

Sexuality Education is every parent's responsibility

Sexuality Education in Life Orientation:
Scripted Lesson Plans:
Grade 4 - 12 Learner books

Department Basic Education
REPUBLIC OF SOUTH AFRICA

HOW DO YOU KNOW IF
A SEXUALITY EDUCATION PROGRAM IS
HARMFUL FOR CHILDREN?

The CSE Harmful Analysis tool was created to help parents, school administrators and other concerned citizens to assess, evaluate and expose harmful elements in a program. This document states: "It is important to note that the presence of even <u>one</u> of these elements in the analyzed material is **inappropriate** for children. Having **several** of these elements should **disqualify** such materials for use with children".

(Source: Adapted from the "The CSE Harmful Analysis tool": Family Watch International)

(Refer to the end of this document for the detailed document: Family Watch International)

# **Does the program:**

#### 1. Sexualize children in any way?

Normalizes or sexualizes children to sexual things. May give examples of children having sex or imply many peers are sexually active. May glamorize sex, use graphic materials, scenarios, teach explicit sexual vocabulary, or encourage discussion of sexual experiences, attractions, fantasies or desires

### 2. Utilize age and phase inappropriate content and methodologies?

Premature sexual autonomy, the right to sexual pleasure without potential negative outcomes; high risk behaviours normalized without emphasizing all the medical facts; solo or mutual masturbation......; contraception without highlighting disadvantages; condoms taught inappropriately; abstinence not taught as the expected standard; May present abstinence and "protected" sex as equally good options for children. Teach reproduction matters inappropriately; Peer to peer sex education utilized inappropriately; sexual consent negotiations taught; sexual rights advocated; harmful resources referrals

#### 3. Contribute to gender confusion?

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

#### 4. Promote children's rights at the expense of 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

## 5. Undermine cultural, family, core common- sense values?

May encourage children to question their parents' beliefs or their cultural or religious values regarding sex, sexual orientation or gender identity

1	CATEGORY/THEME: TEACHING REPRODUCTION MATTERS	GRADE	LESSON	PAGE
	"In small groups build a puzzle, label the different parts of the body, report back" "On the worksheet color in private parts, share with the class what you have colored in as private parts on your drawing. Explain to the class why you have done so"	4	4.1	9,10,11
	"In small groups look at the text and circle the change that you see on the diagrams that matches the text (breasts develop, genital organs enlarge, hair on genitals)"	6	6.1.1	6,7,8
	"Quiz: Body changes during puberty i.e. rebelling against your parents and wanting to be independent; sperm production and ejaculation, girls release white or clear discharge from the vagina". "True or false - you will grow hair on the palm of your hand if you masturbate"	6	6.1.2	9
	Changes during puberty: Groups of 6 learners: "Each group learning your selection of information about puberty and then teaching it to the other members of the group". "Draw the changes on the worksheet the human figure before puberty that you labelled 'Boy or Girl'. For example, girls develop breasts and hips. Compare all the figures done by each of the groups"	7	A2	28-31
	Circles of sexuality: "Sensuality: How our bodies give and receive pleasure (touch, sight, smell, taste, sound). We need to be touched and this includes the ability to fantasize"	8	8.4.1	35
	Sexual interest- get the facts true or false: "If a boy gets an erection, it means he wants to have sex. If a girl's vagina lubricates, it means she wants to have sex; everyone's level of sexual interest can change over time; If a man does not get an erection in a sexual situation, he does not desire the person he is with"	10	10.6.1	81

2	CATEGORY/THEME: CORE REPETITIVE MESSAGES (FROM GRADE 7 - 12)	GRADE	LESSON	PAGE
	Abstain from sex	7	7.83	65
	If sexually active, I will use condoms AND contraception EVERY TIME I have sex	7	7.8.3	65
	If I am having sex, I will get tested for HIV and other STI's regularly	7	7.8.3	65
	I will take AT LEAST a 3 month break between sex partners, if I choose to have sex	7	7.8.3	65
	Create a list of 'must-haves' and 'deal breakers' and use that list to evaluate potential romances	7	7.8.3	65
	STAY FAITHFUL to one partner at a time, to protect yourself, your partner and your community from STI's	7	7.8.3	65
	I will keep my sperm/eggs apart from other people's eggs/sperm	9	9.11.2	96
	"How I choose to be a man or a woman. The type of lover or romantic partner I want to be is"	8	8.2.3	25
	Choosing not to have sex is the safest way to avoid exposure to STI's and HIV acquisition	8	8.5	39
	"If a young adult decides to have sex, what things should/he discuss with her/his partner before having sex?"	8	8.5	42
	What's the risk: 1-15 scenarios: touching your partner's genitalia; anal sex between two people where penis enters anus 5. "Oral sex (mouth to genitalia); 6. Masturbation". Having sex when your partner has HIV and you are negative, but taking PREP	11	11.5.2	57

