

CSE Smart Book

5th Edition | May 2025

Comprehensive
Sexuality
Education

WHAT IS IT? CSE

Comprehensive sexuality education (CSE) represents a significant departure from traditional moral and developmental frameworks, positioning itself as a liberating force rooted in pleasure, autonomy, and the importance of early exposure to sexual knowledge. It operates on the premise that withholding information is the root cause of irresponsible behavior, thus advocating for early and frequent instruction to enable informed consent. However, this model often disregards established understandings of human development, encouraging children to view themselves as the ultimate authority on matters such as gender identity and sexual readiness. In doing so, it normalizes behaviors once considered deviant, reframes truth as subjective, and elevates the avoidance of shame above all else. The biological and spiritual dimensions of personhood are dismissed, and traditional values surrounding sex, family, and responsibility are systematically deconstructed.

This ideological shift extends beyond education into a broader cultural redefinition of identity, morality, and truth. Parents who challenge the prevailing narrative are increasingly portrayed as obstacles to progress, while state-endorsed curricula promote the idea that all sexual desires are valid and must be affirmed without question. Compassion is reinterpreted as unconditional acceptance, even at the expense of safety and long-term well-being. The result is a framework that encourages high-risk behaviors under the guise of empowerment, while severing the connection between freedom and responsibility. Rather than guiding youth toward holistic well-being, CSE often undermines truth, virtue, and human dignity – the very foundation that enable individuals to flourish



Comprehensive Sexuality Education



The Dark History of CSE

To understand how the sexual revolution gained widespread acceptance, one must confront the deliberate dismantling of biblical morality that once underpinned American law and culture. The shift began by redefining humanity—not as beings created in God’s image, but as autonomous entities, answerable only to themselves. Darwinism cracked open this door, suggesting humans evolved from animals, thus justifying behavior once deemed immoral. This redefinition of human origins and nature laid the groundwork for Alfred Kinsey’s controversial research and reports on the sexual behaviors of the human male and females, despite his background focusing in insect studies rather than human psychology. After all, if humans were merely advanced animals, Kinsey’s leap from gall wasps to human sexuality seemed less outrageous—and more disturbingly acceptable.

Simultaneously, Marxism and its ideological offspring—Socialism and Humanism—worked to erode the foundations of religion, family, and personal responsibility. Marxism viewed the nuclear family and religion as oppressive tools, while Socialism promoted the idea that children belong to the state, not their parents. Humanism, blending Darwinism and Marxist ideals, replaced God with self-gratification, redefining freedom as the pursuit of pleasure without consequence. Unitarianism, with its rejection of biblical authority, served as a gateway to atheism and moral relativism. Even eugenics found a foothold, cloaked in the language of reproductive rights, convincing targeted populations to willingly participate in their own demographic decline. The result was a cultural upheaval that redefined morality, identity, and truth itself.



The Reality of Comprehensive Sexuality Education (CSE)

Comprehensive Sexuality Education (CSE), though often framed as progressive and inclusive, reveals a deeper ideological agenda that challenges long-standing cultural norms and protections. It extends far beyond biological instruction, promoting sexuality as a core identity from birth and emphasizing pleasure as a central theme. Children are introduced to concepts such as gender fluidity and previously deviant sexual relationships, now considered “diverse” at increasingly younger ages, while traditional understandings of sex, gender, and development are dismissed. Consent is redefined in ways that blur legal and ethical boundaries, suggesting that if a child consents, any behavior is permissible—an idea that undermines long-established child protection laws and opens the door to lowering the age of consent to disturbing levels. Rather than promoting abstinence or even self-restraint, CSE encourages minors to engage in sexual activity under the guise of safety and autonomy, normalizing high-risk behaviors with minimal regard for long-term

consequences – if the pleasure is worth it.

Abstinence is painted in an unrealistic light and a disease-free life nearly unattainable, justifying teaching minors how to have safe sex ... because they will do it anyway. It subtly shifts the role of education from informing to indoctrinating, redefining morality, identity, and truth itself. Parental authority is increasingly portrayed as an oppressive barrier to a child’s autonomy and “right to pleasure”, and the nuclear family is no longer upheld as a societal cornerstone. At its core, CSE promotes a worldview where all sexual desires are validated, and love is equated with unconditional affirmation—regardless of risk or consequence. This model, far from being neutral or purely educational, represents a profound cultural shift with far-reaching implications.



