

KATHLEEN WYNNE'S SEX-ED AGENDA

In 2010, then-Education Minister Kathleen Wynne released updates to Ontario's sex-ed curriculum that caused such an uproar among parents that the new curriculum was immediately withdrawn. The government told parents that it would revise the new curriculum and that parents would be consulted.

In 2015, Kathleen Wynne, now Premier of Ontario, released an updated sex-ed curriculum that is virtually identical to the contested 2010 version. Following the release of the new curriculum, it came to the surface that the government didn't consult widely with parents, and had conducted a flawed consultation process. The media called the consultation process, "politically dishonest."¹

Since the release of the 2015 sex-ed curriculum, concerned parents and other stakeholders have waged an ongoing battle against the Wynne government's agenda to undermine parental rights and indoctrinate children with inappropriate sex-ed content.

Brown fully supports Wynne's sex-ed

In August of 2016, Patrick Brown infamously "flip-flopped" on his position and now fully supports the Wynne sex-ed curriculum. On Sept. 19, 2016, PC Leader Patrick Brown said:

"I strongly support the updated sex-ed curriculum. I will never support removing LGBT sensitivity or combating homophobia from schools. It is important to have sex education to combat homophobia, and raise important issues like consent, mental health, bullying, and gender identity."

PAFE WORKS TO PROTECT PARENTAL RIGHTS

PAFE has been at the forefront of the battle against Kathleen Wynne's sex-ed agenda. We educate and activate the community and defend parents as the first educators of their children. **PAFE** has been instrumental in exposing the new sex-ed curriculum for what it is: an agenda to undermine parental rights and sexualize our children.

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ENDNOTES

1. Goldstein, Lorrie, Wynne wrong about sex-ed consultation, *Toronto Sun*, Sept. 8, 2015.
2. *Comprehensive Sexuality Education: Sexual Rights vs. Sexual Health*. Gilbert, AZ: Family Watch International.
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5. Ford, C.A. et al. (July 2005). Predicting Adolescents' Longitudinal Risk for Sexually Transmitted Infection. *Archives of Pediatric Adolescent Medicine* 159, pp. 657-664.
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8. Hallfors, D.D., Waller, M.W., Bauer, D., et al. (2005). Which comes first in adolescence -sex and drugs or depression? *Am J Prev Med* 29, pp. 163-70.
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Stop Kathleen Wynne's Sex-Ed

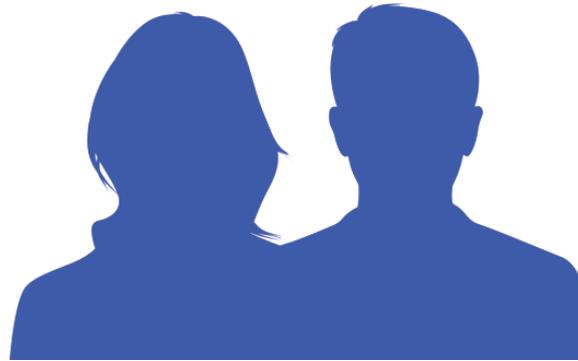


COMPREHENSIVE SEX-ED

In the past, sex-education focused on human reproduction and the physical and hormonal changes associated with puberty. Sexual activity outside of marriage was discouraged, while abstinence was encouraged. Comprehensive Sex-Ed (CSE) goes far beyond the basics of the “birds and the bees” by giving children an unprecedented amount of information about sex and sexual choices.

CSE programs “seek to change society by changing sexual and gender norms and by teaching young people to advocate for their sexual rights.”² Ontario’s new sex-ed curriculum is based on the CSE model.

In the curriculum, children in Grade 1 are asked to “identify body parts, including genitalia (e.g., penis, testicles, vagina, vulva), using correct terminology” (C1.3). Instruction in “gender fluidity” begins in Grade 3 when children are taught that gender identity and sexual orientation “make each person unique” (C3.3). In Grade 5, students are told that gender identity and sexual orientation, like one’s skin colour and biological sex, are not under one’s control (C2.4). In Grade 6, children are encouraged to masturbate: “Exploring one’s body by touching or masturbating is something that many people do and find pleasurable” (C2.5).



UNDERMINING PARENTAL RIGHTS

Despite the Ontario Liberal government’s assurance that parents would be consulted as part of the revision process for the sex-ed curriculum, parents weren’t widely consulted.

In the curriculum itself, parental rights are undermined. Within a list of strategies to manage stress during puberty for students in Grade 5, “talking to a trusted peer or adult” is listed but no reference is made to parents (C2.4). In Grade 8, students are asked to “identify sources of support regarding sexual health” and parents are listed near the bottom of a proposed list of sources, after health professionals and teachers (C1.4).

The new sex-ed curriculum encourages children to make momentous decisions about sex while limiting or negating the role of parental authority. Research, however, supports the importance of parental authority when it comes to adolescents and sex. Parental monitoring and good parent-child communication reduces sexual risk behaviours;³ children whose parents monitor them more closely are less likely to be sexually active when they are in their teens;⁴ and teenagers who feel their parents strongly disapprove of their being sexually active are less likely to contract an STD.⁵

HARMING CHILDREN

CSE advocates “tacitly endorse early sexual activity and multiple partners as well as sexual experimentation, which are the very behaviors that fuel the epidemics of sexually transmitted diseases, HIV/AIDS, abortion and emotional distress.”⁶

In Ontario’s new sex-ed curriculum, Grade 7 students are told that “people who think they will be having sex sometime soon should keep a condom with them so they will have it when they need it” (C1.5). Also in Grade 7, anal and oral sex are discussed, and students are told that “sexual health” includes “understanding what gives you pleasure” (C1.3). Students in Grade 8 are instructed to make a “personal plan” for their sexual activity (C1.4).

CSE programs like Ontario’s new sex-ed curriculum promote “safe sex” which translates into encouraging children and youth to experiment sexually as long as they wear a condom. This approach fails to protect the physical and mental health of our children: research shows that sexually active teens are more likely to be depressed and to attempt suicide.^{7,8}

CSE providers claim their approach leads to an increase in responsible behaviours. Research shows that this isn’t true. After a sex-ed program similar to the new Ontario curriculum was adopted in New Brunswick in 2005, teen pregnancies increased almost 40% between 2006 and 2010.¹⁰

Finally, Ontario’s new sex-ed curriculum doesn’t support abstinence, which is the only choice that provides 100% protection from STDs and is the best option for preserving sexual health.