3	CATEGORY/THEME: CONDOMS/CONTRACEPTION	GRADE	LESSON	PAGE
	Your educator or a professional nurse from the local clinic or other health service provider will demonstrate, on available models, each of the 11 steps listed on your handout about male condoms	9	9.3	33
	The skill of using a condom is something you need to know BEFORE having sex but you should still abstain from sex until you have achieved your other goals and are truly READY	9	9.3	33
	11 step male condoms inter alia "Step 3: Get a condom (in fact, get more than one) Step 4: Store condoms in a protected place where you can easily grab one. Step 9: Have sex (Be caring. Be safe) Step 10: Withdraw penis immediately after ejaculation"	9	9.3.1	34,35
	Female condom: 7 steps, inter alia "Step 5 Place the index finger on the inside of the condom and push the inner sponge as far as it will go" "Step 6: the female condom is now in place and ready for use with your partner"	9	9.3.2	36
	Female condoms advantages over male condoms: "female initiated"; "not requiring the male partner's erection to keep the condom in place"; "not reducing the male partner's sexual stimulation"	9	9.3.2	37
	"Classroom activity: In groups brainstorm stories you have heard about condoms and condom use and write them down even if you are not sure if they are true or not. Share the stories you have heard with the other groups in the class"	9	9.3.2	38
	Test your knowledge: 1-10 inter alia: "Describe how to use a male condom correctly. Can you list all 11 steps?"	9	9.3.2	38
	Barriers to condom use: "The safest choice is to NOT have sex. If you choose to have sex USE A CONDOM EVERY TIME. Condoms are the ONLY contraceptive method that also prevents STI's and/or HIV transmission. Condoms used correctly and consistently can be very effective at preventing HIV, many other STI's and teenage pregnancy"	9	9.4	41
	"In groups develop catchy slogans that communicate both your suggested way of overcoming a barrier to condom use of your choice, and the benefit that comes with using condoms. The catchiest slogan that you would want to put up on the wall. Share your slogan with your family or those who share your home with you. They may want to also design a slogan. In this case you can set up your competition"	9	9.4	42
	My changing life roles and life goals: An 11-step learner guide to using male condoms correctly	10	10.5.1	65
	9 steps to use a female condom (refer grade 9 above)	10	10.5.1	67,68
	Detailed Information on contraception	10	10.5.1	60

4	CATEGORY/THEME: GENDER	GRADE	LESSON	PAGE
	"Andrea prefers playing with boys. She sometimes feels like a boy, the girls laugh at her and call her names 'Hey, Andrew! You walk like a boy"	4	4.5.1	49
	"Stereotype: Two girls or two boys should not hold hands or kiss. Message: Dealing with expectations that a couple can only be of opposite sexes. How do you feel about this?"	6	6.2.1	20
	"Key points: the meaning of 'gender' is not the same as the meaning of the 'sex' of a person"	6	6.8	63
	Key points: "ULTIMATELY, YOU get to decide what it means to be a woman or man"	7	7.3	22
	Key points: "Ultimately, YOU get to decide how you want to act as a man or woman"	8	8.2A	18
	Definitions: "Sex, Gender, Sexual orientation: We can be heterosexual, homosexual or bisexual"	8	8.2.1	20
	Key points: "I get to decode what being a man or a woman means to me"	8	8.2B	23
	Circles of sexuality: Sexual identity: 3 elements: Biological sex: male or female; Gender identity: how we feel about being male/female; Gender roles: what society says it is to be male/female	8	8.4.1	35
	Gender stereotypes and power: some terms and definitions. Match the terms to the columns: "We are bom either male or female or intersex (with both male and female organs. This is our biology. Some of us are born Males and identify as girls and vice versa. They are transgender".	10	10.2.3	27
	Scenarios for talk show activity: A listener calls in to say, 'I'm 23 years old	11	11.7.1	75
	And I identify as being a woman. I have a man's body physically. I'm what call transgender to cope with the stress is, I turn to drugs. On some days, I wake up just wanting to be dead	11	11.7.1	75
	When problems occur: example of a personal disaster. Lovemore is in a gay relationship with Mike They dragged Mike out of the house shouting homophobic abuse His father came straight away in torchlight in the veld they found Mike's body	12	12.2.3	27