What CSE Teaches Students

When most parents think of “sex ed”, they think of an awkward conversation about various changes in the human body during puberty along with an explanation of the birds-and-the-bees, usually with plenty of uncomfortable giggles and a snarky comment or two. In reality, the teachings of comprehensive sexuality education are far from the biological lessons of days past.

Role-Playing and Erotic Simulation in Classrooms

Students are encouraged to act out sexual scenarios, including how to negotiate condom use when a partner objects to it not feeling good. Lessons on how to make condoms “more erotic” blur the lines between education and sexual grooming. These practices sexualize children under the guise of safety, often without parental knowledge.



Sexually Explicit Materials

Due to Obscenity Exemption Laws, pornographic images and videos can be shown under the justification of “education,” even though the same content shown by an adult neighbor outside of school would qualify as criminal child sexual abuse or corruption of a minor. Opt-out policies are frequently vague or hard to access, if a parent even knows of their existence, and content is rarely disclosed in full before lessons begin, making it difficult for parents to opt out before their child has been exposed to explicit material. Sadly, once the exposure happens, this type of material can have a significantly harmful impact on children’s developing minds.

Informed Consent

Modern “consent education” often promotes the idea that if a child feels informed and ready, they can give meaningful sexual consent. This framing dangerously overlooks the biological and psychological reality that children lack neurological maturity and life experience to fully comprehend the long-term consequences of such decisions. Legal systems have long recognized this, establishing age-of-consent laws to protect minors from exploitation. By teaching children that their consent is sufficient, these protections are undermined, creating potential loopholes for predators and institutions to exploit under the guise of empowerment. Cases where organizations fail to report abuse, citing a child’s “willingness,” highlight the real-world consequences of this flawed logic.

This redefinition of consent shifts the focus away from safeguarding children and toward normalizing premature sexual autonomy – even though a child is not developmentally ready. It replaces the teaching of boundaries and virtue with an emphasis on “safe” participation in high-risk behaviors, often without addressing the emotional and moral implications. The language of compassion and empowerment is used to mask a deeper ideological shift—one that detaches consent from responsibility and maturity. In doing so, it exposes children to grooming and abuse while eroding the role of adults as protectors and guides. A truly protective framework must reintroduce objective moral standards, emphasize human dignity, and uphold the principle that not all choices are valid simply because they are chosen.



Parental Exclusion

In many cases, teachers and school counselors are not required to inform parents if a child expresses confusion about gender or sexuality. Many districts have policies to hide social gender transitions in schools to hide gender transitions (names, pronouns, restroom use) from parents unless the child gives permission.

Abstinence is Mocked, Undermined, or Redefined

CSE often dismisses abstinence as outdated, judgmental, or even harmful, despite it being the only method that prevents 100% of STIs and pregnancy. Students are rarely told that they have a valid choice to abstain entirely from sexual activity, leaving kids feeling like something is wrong with them if they want to wait or follow religious or personal convictions. In the rare case abstinence is taught, it is taught as abstaining from vaginal sex until marriage by participating in other forms of sexual activity such as manual, oral, or anal sex. This leads parents to the misguided belief that schools are “saying the same thing” as parents, while teens unknowingly engage in risky sexual behaviors that bring high-risk emotional, mental, and physical health consequences.

Framing Traditional Families as the Enemy

Traditional family values are frequently portrayed as repressive, ignorant, or unsafe. Parents who oppose CSE are labeled as uneducated, religious extremists, or oppressive, creating division between children and their families. CSE teaches that true compassion means affirming all identities and choices, while any suggestion of moral boundaries is labeled judgmental or even “violent.”



