Accompanying Material for Instructional Video: Big Picture Overview of CSE
AB 329 (Brown – 2015)
“Healthy Youth Act”
THE CONTEXT & VISION OF SEX EDUCATION
SexEd is a Vehicle for Social Change

SIECUS (@SIECUS) · Twitter
https://twitter.com/SIECUS

✈️ Sex education is a vehicle for social change. Full stop. What do *YOU* think the world would look like if everyone received comprehensive sexuality education? #RealSexEd siecus.org/sex-ed-is-a-

We need to prioritize educating young people about *all* of these concepts early on. Sex education is a golden opportunity to teach youth about dismantling systems of power & oppression that perpetuate white supremacy, homophobia, transphobia, & more. #QTPOCTownHall

23 hours ago · Twitter

2 days ago · Twitter
SexEd is critical for Abortion

If you care about abortion rights...

Then you should care about SEX EDUCATION.

SIECUS

Planned Parenthood®
Care. No matter what.

Sep-2018
SexEd is about abolishing “heteronormativity”

“It’s about time we kicked heteronormativity to the curb. Never heard of the term before? It’s the idea that binary gender identity and heterosexual orientation (meaning, there are only two sexual orientations and genders) are the norm.” Teen Vogue (Sep. 1, 2016, by Kristen Cochrane)
Comprehensive Sexuality Education
REDEFINING THE TERMS

• Comprehensive vs. Limited
• Sexuality vs. Sex
• Indoctrination vs. Education
WORLD HEALTH ORGANIZATION (2006A): “Sexuality” “...a central aspect of being human throughout life encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction...thoughts, fantasies, desires, beliefs, attitudes, values, behaviours...”
Planned Parenthood

Definition of CSE

- Gender
- Pleasure
- Diversity & Relationships
- HIV
- Violence
- Sexual Rights
SEXUAL RIGHTS

HUMAN RIGHTS

CIVIL RIGHTS

ARTICLE 1-10

• Abortion
• Consent
• SOGI
• CSE
• Etc....
UNESCO – Does CSE work?

“It is difficult to draw strong conclusions about the impact of CSE on biological outcomes such as STI or HIV rates, as there are still relatively few high-quality trials available, particularly those that take a longitudinal approach (Fonner et al., 2014; Lopez et al., 2016; Oringanje et al., 2009).” (Page 28 of 142)
# Core Content and Skills, K–12 Advisory Committee

<table>
<thead>
<tr>
<th>Name</th>
<th>Title and Organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Laurie Bechhofer, MPH</td>
<td>HIV/STD Education Consultant, Michigan Department of Education</td>
</tr>
<tr>
<td>Nora Geperin, MEd</td>
<td>Director of Training, Answer</td>
</tr>
<tr>
<td>Eva Goldfarb, PhD, LHD (hon)</td>
<td>Professor, Montclair State University</td>
</tr>
<tr>
<td>Mal Goldsmith, PhD, MCHES, FASHA, FAAHE</td>
<td>Professor Emeritus, Southern Illinois University</td>
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<tr>
<td>Debra Hauser, MPH</td>
<td>Executive Vice President, Advocates for Youth</td>
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<tr>
<td>Nora L. Howley, MA</td>
<td>Manager of Programs, National Education Association, National Network</td>
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<tr>
<td>Barbara Huber, CAE, MPA</td>
<td>Director of Advocates, Advocates for Youth</td>
</tr>
<tr>
<td>Saia M. Kiko</td>
<td>Director of National Education Initiatives, National Parenthood Federation of America</td>
</tr>
<tr>
<td>Kyle Lafferty, MPH, MST, CHES</td>
<td>HIV Program Director, The Society of State Leaders of Health and Physical Education</td>
</tr>
<tr>
<td>Robert McGarry, EdD</td>
<td>Director of Training and Curriculum Development, Gay, Lesbian and Straight Education Network (GLSEN)</td>
</tr>
<tr>
<td>Linda Moore</td>
<td>Acting Executive Director, American Association for Health Education</td>
</tr>
<tr>
<td>Linda Morse, RN, NJ-CSN, MA, CHES</td>
<td>President Elect, American School Health Association (ASHA)</td>
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<tr>
<td>Buzz Fruitt, EdD</td>
<td>Professor, Texas A&amp;M University</td>
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<tr>
<td>Verga Rodrigues, Director of Information and Education Council of the United States (SIECUS)</td>
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<tr>
<td>Deborah Roffman, MS, CSE</td>
<td>Sexuality Educator and Consultant, The Park School of Baltimore</td>
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<tr>
<td>Elizabeth Schroeder, EdD, MSW</td>
<td>Executive Director, Answer</td>
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<tr>
<td>Jennifer Heitel Yakuah</td>
<td>Director of Public Policy, Sexuality Information and Education Council of the United States (SIECUS)</td>
</tr>
<tr>
<td>Danene Sorace, MPP</td>
<td>Consultant, Future of Sex Education Initiative</td>
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</tbody>
</table>