5	CATEGORY/THEME: CHILDREN'S RIGHTS IN FAVOR OF PARENTAL RIGHTS	GRADE	LESSON	PAGE
	POSTER: SEXUAL RIGHTS AND RESPONSIBILTIES: 1-10 1. It is my right to decide whether, when, and with whom I will be sexual.8. I have the right to express my sexual orientation You can get tested without	8	8.4.1	36
	Martine and Jaco talk about STI'S, HIV and AIDS: Do I need a parent's permission to get tested at a clinic? No, you don't have to get parental permission (consent) to get tested. In fact, its confidential (they won't share the results)	8	8.5.1	44-48
	Our needs and our rights, taking action: develop your own advocacy campaign for example: Campaign for your school to provide sanitary pads, clean, private toilets, and condoms	12	12.1	8-12

6	CATEGORY/THEME: SENARIOS, SITUATIONS, ROLE-PLAYS EXTRACTS	GRADE	LESSON	PAGE
	A group of grade 6's approach John. "They pull down his pants and take turns touching him on his bum and penis. He is terrified of the boys"	4	4.5.1	48
	Sandra's story: "Sandra's (age11) breasts have grown, and her hips are quite curvy" Robert "reached over and put his hand on her leg"" Robert [age18] leaned in and kissed her on her neck, he rubbed his hand up her leg"	5	5.2B.1	36
	Mbali's story: "One day, things got really bad. She was alone with her uncle when he grabbed her and kissed her with an open mouth"	5	5.5.1	60
	The story of Max: "One of the boys was filming a video on his phone. First Bruno touched Max's buttocks. 'Stop!' Max tried to scream but Bruno put his hand over Max's mouth. 'Touch me hereand here!' whispered Bruno and grabbed Max's hand and put it on his private parts"	5	5.6.1	70
	Grade 6 WhatsApp group chat. "One of the boys in the group shared a picture of a topless girl. Now all the boys in the group are talking about it and are really excited. Some of the girls in the group are considering sending a topless picture into the group to get the boys attention"	6	6.4.1	35
	Role-play script: "Nadine & Zubair: This feels so good, I don't know why we did not do this before – Zubair- I want to be your first. Nadine, you're totally hot, but this arguing over the condom, its ruining the mood. I'll get you back in the mood"	8	8.8.1	67
	Martine and Jaco talk about STI's HIV and AIDS: "There are some things you can do to protect yourself from HIV and STI's: Have one partner at a timeget vaccinated against HPV and Hepatitis B. Talk openly and honestly with your sexual partner about prevention. Find out if your partner has had had sex before and if so, go get tested".	8	8.5.1	44-48
	Unscripted role-play "Jana and Jordan- both sixteen years old- have been dating for about four months. They really like each other and they really like kissing, but neither one is really ready to have oral sex or sexual intercourse"	9	8.8.3	88,89
	Social & environmental justice: pic sexual intercourse, two guys kissing, contraception	10	10.4.1	47
	Swimming in the river: Scene 2 You turn to the person next to you. You move closer and then you start to kiss. The kiss is warm and your body is reacting with excitement	10	10.7.1	88
	Handling situations using assertive communication: practicing safe sex; issues about sexuality and sex	10	10.8.2	100
	Definition of rape very graphic. The law says it is rape when someone forces their penis, fingers or object into someone's vagina, anus, or mouth or any part of their body against their will	10	10.9.1	110
	Scenarios for radio talk show activity: uncle comes to his bed every night. He started off by touching me and telling me to touch him. More recently, he forces me to hold his penis and puts his hand over mine until he has ejaculated. He says he will kill me if I ever tell anyone. But it is getting worse. Last night he tried to force his penis into my bum"	11	11.7.1	75
	Example of a person accident: "Lungi and Lindiwe: Before they made love they smeared the condom with lube. But after he ejaculated and withdrew his penis they noticed the condom had broken"	12	12.2.3	75