**– Confidential –
Gender Support Plan**

School/District _____ Today's Date _____
 Student's Preferred Name _____ Legal Name _____
 Student's Gender _____ Assigned Sex at Birth _____ Student Grade Level _____
 Date of Birth _____ Sibling(s) _____
 Parent(s)/Guardian(s)/Caregiver(s) and relation to student _____

 Meeting participants: _____

CONFIDENTIALITY, PRIVACY AND DISCLOSURE
 How public or private will information about this student's gender be (check all that apply)?
 _____ District staff will be aware (Superintendent, Student Support Services, District Psychologist, etc.)
 Specify the adult staff members who will be aware of student's gender: _____
 _____ Site level leadership/administration will know (Principal, head of school, counselor, etc.)
 Specify the adult staff members who will be aware of student's gender: _____
 _____ Teachers and/or other school staff will know
 Specify the adult staff members who will be aware of student's gender: _____
 _____ Student will not be openly "out," but some students are aware of the student's gender
 Specify the students who are aware of student's gender: _____
 _____ Student is open with others (adults and peers) about gender
 Other - describe: _____

If the student has asserted a degree of privacy, what are expectations of the institution if that privacy is compromised? How will a teacher/staff member respond to questions about the student's gender from:
 Other students? _____
 Staff members? _____
 Parents/community? _____

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What CSE Doesn't Teach Students

Teen Sex and Pregnancy

CSE emphasizes that teen pregnancy has decreased over the past decades, but they don't tell you this is largely due to increased access to contraception and abortion—not because teens are having less sex. In fact, sexual activity among youth remains high, and children are being exposed to sex at increasingly younger ages through pornography, which further normalizes early sexual behavior.

Abortion Rates

Abortion rates among teens and young women have dramatically increased in places where CSE, abortion access, and Planned Parenthood influence are strong. The narrative often frames abortion as a routine form of “pregnancy prevention or birth control” rather than a serious moral or health issue. Many CSE programs emphasize empowerment through abortion access leaving out the risks of abortion and its link to poor mental health and infertility.

Infertility

Infertility rates are rising, and it has been linked to several CSE resources and teachings. For example, earlier sexual activity leads to more sexually transmitted infections (STIs) and increased abortion rates and contraceptives have physical health consequences. These are being provided at younger ages and downplayed or ignored.

Mental Health, Sex Trauma, and Relationship Quality

Despite more access to CSE, depression and sexual trauma rates among youth are at historic highs. Social media and digital technology can sometimes expose youth to harmful content or online harassment, increasing vulnerability. Earlier sexual debut (often defined as before age 16) is associated with higher risks of less stable romantic relationships, more breakups and divorces, and lower relationship satisfaction. This is likely because comprehensive sex education teaches relationships have love but are not founded on commitment and values, so it is based on temporary feelings.

The Lies About Abstinence Education

One of the most undervalued components of modern sex education is the long-term benefit of abstaining from multiple sexual partners. While Comprehensive Sexuality Education (CSE) often portrays abstinence as outdated or fear-based, this mischaracterization overlooks its proven effectiveness in promoting physical, emotional, and relational well-being. Abstinence remains the only method that fully eliminates the risk of unintended pregnancy, sexually transmitted infections, and the emotional complexities that often accompany premature intimacy. Far from being a message of repression, abstinence emphasizes self-respect, personal agency, and the freedom to make choices that align with long-term goals and values.

Unlike CSE, which generally reduces sex to a physical act detached from emotional or relational context, abstinence education frames sexuality within the broader scope of commitment, trust, and future stability. It encourages young people to consider the emotional and psychological bonds formed through intimacy—bonds that are especially potent during adolescence due to the influence of hormones like oxytocin.

Moreover, abstinence supports the development of a strong personal identity, free from the emotional entanglements that can cloud judgment and derail aspirations. It teaches that love is not merely about gratification but about mutual respect, responsibility, and long-term investment. This approach equips young people with the tools to recognize their worth and to expect relationships that reflect that value. It also fosters resilience and clarity, enabling

them to pursue their goals without the distractions or consequences of premature sexual involvement.

In emphasizing the importance of marriage, family, and lifelong commitment, abstinence education offers a vision of sexuality that is deeply rooted in human dignity and flourishing. It prepares students not just for the mechanics of sex, but for the responsibilities and rewards of enduring relationships. By reinforcing the idea that meaningful love is worth waiting for, it cultivates a mindset that values stability, emotional health, and future-oriented decision-making.

