions from the high school to the clinic. Is there a bus or train a person could take from school to the clinic?” (Lesson 13 – Testing for HIV and Other STDs)</p>
<p>9. FAILS TO ESTABLISH ABSTINENCE AS THE EXPECTED STANDARD</p> <p><i>Fails to establish abstinence (or a return to abstinence) as the expected standard for all school age children. May mention abstinence only in passing.</i></p> <p><i>May teach children that all sexual activity—other than “unprotected” vaginal and oral sex—is acceptable, and even healthy. May present abstinence and “protected” sex as equally good options for children.</i></p>	<p>“Teens of every sexual orientation and gender identity need to learn about birth control and STD prevention, for themselves or to help a friend.” (Lesson 1, p. 2)</p> <p>Emergency Contraception Fact Sheet: “The only way to prevent pregnancy after unprotected vaginal sex! Good to have on hand, just in case.” (Lesson 10 – Birth Control Methods)</p> <p>“People can prevent getting HIV and other STDs by not having vaginal or anal sex and by not sharing needles. They can also prevent HIV and other STDs by using a condom if they do have vaginal or anal sex.” (Lesson 12, p. 7)</p> <p>“Friends can reassure them that carrying condoms is an important way to take care of your health and your partner.” (Lesson 12, p. 8)</p> <p>Solution to the barrier of condoms being too expensive: “List locations where teens can get condoms for free; Buy condoms at drugstores instead of convenience stores” (Lesson 12, p. 8)</p> <p>Lesson 12 Assessment: “Name one benefit and one drawback to using condoms, and one benefit and one drawback to choosing abstinence.” (Lesson 12 – Condoms)</p> <p>Lesson 12 Assessment: “Explain why it is better to use condoms every time a couple has vaginal or anal sex, instead of just some of the time.” (Lesson 12 – Condoms)</p> <p>Lesson 12 Assessment: “Thinking of our class discussion about condoms, name one reason why someone might not use a condom, and list at least one solution to that problem.” (Lesson 12 – Condoms)</p> <p>“Write a 5-paragraph persuasive essay about why a person should use condoms.” (Lesson 12 – Condoms)</p> <p>“Throughout all the lessons we’ve learned important facts that can help people make healthy decisions – things such as how safe birth control is, and the importance of using condoms when people have vaginal or anal sex.” (Lesson</p>

	<p>14, p. 6)</p> <p>“Jocelyn wants to get an IUD. Her boyfriend Chris doesn’t know much about birth control, and thinks they should just keep using condoms.” (Lesson 14 – Communication and Decision Making)</p> <p>Deon thinks he and his new girlfriend Mariah should go to the clinic and get STD tests before they start having sex.” (Lesson 14 – Communication and Decision Making)</p> <p>“Teens are good at protecting themselves from pregnancy. Over 90% of teen couples used birth control the last time they had vaginal sex.” (Lesson 15, p. 6)</p>
<p>10. PROMOTES TRANSGENDER IDEOLOGY</p> <p><i>Promotes affirmation of and/or exploration of diverse gender identities. May teach children they can change their gender or identify as multiple genders, or may present other unscientific and medically inaccurate theories. Fails to teach that most gender-confused children resolve their confusion by adulthood and that extreme gender confusion is a mental health disorder (gender dysphoria) that can be helped with mental health intervention.</i></p>	<p>“Students will be much more able to personalize health information and acquire new skills if they feel seen and respected for their genders and gender identities, races and ethnicities, abilities and disabilities, sexual orientations, and varying body types.” (p. 11)</p> <p>“Teaching sexual health education in co-ed classrooms has many advantages.... It does not place an undue burden on gender variant and transgender children to choose a classroom to affiliate themselves with.” (p. 11)</p> <p>Students are shown Visual 1 which has three drawings of a penis and scrotum. The teacher is instructed to say, “This is a picture of the reproductive organs that are outside of someone’s body. These parts are usually on a man’s body.” (Lesson 2, p. 5) This is repeated with the worksheet on internal reproductive organs.</p> <p>Students are shown Visual 2 which has drawings of external female reproductive organs. The teacher is instructed to say, “This is a picture of the reproductive organs that are outside of someone’s body. These parts are usually on a woman’s body.” (Lesson 2, p. 6) This is repeated with the worksheet on internal reproductive organs.</p> <p>“When an egg joins a sperm with a Y chromosome, the newly formed cell usually has XY chromosomes and will have a male assigned sex.” (Lesson 3, p. 5)</p> <p>“When an egg joins a sperm with an X chromosome, the newly formed cell usually has XX chromosomes and will have a female assigned sex.” (Lesson 3, p. 5)</p> <p>“Lesson 4 Learning Objectives:</p> <ul style="list-style-type: none"> • Differentiate between assigned sex, sexual orientation and gender identity. • Summarize ways that society places expectations on people to be heterosexual, cisgender, and to conform to gender norms.” (Lesson 4, p. 1) <p>“Key Concepts: A person knows their gender identity because they feel like a boy, a girl, both, neither or somewhere in between, not because of their body</p>

