

Comprehensive Sexual Health Education Instructional Materials Review

2023 Joint Report

6/22/2023



Washington Office of Superintendent of
PUBLIC INSTRUCTION



Washington State Department of
HEALTH

This report contains the joint findings of the Office of Superintendent of Public Instruction (OSPI) and Department of Health (DOH) Sexual Health Education Instructional Materials Review Panel's evaluation of selected instructional materials. OSPI contracted with Relevant Strategies, LLC to coordinate the review and develop the report.



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1 Executive Summary

1.1 Introduction

This report contains the findings of the Office of Superintendent of Public Instruction (OSPI) and Department of Health (DOH) Sexual Health Education Curriculum Review Panel’s assessment of selected sexual health curricula in comparison with Washington State Health Education K–12 Academic Learning Standards, the Washington Comprehensive Sexual Health Education Act, and the Washington AIDS Omnibus Act.

OSPI and DOH recruited a review panel consisting of health educators, community members, parents, and clinical experts to review selected sexual health curricula to measure the degree to which each program aligned to state requirements and standards. This year, the review team evaluated three full curricula and ten supplemental products.

Although instructional materials are a key element of effective sexual health education programs, it is important to note that **comprehensive** sexual health education programs are most successful when other factors are included. Those factors include the quality, scope and sequence of instruction over time, skill development and practice, parent/family involvement, supplemental sexual health materials, district and community resources/partnerships, and professional development for educators.

1.2 Purpose

The purpose of this report is to evaluate curricula to assess consistency with Washington state academic learning standards, legislative requirements for comprehensive sexual health and HIV/AIDS prevention education, and requirements to eliminate bias in instructional materials; and to provide information to districts about the comprehensiveness and quality of the material reviewed. This report describes the findings of the OSPI/DOH review panel and assists local school districts in determining the adequacy of curricula currently being used or under consideration for use.

The [Comprehensive Sexual Health Education Act](#)¹ (CSHE Act) specifies that public schools must provide sexual health education and must assure that it is medically and scientifically accurate, age appropriate, inclusive of all students regardless of protected class status, and includes information about abstinence and other methods of preventing pregnancy and sexually transmitted diseases (STDs). Abstinence may not be taught to the exclusion of instruction on contraceptives and disease prevention. School districts must comply with all provisions of the CSHE Act.

The CSHE Act requires OSPI and DOH to identify sexual health education curricula in use by schools and to develop a list of sexual health education curricula consistent with the [Guidelines for Sexual Health Information and Disease Prevention](#) (PDF), Washington Health Education K-12 Learning Standards, and further provisions of the CSHE Act. Providing such a list does not require OSPI and DOH to approve, rank or select curricula for districts to use. Districts are free to make their own choices involving instructional materials adoption, so long as the materials are consistent with state

¹ [RCW 28A.300.475](#)

requirements. This report will help districts understand the content that is covered in each curriculum being reviewed, and where supplementation may be necessary to ensure consistency with state requirements.

School districts using curricula that were not included in this or previous reviews must use the same set of instruments (see [CSHE Instructional Materials Review Forms](#)) to assist them in conducting their own review of materials.

1.3 Review Instruments

The 2023 review used instruments that drew from the Washington state learning standards, updated state law, the National Health Education Curriculum Analysis Tool (HECAT), and OSPI’s Screening for Biased Content in Instructional Materials tool to evaluate curricula. In 2023, the Accuracy Analysis scale was modified. Historically the accuracy analysis scale relied on a clinician to make a single judgment about the amount of correction necessary and the effort and cost to fix the identified issues. This year, the scale was expanded to include six questions (outlined in *Section 3.1 Accuracy Analysis*). This change gives reviewers a chance to identify potential issues more clearly, and to avoid making judgments on the cost to correct materials.

To determine if a full or supplemental curriculum meets state requirements, reviewers use the instruments to evaluate the degree to which the curriculum is consistent with the 2005 Guidelines and other CSHE Act requirements, the AIDS Omnibus Act, and state law regarding bias-free materials.

The CSHE Act charges OSPI with developing a list of curricula consistent with state requirements, and the Washington Department of Health (DOH) with ensuring the curricula are medically and scientifically accurate. The AIDS Omnibus Act requires that schools address transmission and prevention of HIV/AIDS, starting in grade 5. Comprehensive materials were reviewed for inclusion of HIV/AIDS content. [Washington Administrative Code 392-190-055](#) requires that the criteria used for instructional materials selection identifies and eliminates bias.