Ultimately, true abstinence education provides a counter-narrative to the permissiveness of CSE by affirming that boundaries are not barriers to freedom, but safeguards for it. It challenges young people to think critically about their choices and to pursue a path that leads to low-risk, high-reward outcomes. In doing so, it lays the foundation for healthier individuals, stronger families, and a more stable society.



CSE in Schools

Whole School, Whole Community, Whole Child Model

The Whole School, Whole Community, Whole Child (WSCC) model, promoted by the CDC, redefines the role of parents in student health and education by positioning schools as the primary decision-makers. Under this framework, students are encouraged to make independent health decisions, including those related to sexual activity, mental health, and medical treatment. Parents who disagree with school-led services are labeled as barriers to service (Cline, 2023, 29:25–30:10), and in some cases, children can receive medical interventions without parental knowledge or consent. This shift undermines the foundational role of families in guiding moral and health-related decisions, placing children at risk of being influenced by ideologies and services that may conflict with their family values.

The CDC's Virtual Healthy School initiative (CDC, 2024) exemplifies this approach, offering educational videos and health services designed to shape student behavior and beliefs. These materials, updated frequently, aim to deliver powerful messages in short bursts—sometimes as brief as 30 seconds—without parental oversight. Services include pregnancy testing and STI treatment, and while schools may not directly provide contraceptives or abortions, partnerships with organizations like Planned Parenthood fill that gap. Through School-Based Health Centers (SBHCs), students can be referred to external clinics for services that bypass parental involvement, especially in states where minors can legally consent to such treatments. This creates a system where children are exposed to significant medical decisions without the guidance or protection of their families.

The implications of excluding parents from these critical conversations are profound. In states that allow minors to consent to abortion or receive sexual health services without parental input, children are left vulnerable to manipulation and misinformation. Even in states with consent laws, loopholes such as judicial bypass or minimal parental notification erode the safeguards meant to protect minors. Nearly half of U.S. states permit these services without full parental involvement, signaling a nationwide trend toward diminishing parental rights. This model not only compromises the integrity of family structures but also places children in potentially harmful situations where their emotional, physical, and moral development may be jeopardized. A full list of states that allow minors to receive sexual health services without parental consent or notification can be found at [M4LAcademy.org](https://www.m4lacademy.org) under **CSE** in the Resource Library.

The WSCC model's referral system to community medical centers introduces a concerning dynamic where children's home environments are evaluated through brief surveys and provider assessments. If a provider identifies a "red flag"—such as a parent's opposition to gender-affirming care or other school-endorsed health services—the child may be referred to social services without parental notification. In some states, this has led to alarming cases where children were removed from their homes or received medical treatment without parental consent.

These School-Based Health Centers (SBHCs), often funded as Federally Qualified Health Centers (FQHCs), operate under federal programs like Title X and the Teen Pregnancy Prevention Program, which prioritize access to reproductive services over parental involvement. This structure risks undermining family authority and places children in vulnerable situations where medical decisions may be made without the guidance of those who know them best.

School counseling services further reinforce this shift by promoting confidential discussions around gender identity, body image, and sexual health, often without informing parents. Counselors are encouraged to create “safe spaces” where students can explore sensitive topics privately, supported by media and literature that may fall under educational exemptions from obscenity laws. Posters and materials promoting allyship and sexual health are common, shaping student perspectives in ways that may conflict with family values. While these efforts are framed as inclusive and supportive, they bypass critical parental oversight and introduce ideologically driven content at formative stages of development to vulnerable children. The cumulative effect is a system that increasingly isolates children from their families, replacing parental guidance with institutional authority—raising serious concerns about the long-term impact on child well-being and family cohesion.

Teacher and Staff Training

Comprehensive Sexuality Education (CSE) is often embedded into schools through professional development workshops for staff, frequently without parental knowledge. These sessions, led by Title IX offices or diversity coordinators and supported by organizations like SIECUS and Advocates for Youth, train educators to affirm student identities and implement CSE principles across school environments (SIECUS, n.d.; Advocates for Youth, n.d.; GLSEN, n.d.). While not part of formal curriculum, these trainings shape how teachers interact with students, respond to student questions about sexuality, and manage classroom policies, effectively integrating CSE ideology behind the scenes. This lack of transparency raises concerns about parental exclusion and the ideological influence on school culture.