#### HARMFUL CSE ELEMENTS

**SEXUALIZES CHILDREN:** 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.

**TEACHES CHILDREN TO CONSENT TO SEX:** May teach children how to negotiate sexual encounters or how to ask for or get "consent" from other children to engage in sexual acts with them. Note: "Consent" is often taught under the banner of sexual abuse prevention. While this may be appropriate for adults, children of minor age should never be encouraged to "consent" to sex.

**PROMOTES ANAL AND ORAL SEX:** Normalizes these high-risk sexual behaviors and may omit vital medical facts, such as the extremely high STI infection rates (i.e., HIV and HPV) and the oral and anal cancer rates of these high-risk sex acts.

**PROMOTES HOMOSEXUAL/ BISEXUAL BEHAVIOR:** Normalizes or promotes acceptance or exploration of diverse sexual orientations, sometimes in violation of state education laws. May omit vital health information and/or may provide medically inaccurate information about homosexuality or homosexual sex.

**PROMOTES SEXUAL PLEASURE:** Teaches children they are entitled to or have a "right" to sexual pleasure or encourages children to seek out sexual pleasure. Fails to present data on the multiple negative potential outcomes for sexually active children.

**PROMOTES SOLO AND/OR MUTUAL MASTURBATION:** While masturbation can be part of normal child development, encourages masturbation at young ages, which may make children more vulnerable to pornography use, sexual addictions or sexual exploitation. May instruct children on how to masturbate. May also encourage children to engage in mutual masturbation.

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

**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.

FAILS TO ESTABLISH ABSTINENCE AS THE EXPECTED STANDARD: FAILS to establish abstinence (or a return to abstinence) as the expected standard for all school age children. May mention abstinence only in passing. May teach children that all sexual activity—other than "unprotected" vaginal and oral sex—is acceptable, and even healthy. May present abstinence and "protected" sex as equally good options for children.

**PROMOTES TRANSGENDER IDEOLOGY: PROMOTES** affirmation of and/or exploration of diverse gender identities. May teach children they can change their gender or identify as multiple genders, or may present other unscientific and medically inaccurate theories. Fails to teach that most 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.

**PROMOTES CONTRACEPTION/ABORTION TO CHILDREN:** Presents abortion as a safe or positive option while omitting data on the many potential negative physical and mental health consequences. May teach children they have a right to abortion and refer them to abortion providers. May encourage the use of contraceptives, while failing to present failure rates or side effects.

PROMOTES PEER-TO-PEER SEX ED OR SEXUAL RIGHTS ADVOCACY; May train children to teach other children about sex or sexual pleasure, through peer-to-peer initiatives. May recruit children as spokespeople to advocate for highly controversial sexual rights (including a right to CSE itself) or to promote abortion.

**UNDERMINES TRADITIONAL VALUES AND BELIEFS: MAY** encourage children to question their parents' beliefs or their cultural or religious values regarding sex, sexual orientation or gender identity.

**UNDERMINES PARENTS OR PARENTAL RIGHTS:** May instruct children they have rights to confidentiality and privacy from their parents. May teach children about accessing sexual commodities or services, including abortion, without parental consent. May instruct children not to tell their parents what they are being taught about sex in school.

REFERS CHILDREN TO HARMFUL RESOURCES: REFERS children to harmful websites, materials or outside entities. May also specifically refer children to Planned Parenthood or their affiliates or partners for their lucrative services or commodities (i.e., sexual counseling, condoms, contraceptives, gender hormones, STI testing and treatment, abortions, etc.) Please Note: A conflict of interest exists whenever an entity that profits from sexualizing children is involved in creating or implementing sex education programs. (For more information on how Planned Parenthood sexualizes children for profit see <a href="https://www.WaronChildren.org">www.lnvestigateIPPF.org</a>)