	<p>parts.” (Lesson 4, p. 2)</p> <p>“When a baby is born, the doctor usually says the baby is male or female, depending on the appearance of the baby’s genitals. This is the baby’s assigned sex.” (Lesson 4, p. 6)</p> <p>“When a person’s gender identity is the same as their assigned sex, it is usually called cisgender.” (Lesson 4, p. 7)</p> <p>“When a person’s gender identity is not the same as their assigned sex, it is often called transgender. People may also identify as gender queer, gender fluid or some other gender identity.” (Lesson 4, p. 7)</p> <p>“Sexual orientation describes who a person is attracted to – the same gender, another gender, or all genders.” (Lesson 4, p. 7)</p> <p>Refusal Skills Scenario C: “Amara is trans, and recently started attending the GSA at school, where she met Son.” (Lesson 9 – Abstinence)</p> <p>“This lesson purposefully avoids labeling condoms as ‘male condoms’ or ‘female condoms,’ in order to be more inclusive of transgender and intersex individuals.” (Lesson 12, p. 4)</p>
<p>11. PROMOTES CONTRACEPTION/ABORTION TO CHILDREN</p> <p><i>Presents abortion as a safe or positive option while omitting data on the many potential negative physical and mental health consequences. May teach children they have a right to abortion and refer them to abortion providers.</i></p> <p><i>May encourage the use of contraceptives, while failing to present failure rates or side effects.</i></p>	<p>“FLASH promotes positive attitudes and positive peer norms about birth control, condoms and abstinence.” (p. 12)</p> <p>“Best practice in middle and high school is to show and handle the actual birth control methods, including condoms, in order to model your comfort with them.” (p. 12)</p> <p>“FLASH Key Concepts: Many teens successfully use birth control and condoms.” (Lesson 1, p. 2)</p> <p>“FLASH Key Concepts: Condoms are easy to get and easy to use.” (Lesson 1, p. 2)</p> <p>“Birth control and condoms are excellent at preventing pregnancy” (Lesson 1, p. 4)</p> <p>“Some clinics advertise as full-service pregnancy centers, even though they are staffed by lay people rather than licensed medical providers. Their purpose is often to dissuade clients from using birth control or accessing abortion services.” (Lesson 3, p. 3)</p> <p>“How can people know they are getting a pregnancy test at a reliable clinic? Staff will provide information about places that will help them if they choose to become a parent, have an abortion....” (Lesson 3, p. 6)</p> <p>“The first trimester is also when most abortions take place. Abortion is ending a pregnancy with the help of a doctor. It is the most common medical procedure</p>

	<p>in the United States.” (Lesson 3, p. 6)</p> <p>“FLASH Key Concepts: Birth control is very safe.” (Lesson 10, p. 2)</p> <p>“IUDs are now known to be safe and appropriate birth control for teens.” (Lesson 10, p. 4)</p> <p>Teachers are encouraged to have samples of contraceptive methods including birth control pills, Depo shot, emergency contraception, implant, penis condom, hormonal or copper IUD, patch, vaginal ring, diaphragm, vagina condom, Cycle Beads and spermicide (gel, foam, film, sponge). (Lesson 10, p. 6)</p> <p>Birth Control Pill Fact Sheet: “Good for your health – for example, it helps prevent cancer of the ovaries and uterus, it makes bones stronger, and it helps acne.” (Lesson 10 – Birth Control Methods)</p> <p>Withdrawal Fact Sheet: “Free and always available; More effective than most people think, when used correctly” (Lesson 10 – Birth Control Methods)</p> <p>Homework Assignment: “Obtain a condom and bring it to class to show that you obtained it.” (Lesson 12 – Condoms)</p>
<p>12. PROMOTES PEER-TO-PEER SEX ED OR SEXUAL RIGHTS ADVOCACY</p> <p><i>May train children to teach other children about sex or sexual pleasure, through peer-to-peer initiatives. May recruit children as spokespeople to advocate for highly controversial sexual rights (including a right to CSE itself) or to promote abortion.</i></p>	<p>Students work in small groups doing role-play scenarios where they practice refusal skills with each other. (Lesson 9, p. 8)</p> <p>“In this lesson, students develop commercials to emphasize the positive aspects of birth control using medically accurate information.” (Lesson 10, p. 4)</p> <p>“Thank the class for their creativity in teaching each other about birth control...” (Lesson 10, p. 11)</p> <p>“Write an imaginary text message or email, encouraging a friend, brother or sister to use condoms.” (Lesson 12 – Condoms)</p> <p>Lesson 13 Student Learning Objective: “The student will be able to...advocate for sexually active youth to get testing and treatment for STDs including HIV.” (Lesson 13, p. 1)</p> <p>Homework assignment: “Write an ad encouraging people to get tested for HIV.” (Lesson 13 – Testing for HIV and Other STDs)</p> <p>“This final lesson asks students to create a social norms campaign in order to impact the larger school environment.” (Lesson 15, p. 1)</p> <p>“The posters are placed in public locations in the school, influencing all students in the school to shift their beliefs toward the new norm.” (Lesson 15, p. 3)</p> <p>“By making sure that everyone in this school knows the truth, we can help support everyone to make the decisions they really want to make.” (Lesson 15, p. 6)</p>