Obscene Books in the Library

Many school districts are now stocking elementary and secondary libraries with books that promote sexual exploration, gender theory, and topics like puberty blockers—often under the guise of inclusivity and education. Titles such as *Who Are You?*, *Princess Boy*, and *It’s Perfectly Normal* introduce young children to complex and explicit content. These materials, which would be considered inappropriate or even illegal outside of a school setting, are often defended through campaigns like the American Library Association’s “Banned Book Week,” framing parental concern as censorship. This trend raises serious concerns about transparency, age-appropriateness, and the erosion of parental rights in guiding their children’s moral and developmental education.

After-School Clubs and Outside Groups

Clubs such as Gender & Sexualities Alliances (GSAs) and “Wellness Clubs” often serve as vehicles for promoting CSE ideologies within schools, hosting speakers and events that reinforce themes like gender identity, sexual orientation, and affirmation practices. Due to equal-access policies, GSAs are granted the same privileges as any other student club, including making announcements over school PA systems, which amplifies their visibility and influence. Clubs with names like “Pride Alliance,” “Safe Spaces,” or “Health Equity Clubs” often reflect this ideological alignment, embedding CSE principles into school culture beyond the formal curriculum.

EdTech and Learning Platforms

Many online tools used in health or counseling classes incorporate content aligned with CSE. Platforms such as BrainPOP, EverFi, and Nearpod frequently host CSE-based “life skills” or sex education lessons embedded within their curriculum (EVERFI, n.d.) (BrainPOP Educators, n.d.). Parents and educators should pay close attention to terminology like “digital citizenship,” “healthy identities,” and “mental wellness,” as these phrases often signal the inclusion of CSE-aligned material. Although specific sex-ed modules aren't always labeled overtly, instructors have reported using features like Nearpod’s collaborative board to facilitate anonymous student questions on reproductive health and consent functionally acting as an embedded sex education tool within “digital citizenship” lessons.



CSE in Schools

United States of America

During the Obama administration, the Department of Education issued a series of Dear Colleague Letters that redefined longstanding civil rights law to reflect progressive ideology, with profound consequences for public education. The 2014 letter on school discipline reframed behavioral disparities as evidence of systemic racism, pressuring schools to reduce suspensions and expulsions, not based on fairness or safety, but to achieve statistical racial equity (U.S. Department of Education & U.S. Department of Justice, 2014). This guidance forced many schools to abandon traditional discipline in favor of restorative justice and SEL-based interventions, undermining authority and accountability in the classroom. Then, in 2016, the administration expanded its reach into gender ideology, issuing a letter that reinterpreted Title IX to require schools to treat students according to their self-declared gender identity regardless of biological sex, medical diagnosis, or parental input. Schools were instructed to allow access to restrooms, locker rooms, and sports teams based solely on self-identification, effectively codifying gender self-determination into federal policy without legislation (U.S. Department of Education & U.S. Department of Justice, 2016). Both directives, though later rescinded under the Trump administration, set a precedent for identity-based policymaking and opened the floodgates for Comprehensive Sexuality Education (CSE) frameworks that normalize subjective identity, diminish parental rights, and replace moral clarity with fluidity and feelings. These ideological directives were reinforced structurally through the 2016 Title IV, Part A grant guidance, which allocated federal funding for programs labeled as “safe and healthy students” and “well-rounded education” effectively financing many CSE-aligned initiatives, SEL curricula, and identity-focused instruction under vague, values-neutral language (U.S. Department of Education, 2016). These letters exemplify how federal power has been used not merely to enforce civil rights, but to reshape the moral foundations of education itself.

