

Comprehensive Sexual Health Education Instructional Materials Review

Native Stand

Year Published/Revised: 2021

Publisher: Healthy Native Youth

Website: <https://www.healthynativeyouth.org/curricula/native-stand-2-2/>

Full or Supplemental: Supplemental

Grade Level: High School (9-12)

Student Population: Native High School Students

Duration/Number of Lessons: 27 Sessions; 90 minutes each

Format and Features: free, online materials: facilitator manual, student manual, Online videos, Class Handouts

Evidence-based/informed: Evidence-based

National Standards Alignment: Not indicated

Consistent with WA Health Education Standards? Yes

Consistent with WA Comprehensive Sexuality Education Act? Yes

Consistent with AIDS Omnibus Act? Yes

Inclusive Materials/Strategies: Yes

Bias Free Materials: Yes



Primary Subject Areas and Topics Required by Law:

- Anatomy and Physiology, Reproduction, and Pregnancy (Pregnancy for Grade 6+)
- Growth and Development/Puberty
- Self-Identity (gender stereotypes, gender identity, sexual orientation, etc.)
- Prevention (general)
 - HIV/AIDS Prevention
 - Pregnancy Prevention
 - STD Prevention
 - Health Care and Prevention Resources
- Healthy Relationships (general)
 - Affirmative Consent
 - Bystander Training
 - Intrapersonal and Interpersonal Communication Skills for Healthy Relationships
 - The development of meaningful relationships and avoidance of exploitative relationships
 - Understanding the influences of family, peers, community, and the media throughout life on healthy sexual relationships

Reviewer Comments:

Reviewer 112

I appreciate how this program is designed and find it unique and relevant with the comprehensive healthy decision-making approach and culturally focused curriculum. I feel the concepts touched upon are appropriate and necessary, and so far, this is the only curriculum I have seen which includes discussion on suicide. This is crucial as a subject amongst this age group, and I value how this program acknowledges the increased risk of suicide for AI/AN individuals (along with LGBTQ). The Peer nominated process for trained peer educators is another unique and brilliant aspect of this curriculum, as information is accepted more widely from a source of trust and respect. One part of the curriculum that I challenge is the repeated promotion of abstinence, with light noting of reduced risk prevention. I would love to see more sexual health courses discuss the undeniable benefits of abstinence, but also to discuss the reality of sexual engagement. One other bit I felt uneasy with is in regards to discussion on "When A Woman Has Her Moon." There is a comment about "the man must be there to plant the seed, but his part is simple and relatively unimportant." This comment I feel has the availability of discounting the significance of the role of sperm in the reproductive stages, and may also bring feelings of uselessness to those who are of male gender.



Reviewer 101

This is a program created to be taught throughout the year – twenty-seven 1.5-hour long sessions plus additional time for activities, with Native Stand Clubs set up to continue for the Peer Trainers. The opportunity to train a group of students as Peer Trainers is an important aspect of this work and for them to continue this work over the long haul can be a plus, depending on your Peer Trainers and their commitment. Peer Trainers still need to participate in ongoing training/sessions to assist them in remaining true to the goals of the Program and maintaining their health and well-being and bringing in new Peer Trainers as students graduate or move on, hence the Native Stand Clubs. Peer Trainers are selected by their Peers. The videos from the conference held in Chehalis give students a visual which aids in understanding the concepts being discussed and making it real - the people sharing have experienced what they are talking about. Some of the Enhancement Activities are missing links to the materials/activities - notes they are coming. I could not find this curriculum offered in any language other than English. Overall, I found this curriculum to have a lot to offer Native or non-Native students in learning about the core elements of the Program.

Reviewer 119

The curriculum has impressively interwoven elements of cultural, family, and communities' dynamics and influences. The level of interactive and experiential engagement on and the detail of the lesson plans for each topic is substantial. Two areas that the curriculum could be improved: 1) the inclusion of consent as a distinct topic. It does include concepts regarding negotiation and refusal but lacks the important topic of asking for consent. 2) another topic missing is the consequence of sexual assault on the perpetrator, victim, and community. The topic of Missing and Murdered Indigenous Women and Girls (MMIWGs) is also significant and timely topic to add to this impressively designed comprehensive curriculum. Recent state and national attention has raised the awareness of MMIWGs.

Accuracy Analysis Reviewer 123

Might want to consider updating the videos

Where is the help, provide resources of where to go when there are issues;

How to use a condom - suggest finding a better video

Suggest updating the definition of a vaccine:

<https://www.cdc.gov/vaccines/vac-gen/imz-basics.htm#:~:text=Definition%20of%20Terms,-Let's%20start%20by&text=Vaccine%3A%20A%20product%20that%20stimulates,or%20sprayed%20into%20the%20nose.>

Suggest updating the definition of an orgasm. This definition implies that this only happens during sexual intercourse.

Accuracy Analysis Reviewer 125

Facilitator Manual (FM):

P.25 and p.6 in Student Manual (SM) - under "Risky Business Q&A" check stats as 2019 data is published; p.85 and p. 46 in SM - Illustration of "male external genitals", glans and urethra should also be identified in uncircumcised penis; p.86 "opening of vagina" add "allows for birth, menstrual flow, and vaginal sex; p.86 and p.48 in SM - "anus" definition should add "allows for anal sex"; p.86 hymen add to definition "hymen can be broken in a variety of ways. Sexual



activity (including penetration, oral sex, fingering, and masturbation) can break the hymen. But so can the insertion of a tampon or douching. Exercise can also break the hymen such as biking, horseback riding, gymnastics, and riding a seesaw"; p.89 "The fertilized egg may become implanted in the uterus (not uterine)"; p.97 include information on abortion and emergency contraception; p. 97 change "doctor" to "healthcare provider"; p.98 and p.61 in SM - change frequency of cervical cancer screening to every 3-5 years; p.118 footnote source to TeenWire information that IUD is not recommended for teens is outdated, per current guidelines IUDs are safe for teens. Bedsider.org is a better source.

Student Manual (SM):

P.64 update references with more up to date articles and evidence within the past 5 years; p. 87 Implanon has changed to Nexplanon; p. 87 #4 and p.88 #4 Nexplanon lasts up to 5 years (a change in recommendation from 3 years); P. 87 #1 and p.88 #4 - New recommendation that copper IUDs last up to 12 years, and hormonal IUDs last between 3-7 years (Mirena and Liletta up to 7 years, Kyleena up to 5 years, and Skyla up to 3 years); p.88 and p.283 take out " IUDs are recommended only for females in a long-term relationship with one partner who has no other partners and is not at high risk for STDs"; p.89 #4 - change depo definition to "A woman must go to a healthcare provider to receive the shot or be able to self-administer the shot at home"; p.98 emergency contraception statement needs to be updated as anyone can purchase ECs OTC like Plan B and can also get online. One needs a prescription only for Ella.; p.124 - update syphilis statement to "The rate of syphilis and congenital syphilis has increased every year" (CDC, 2019); p.278 glossary term for contraceptive implant should replace the word "capsules" to "a tiny thin rod the size of a matchstick"; p.286 Ortho-Evra is no longer available, has changed to Xulane; p.286 change "doctor" to "healthcare provider" and change frequency of paps from every 2-3 years to the updated recommendations of 3-5 years (ASCCP, 2020).

