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The eReview provides analysis on public policy relating to Canadian families and marriage.



An interview with Miriam Grossman, MD, author of the recently-released *You're teaching my child what? A physician exposes the lies of sex education and how they harm your child*.

By Peter Jon Mitchell, Research Analyst, Institute of Marriage and Family Canada

IMFC: *What was your motivation for this new book?*

Miriam Grossman, MD: Frankly, I wrote it because I was fed up. As you know, I worked for twelve years as a psychiatrist for students at the UCLA campus here in California. During that time, thousands of kids came through my office. I was alarmed at how many of them had sexually transmitted infections and concerned about students, mostly young women, whose sexual lifestyle placed them at risk for disease, emotional distress and even infertility later in life. I was frustrated to see patient after patient in similar situations, yet my hands were tied. There wasn't much I could do for them. These were young people who were otherwise well-informed and proactive about their health. They were careful about what they ate, they exercised, avoided tobacco, and so on. But in this one area, in their sexual behaviour, they took alarming risks, and that was perplexing. I began to question these students carefully, and I examined how campus health and counselling centers approach sexual health issues. Those findings were discussed in my book [*Unprotected: A Campus Psychiatrist Reveals How Political Correctness in Her Profession Harms Every Student*](#).

This new project was an extension of that. I went deeper into the field of sex education, looking at exactly what kids are taught, and at the history of sex education in the United States. I went online and explored the websites, books, pamphlets and videos created for kids and young adults. What I discovered was deeply disturbing, and that's what this book is about.

***IMFC:** In the book you argue that sex educators and activists dismiss the fundamentals of child development, and omit critical findings of neurobiology, gynaecology and infectious disease. You suggest this has profound consequences, particularly for girls. How so?*

MG: Absolutely. We have a wealth of new science that's omitted from sex ed. For example, in the past decade our understanding of the teen brain, and how it reasons and makes decisions during moments of high stimulation has grown tremendously. We didn't know until recently that the brain area that is responsible for making rational, thought-out decisions, the area that considers the pros and cons and consequences of decisions, is immature in teens. The circuits aren't complete; the wiring is unfinished. Sex educators insist that, like adults, teens are capable of making responsible decisions, they just lack information about sexuality and access to contraceptives. So the way to fight sexually transmitted infections and teen pregnancies, these authorities argue, is to provide teens with information and contraceptives, and teach them skills like how to say "no" and how to put on a condom. But current neuropsychological research does not support this stance. We know now that teens' poor decisions are likely due not to lack of information, but to lack of judgement. And there is only one thing that will bring that: time.

Another example of critical information omitted from sex ed: a girl's biological vulnerability to sexually transmitted infections. The cervix of teen girls is covered by a layer that is only one cell thick. That area is easily penetrated by the human papillomavirus (HPV), which can cause cervical cancer. (The human papillomavirus is the STI we now have a vaccination against, and that's another controversial issue.) With time, the surface is covered by cells that are 30 to 40 layers thick, and is therefore much more difficult to infect. Girls need to understand this from an early age. We have dramatic images [of the immature cervix] that we must show girls so they can grasp the importance of delaying sexual behaviour. These kids must be informed that putting all questions of morality aside, if they are sexually active at a young age, they are at risk for infections that could impact their physical and emotional well-being over the course of their lives.

A third point is kids aren't told that oral sex is associated with cancers of the throat. Needless to say this is important, and indeed life-saving, information yet it is withheld from kids, and that is the height of irresponsibility.

One of the points I make in the book is organizations such as Planned Parenthood and SIECUS (Sexuality Information and Education Council of the US) claim to be

providing up-to-date, medically-accurate information. But they do nothing of the sort.

Instead, these organizations teach kids that they are “sexual” from cradle to grave, that adolescence is the natural time to explore sexuality and that kids have the right to express their sexuality in whatever manner they choose. This message promotes sexual freedom, not sexual health. This is ideology, not science. When sexual freedom is the priority, sexual health suffers. And indeed, the statistics in the US on sexually transmitted infections, HIV, teen pregnancy, and abortion are mind numbing.

***IMFC:** Where do these organizations place the role of parents in their ideology? What are they saying to kids about parents?*

MG: This is another disturbing feature of the sex ed fiasco. I discovered a duplicity exists. When speaking to the media, and in their material for parents, sex educators state that sex education should start at home and that parents should be the primary sex educators of children. But in material directed at kids the message is altogether different. Here’s what SIECUS says in an online booklet for kids called *All About Sex*. It opens with eight pages on sexual rights: “Every human being has basic rights. Still, adults may say and do things that make young people feel like they don’t have rights. It’s important for you to know your rights so you can stand up for yourself when necessary.” Then a bit later: “You have the right to decide how to express your sexuality at every point in your life. You can choose if and how to express your sexuality.”

Ninety per cent of parents want their kids to delay sexual behaviour, and they expect sex educators to enforce that message. Organizations like SIECUS promise to do so, but they don’t. *All About Sex* is a good example of what really goes on. The goal is for the young person to realize that, sure, adults may have their opinions, but kids of all ages have the right to their own ideas about sexuality, as well as the right to behave in any way they like. Nowhere in this pamphlet are kids told: we urge you to delay sexual behaviour because that’s the healthiest choice.

***IMFC:** The book will be an eye opener for parents. What can concerned parents do?*

MG: The situation is sobering but my overall message is positive. The good news is that all these sexual health problems are 100 per cent avoidable. And there is so much parents can do to protect their kids. We know that young people are profoundly influenced by their parents, the messages they get from their parents, their perceptions of what their parents believe in, their parents’ values, and what their parents’ expectations are. There are many studies that I go through in the book that demonstrate that a parenting style of being warm and supportive and yet

having high expectations and firm rules has profound influence on children and teens and the decisions they make.

Obviously parents need to be informed. They need the information in this book; they are not going to find it anywhere else. I'm a medical doctor and I scoured the literature for the latest on sexually transmitted infections, how girls are more vulnerable emotionally and physically than boys, what kids are told about same-sex attraction, gender identity, and many other topics.

My book is not politically correct, but it is medically accurate. I explain biological truths that are not discussed elsewhere. For example, kids are being told that they can be male, female or something else; that there are more than two genders and that it is natural to question who you are at any time in your life. This is madness. It's not only medically inaccurate, it confuses our kids and it leads them into a minefield of emotional and physical hazards.

IMFC: *What would you say to government policy makers?*

MG: They must find the courage to challenge the status quo. People need to stand up, be politically incorrect, and acknowledge the truth of biology. Certain groups will object, because what is seen under the microscope and on brain scans contradicts their vision. It's going to take that courage to change policy, to have an extreme makeover of our approach to sex education. You see, sex educators have institutionalized 20th century theories and social agendas, but hard science from this century completely discredits those theories and agendas. Sex education needs to come into the 21st century and leave behind ideas that are remnants of the sexual revolution and feminism.

One chapter of Dr. Grossman's book is available [to read online](#).