FoSE is a project of: Advocates for Youth, Answer, and SIECUS, Sexuality Information and Education Council of the United States.
CDC JOINS IN 2016

“CDC acknowledges Dr. Susan Telljohann for her contributions to the steps and examples described in this document.” (Page 2 of 17)

*She was also a reviewer of SIECUS National Sexuality Education Standards*
California Healthy Youth Act
OUTLINE

• Implementation & Promoters
  ➢ The Legislature
  ➢ The Department of Education
  ➢ The Curriculum

• Objectives

• Mandates
Shirley Webber (2015)

- Voted by all Democrats + 1 Repub.

Organizations in Support:
- California Teacher’s Association
- California School Board Association
- California Parent Teacher Association
- Planned Parenthood
- ACLU
- Latinas for Reproductive Justice
- Equality California
• Board of Education (9-member)
  • Health Education Content Standards (2008)
• Instructional Quality Commission (18-member)
  o Health Framework (revised based on AB-329)
  o Started beginning of 2016
  o End at CDE Meeting in May 2019
Health Framework
DID YOU KNOW?

ABSTINENCE IS MENTIONED TWICE IN OVER 700 PAGES.

SEX IS MENTIONED HUNDREDS OF TIMES IN OVER 700 PAGES.

NO WHERE IN THE FRAMEWORK IS THE FOLLOWING INFORMATION PRESENTED TO OUR YOUTH. “According to the U.S. Centers for Disease Control and Prevention (CDC), “The most reliable way to avoid transmission of STDs is to abstain from oral, vaginal, and anal sex or to be in a long-term, mutually monogamous relationship with a partner known to be uninfected.”[1]

“WHEN PROVIDING INSTRUCTION ON SEXUAL AND REPRODUCTIVE ORGANS, TEACHERS CAN INTRODUCE THE CONCEPT THAT GENDER DOES NOT ALWAYS MATCH THE SEXUAL AND REPRODUCTIVE ORGANS DESCRIBED. FOR EXAMPLE, TEACHERS MAY SHARE, “IN THE CLASSROOM, WE MAY USE THE TERM ‘FEMALE REPRODUCTIVE ORGANS’ BUT SOME PEOPLE WHO IDENTIFY AS MALE HAVE THESE ORGANS.”

(CHAPTER 3, PAGE 116 OF 147, LINE 2990-2994)
HEALTH FRAMEWORK – 4th – 6th grade

as puberty can be a difficult time for young transgender students. Educators should acknowledge this and create an environment that is inclusive and challenges binary concepts about gender. Refer to the Gender Socialization Classroom Example found later in this section. For additional resources on how to support transgender and gender non-conforming students in the classroom, visit the GLSEN Web site.
Examples for spiritual abuse include using religion to justify abuse, insisting on rigid gender roles…”

(Chapter 5, Page 41 of 106, Line 1052-1053)
The usage of LGBTQ+ throughout this document is intended to represent an inclusive and ever-changing spectrum and understanding of identities.

(Chapter 6, Page 23 of 119, Line 602-603)
They also research California laws regarding minors’ access to reproductive health care, including the right to excuse themselves from campus to obtain confidential medical services without parental permission or notification and the right to confidentiality in insurance under the Confidential Health Information Act.

(Chapter 6, Page 31 of 119, Line 825-832)
The Curriculum
OUTLINE

• Approval Process
  ➢ ASHWG
  ➢ Districts

• Curricula Providers
  ➢ Sex Focused NGOs
  ➢ Big Publishers
ASHWG – Adolescent Sexual Health Work Group

GOVERNMENT ORGANIZATIONS
- Office of AIDS, California Department of Public Health
- Department of Health Care Services
- Sexually Transmitted Diseases Control Branch, California Department of Public Health
- California Department of Social Services
- HIV Prevention/Sex Education, San Diego Unified School District
- Maternal, Child and Adolescent Health Program, California Department of Public Health
- Bixby Center for Global Reproductive Health
- Maternal, Child and Adolescent Health Programs, County of Los Angeles Public Health
- Immunization Branch, California Department of Public Health
- Department of Education (CDE)

