

The Facts about Senate Bill 2048 “An Act Relative to Healthy Youth”

S 2048 needlessly eliminates local control on sensitive issues surrounding sex education. It also leads directly to the promotion of offensive and age inappropriate material to young children. Unfortunately, neither the title nor the text of this bill give clear warning about its actual implications.

WHAT would this bill mandate children be taught? Please see the MFI’s memo **Curricula in Compliance with SB 2048, “An Act relative to healthy youth.”** For a more detailed description [WARNING: graphic and unsuitable for most audiences] Some of the less offensive examples of content deemed “age appropriate” for sixth graders (as young as 11 years old) under this bill are:

- Discussing getting a girl **drunk** so boyfriend can **make out** with her
- Introducing **masturbation** by older brother
- Scenario with **sexually active older sibling** making younger child keep it a **secret from parents**

This outrageous content is deemed “age appropriate” and “medically accurate” for seventh graders (as young as 12 years old):

- Explains to students that a **dental dam** is “placed over the vulva... or **anus** during **oral sex**. Can also use non-microwavable **saran wrap**...”
- Students are instructed to give advice to a teenager in the following scenario:

“I had a couple of **beers** and then somebody handed me a **joint**... The next thing I knew I was in the bedroom with Lamar... We **ended up having sex**, and **I don’t even know if he used a condom, because I was so high**...”
- In a “role play” exercise, students must convince a partner that sex will still fill good with a condom.
- Students learn the Japanese word for male masturbation means “one thousand strokes,” as part of a “cross-cultural perspective” on abstinence.
- Students read teenagers’ graphic descriptions of what it feels like to masturbate.
- Teachers are instructed to communicate key messages about “**outercourse**.”
- Explicit instructions are given for how to prepare for and engage in “anal intercourse,” which is differentiated from “anal sex.”

S 2048 would also require schools to teach high school girls how to get an abortion without parental consent.

WHERE is the “mandate” language? Advocates for the bill deny that this bill is a mandate, but the implications of this legislation are clear. Here is how the bill would work: Under S 2048, “Each... school district or charter school that offers sexual health education [which is the overwhelming majority of schools in MA] *shall* provide medically accurate, age-appropriate education.” S 2048 Section 1 – 32B.(b)

a. What is “age appropriate,” or “medically accurate” as required by this bill? The language in the bill defines these terms in a vague and circular manner. (For example: “Age-appropriate” means “topics, messages, and teaching methods suitable to particular ages or age groups of children and adolescents, based on developing cognitive, emotional, and behavioral capacity typical for the age and age group;” S 2048 Section 1 – 32B.(a).

WHO decides what is taught? Instead of local parents and educators deciding what curricula is “age appropriate” and “medically accurate,” S 2048 transfers that authority to the Massachusetts Department of Elementary and Secondary Education (“DESE”).

a. S 2048 requires schools to use curricula that ‘complies’ with controversial statewide ‘standards.’ “Any... school district or charter school that utilizes curricula consistent with the Massachusetts comprehensive health curriculum framework shall be presumed to be in compliance...” S 2048 Section 1 – 32B.(c) (This operates similarly to the way Common Core Standards are mandated.)

b. DESE already publishes a list of curricula which have been assessed for alignment with the MA Comprehensive Health Curriculum Frameworks.

www.doe.mass.edu/cnp/hprograms/aids_reviewedAAP.pdf

3. WHY was this bill proposed? Under current law, local school districts can implement any curriculum *they* deem appropriate for their community. This includes curriculum consistent with the Health Frameworks, if that is desired. There is simply NO NEED to change this and force new standards on every school in the Commonwealth.