<p>13. UNDERMINES TRADITIONAL VALUES AND BELIEFS</p> <p><i>May encourage children to question their parents' beliefs or their cultural or religious values regarding sex, sexual orientation or gender identity.</i></p>	<p>"FLASH includes a variety of strategies designed to create positive attitudes, beliefs and norms" (p.10)</p> <p>"Key Concepts: Rigid ideas about how men and women should act are harmful and limit how people can express themselves." (Lesson 5, p. 2)</p> <p>"Point out that other people's judgments...put a lot of pressure on both guys and girls to stay in their gender boxes and act the way society thinks they should." (Lesson 5, p. 10)</p> <p>Note: <i>While gender stereotypes that promote inferior roles for women are harmful, these kind of concepts in CSE programs often are interpreted to promote transgenderism.</i></p>
<p>14. UNDERMINES PARENTS OR PARENTAL RIGHTS</p> <p><i>May <u>instruct children they have rights to confidentiality and privacy from their parents.</u> <u>May teach children about accessing sexual commodities or services, including abortion, without parental consent.</u> May instruct children not to tell their parents what they are being taught about sex in school.</i></p>	<p>"Call your local family planning clinic to acquire brochures and learn if pregnancy testing is confidential for minors in your state." (Lesson 3, p. 3)</p> <p>"Confidential services include birth control, condoms, emergency contraception, pregnancy tests, STD and HIV tests, prenatal care, abortion and adoption." (Lesson 3 – Pregnancy)</p> <p>"Give information about where teens can get birth control in your community, including whether it is confidential and free." (Lesson 10, p. 8)</p> <p>Where to Get Tested worksheet: "Is the appointment confidential? For example, does a teen need a parent's permission to get tested?" (Lesson 13 – Testing for HIV and Other STDs)</p>
<p>15. REFERS CHILDREN TO HARMFUL RESOURCES</p> <p><i>Refers children to harmful websites, materials or outside entities. May also specifically refer children to Planned Parenthood or their affiliates or partners for their lucrative services or commodities (i.e., sexual counseling, condoms, contraceptives, gender hormones, STI testing and treatment, abortions, etc.)</i></p> <p><i>Please Note: A conflict of interest exists whenever an entity that profits from sexualizing children is involved in</i></p>	<p>"When sharing clinic resources with students, only include clinics that can answer 'yes' to the following questions:</p> <ul style="list-style-type: none"> • Does the clinic offer clinical services with a licensed health care provider? • Does the clinic provide or refer for all FDA-approved contraceptive methods? • Does the clinic provide or refer for prenatal care, adoption and abortion?" (Lesson 3, p. 3) <p>Planned Parenthood is listed on the Sexual Health Resources handout. (Lesson 3 – Pregnancy)</p> <p>Links are provided on a handout for students to find an abortion clinic in their local area. (Lesson 3 – Pregnancy)</p> <p>Students are referred to a website, sexetc.org/state, to find information on minors' reproductive rights. (Lesson 3 – Pregnancy)</p>

creating or implementing sex education programs.

(For more information on how Planned Parenthood sexualizes children for profit see www.WaronChildren.org and www.InvestigatePPF.org)

For more information on *High School FLASH*, see <https://www.etr.org/flash/flash-curriculum/>.