International Influences

Comprehensive Sexuality Education (CSE) as promoted today is deeply intertwined with international agendas and ideological movements aimed at reshaping cultural norms around sexuality. One of the most influential drivers of this agenda is SIECUS, now rebranded as Sex Ed for Social Change, which, along with organizations like the World Health Organization (WHO) and the United Nations Population Fund (UNFPA), has long advocated for explicit sexual instruction beginning in early childhood. As early as 1964, a UNESCO-sponsored symposium proposed universal sex education that included topics such as masturbation and “sexual deviations.” The WHO’s 2010 European standards go even further, recommending that children aged 0–4 be taught about “pleasure from touching one’s own body” and “masturbation in early childhood,” alongside lessons on gender identity and curiosity about genitals (World Health Organization Regional Office for Europe & Bundeszentrale für gesundheitliche Aufklärung, 2010). These recommendations reflect a radical departure from traditional understandings of child development and parental authority.

This ideological shift is now influencing national education policies, such as Poland’s planned overhaul of its abstinence-based Family Life Education program in favor of a WHO-aligned “Health Education” curriculum beginning in September 2025. The new curriculum introduces instruction on contraception, STIs, sexual orientation, and gender identity to students as young as fourth grade, signaling a significant move away from values rooted in family and abstinence. Organizations like Advocates for Youth, the Human Rights Campaign, and the International Planned Parenthood Federation (IPPF) support this transformation, promoting sexual rights detached from traditional moral frameworks. The global push for CSE reflects a coordinated effort to redefine childhood, sexuality, and family structures—raising urgent concerns about the erosion of parental rights, the psychological impact on children, and the long-term consequences for societal cohesion.



Common Arguments and How to Respond

“Kids are having sex anyway — we need to educate them.”

Response: Teaching children that sex is inevitable lowers expectations. We should raise the standard, not surrender to it. Just as we teach kids not to smoke or do drugs despite peer pressure, we can teach them that self-control, delayed gratification, and dignity are not only possible, but admirable.

"Abstinence doesn't work."

Response: CSE misrepresents abstinence as naive or outdated, but abstinence is 100% effective in preventing pregnancy and STIs. Risk avoidance, not risk reduction, should be the foundation, especially for youth.

"What about kids whose parents don't teach them?"

Response: Schools can fill educational gaps without promoting ideology. Teaching basic anatomy, safety, and respect doesn't require graphic content or gender theory. When parents fall short, we don't abandon standards — we raise them, offering values-based education that protects kids without undermining families.

Take Action

1. *Engage:*

- Learn the language of CSE. Know the euphemisms: “age-appropriate,” “rights-based,” “gender inclusive,” “affirming”
- Submit OPT OUT forms to your school to exclude your child from Sexuality Education instruction ([Freedom in Education](#) has templated letters)
- Ask teachers, principals, and school board questions: What are the policies? Request to review curriculum & school materials (libraries, counselor resources).
- Attend school board meetings: comment, review agendas,
- Join curriculum review or parent advisory committees.
- Join a group like Moms for Liberty, find or start a local chapter.

2. *Expose:*

- If laws or opt-out forms are ignored, EXPOSE it.
- File FOIA/Open Records for requests for curricula, training materials, policies.
- Document everything: dates, names, content; show receipts. Photograph or screenshot concerning content in assignments or displays.
- Submit written concerns to school staff and board members to build a paper trail.
- Share findings with local media, write letters to the editor, or post on social media.
- Organize a local rally or awareness event to highlight the issue. Highlight ties between Planned Parenthood, SIECUS, and local curriculum

3. *Educate:*

- Host events to educate and tailor messages to legislators, parents, or the public
- Use M4LAcademy’s resource library and toolkits to equip others.
- Create one-page, high level information resource on the topic (can use QR codes to link to additional resources)
- Partner with local churches or civic groups to build awareness.
- Translate complex policy language into understandable talking points.
- Attend other sponsored events to stay informed on topics related to education

4. *Activate:*

- Work with state lawmakers to restore biological truth and parental authority.
- schedule in-person meetings with lawmakers — bring local stories.
- Support or draft legislation by using legislation from other states as a starting point.
- Work with the school board
- Propose district-level policy changes on sex education
- Speak at school board meeting open comments
- When discussing CSE, lead with medical and developmental truths. Try to reframe the debate and familiarize yourself with the talking points
- Run for school board or support aligned candidates
- Check out the Moms for Liberty [resources](#) to Activate to Public Service

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