NON-GOVERNMENTAL ORGANIZATIONS (NGOs)
- Center for Research on Adolescent Health and Development
- ETR Associates, Center for Sexual and Reproductive Health Promotion
- Health Initiatives for Youth (HIFY)
- YTH – youth + tech + health
- TeenNOW California
- California Adolescent Health Collaborative
- Cardea Services
- Essential Access Health (formerly California Family Health Council)
- Health Connected
- Children Now

Conflict of Interest!!!
<table>
<thead>
<tr>
<th>MIDDLE SCHOOL</th>
<th>HIGH SCHOOL</th>
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<tbody>
<tr>
<td>Flash</td>
<td>Flash</td>
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<tr>
<td>Teen Talk</td>
<td>Teen Talk</td>
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<tr>
<td>Positive Prevention Plus</td>
<td>Positive Prevention Plus</td>
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<tr>
<td>Rights, Respect, Responsibility</td>
<td>Rights, Respect, Responsibility</td>
</tr>
<tr>
<td>Making Proud Choices</td>
<td>Making Proud Choices</td>
</tr>
<tr>
<td></td>
<td>Be Real, Be Ready</td>
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</tbody>
</table>
### 2016 Adolescent Sexual Health Work Group (ASHWG) Ad-Hoc Curricula Review Group:

**Summary of Sexual Health Education Curricula Included in Review**

<table>
<thead>
<tr>
<th>Name</th>
<th>Publisher/Author</th>
<th>Last Update</th>
<th>Lessons Available &amp; Lessons Reviewed</th>
<th>Time per lesson</th>
<th>Supplemental Material Available</th>
<th>Cost</th>
<th>Training Support</th>
<th>Online Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>3Rs Rights, Respect, Responsibility</td>
<td>Advocates for Youth</td>
<td>2016</td>
<td>Available: K-12th - 82 lessons Review included: 6th-12th grade 58 lessons</td>
<td>50 minutes</td>
<td>N/A</td>
<td>Free online download</td>
<td>Training</td>
<td>3Rs</td>
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<tr>
<td>Be Real. Be Ready.</td>
<td>San Francisco Unified School District</td>
<td>2015</td>
<td>Available: High School only – 24 lessons available Review included: 15 core lessons authors identify as meeting basic requirements of education code</td>
<td>50 minutes</td>
<td>N/A</td>
<td>Free online download</td>
<td>“Contact Us” page</td>
<td>Be Real Be Ready</td>
</tr>
<tr>
<td>FLASH (Family Life and Sexual Health curriculum)</td>
<td>King</td>
<td>7th-8th grade 2016</td>
<td>Available: 4th-5th grade – 18 lessons 6th-8th grade – 7 lessons 7th-8th grade – 5 lessons</td>
<td>Special</td>
<td>Middle and High School: ETR (fee based)</td>
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</table>
NOTE:
The usage of LGBTQ+ throughout this document is intended to represent an inclusive and ever-changing spectrum and understanding of identities. Historically, the acronym included lesbian, gay, and bisexual, but has continued to expand to include queer, questioning, intersex, asexual, allies, and alternative identities (LGBTQiAA), as well as expanding concepts that may fall under this umbrella term in the future.

(Source: California Health Framework, 2018)

11 LGBTQ+ Bias and Its Effects

1. Explain to the students that LGBTQ originally stood for Lesbian, Gay, Bisexual, Transgender, and Queer or Questioning.

   - Most LGBTQ+ students have experienced harassment and discrimination at school. Over 8 in 10 experience verbal harassment. Nearly two-thirds experience LGBTQ+ discrimination. Due to feeling unsafe or uncomfortable, nearly a third miss at least one day of school each month.

   - Hostile school climates negatively affect LGBTQ+ students’ educational outcomes and mental health. LGBTQ+ students who are victims are twice as likely to NOT go on to college. LGBTQ+ students have lower GPAs, lower self-esteem, and higher levels of depression.

   - School staff often fail to intervene when they hear these remarks at school.
## AB-329

<table>
<thead>
<tr>
<th>Chapter 5.6 - CHYA</th>
<th>Education Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Article 1 – General Provisions</td>
<td>51930 – 51932</td>
</tr>
<tr>
<td>Article 2 – Required CSE/HIV Prev.</td>
<td>51933 – 51934</td>
</tr>
<tr>
<td>Article 3 – In-Service Training</td>
<td>51935 – 51936</td>
</tr>
<tr>
<td>Article 4 – Notice &amp; Parental Excuse</td>
<td>51937 – 51939</td>
</tr>
</tbody>
</table>
1) To provide pupils with the knowledge and skills necessary to protect their sexual and reproductive health from HIV and other sexually transmitted infections and from unintended pregnancy.

2) To provide pupils with the knowledge and skills they need to develop healthy attitudes concerning adolescent growth and development, body image, gender, sexual orientation, relationships, marriage, and family.

3) To promote understanding of sexuality as a normal part of human development.
4) To ensure pupils receive integrated, *comprehensive*, accurate, and *unbiased* sexual health and HIV prevention instruction and provide educators with clear tools and guidance to accomplish that end.

5) To provide pupils with the knowledge and skills necessary to have healthy, positive, and safe relationships and behaviors.
a) This chapter does not apply to description or illustration of human reproductive organs that may appear in a textbook, adopted pursuant to law, if the textbook does not include other elements of comprehensive sexual health education or HIV prevention education as defined in Section 51931.

b) This chapter does not apply to instruction, materials, presentations, or programming that discuss gender, gender identity, gender expression, sexual orientation, discrimination, harassment, bullying, intimidation, relationships, or family and do not discuss human reproductive organs and their functions.
ED CODE 51933

(a) Instruction and materials shall be age appropriate.
(b) All factual information presented shall be medically accurate...
(d) (4) Instruction and materials shall not reflect or promote bias against any person on the basis of any category protected by Ed Code 220. (THIS INCLUDES RELIGION)
(5) Instruction and materials shall affirmatively recognize that people have different sexual orientations and, when discussing or providing examples of relationships and couples, shall be inclusive of same-sex relationships.
(d) (6) Instruction and materials shall teach pupils about gender, gender expression, gender identity, and explore the harm of negative gender stereotypes.

(h) Instruction and materials shall provide pupils with knowledge and skills for making and implementing healthy decisions about sexuality, including negotiation and refusal skills to assist pupils in overcoming peer pressure and using effective decision making skills to avoid high-risk activities.

(i) Instruction and materials may not teach or promote religious doctrine.
(a) Each pupil shall receive this instruction at least once in junior high or middle school and at least once in high school. This instruction shall include all of the following:

(8) Information about local resources, how to access local resources, and pupils’ legal rights to access local resources for sexual and reproductive health care such as testing and medical care for HIV and other sexually transmitted infections and pregnancy prevention and care, as well as local resources for assistance with sexual assault and intimate partner violence.

Education Code 46010.1 Confidential Medical Services
(9) Information about the effectiveness and safety of all FDA-approved contraceptive methods in preventing pregnancy, including, but not limited to, emergency contraception (morning after pill). Instruction on pregnancy shall include an objective discussion of all legally available pregnancy outcomes, including, but not limited to, all of the following: (A) Parenting, adoption, and abortion.
(11) (c) A school district may provide comprehensive sexual health education or HIV prevention education consisting of age-appropriate instruction earlier than grade 7 using instructors trained in the appropriate courses. A school district that elects to offer comprehensive sexual health education or HIV prevention education earlier than grade 7 may provide age appropriate and medically accurate information on any of the general topics contained in paragraphs (1) to (11), inclusive, of subdivision (a).
School districts may contract with outside consultants or guest speakers, including those who have developed multilingual curricula or curricula accessible to persons with disabilities, to deliver comprehensive sexual health education and HIV prevention education or to provide training for school district personnel. All outside consultants and guest speakers shall have expertise in comprehensive sexual health education and HIV prevention education and have knowledge of the most recent medically accurate research on the relevant topic or topics covered in their instruction.
ED CODE 51938

(a) A parent or guardian of a pupil has the right to excuse their child from all or part of comprehensive sexual health education, HIV prevention education, and assessments related to that education through a passive consent ("opt-out") process. A school district shall not require active parental consent ("opt-in") for comprehensive sexual health education and HIV prevention education.

(b)(2) If arrangements for this instruction are made after the beginning of the school year, notice shall be made by mail or another commonly used method of notification, no fewer than 14 days before the instruction is delivered
HOW IS CSE BEING ROLLED OUT?
THE ROLL OUT

• Liberal vs. Conservative Districts
  ➢ ACLU sent letters to ALL Districts
  ➢ ACLU sending Representative at District Meetings

• Fighting Back During this Process
  ➢ District Level – forming parent teams
  ➢ State Level – coming together to reject the framework (being adopted May 2019)