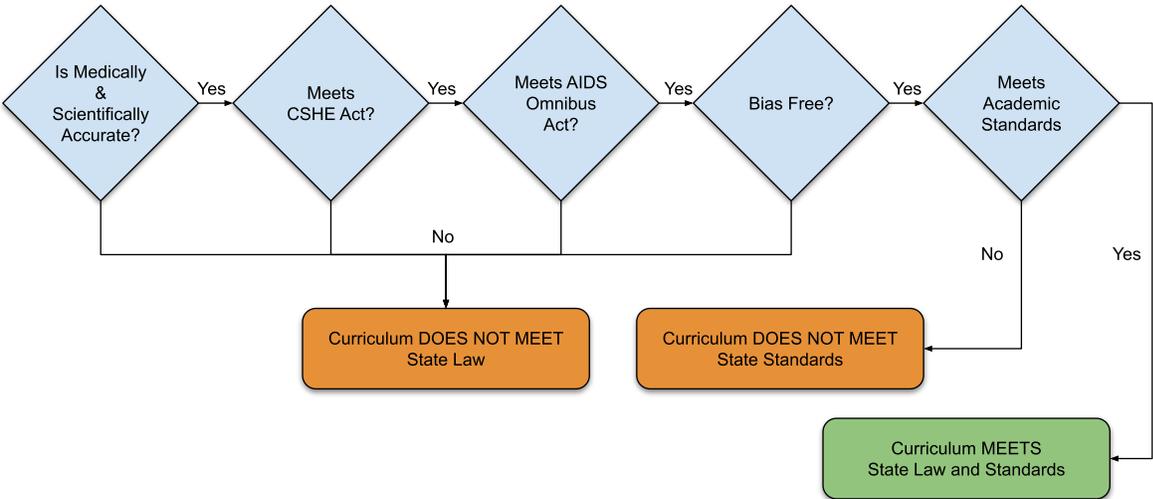


Figure 1. Flowchart showing process used to determine if curriculum meets state requirements and standards.

The full curriculum review consists of four instruments, as shown below. The instruments measure consistency with state requirements and quality of teacher and student supports (Curriculum Design), how well the curriculum meets academic learning standards (Academic Standards), if the curriculum is medically and scientifically accurate (Accuracy Analysis), and overall reviewer rating (Overall Comments).

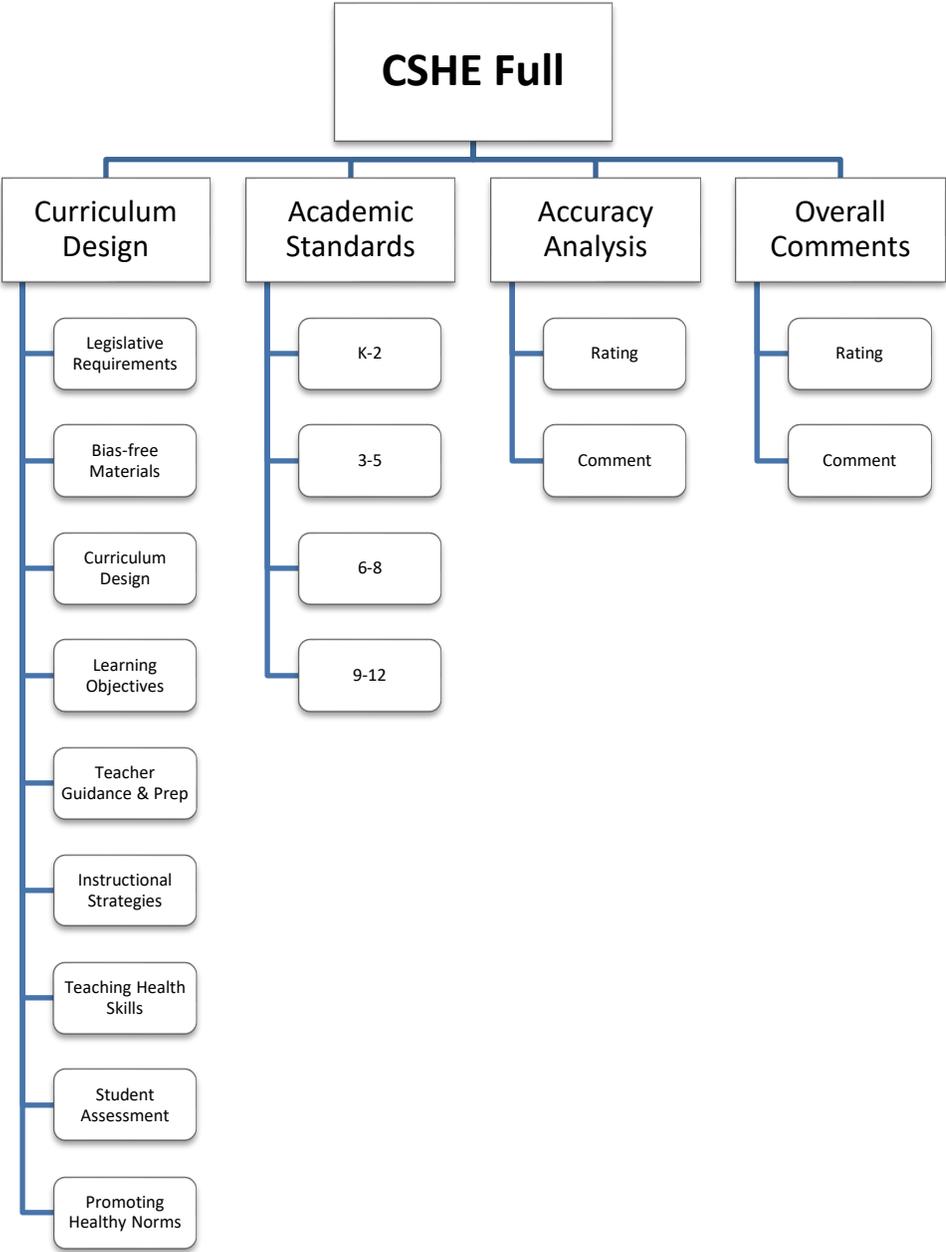


Figure 2. The sexual health education instructional materials review uses four instruments for comprehensive materials. Each instrument has one or more scales designed to measure specific aspects of the curriculum.

Supplemental materials enrich core curricula, are typically designed to cover a single topic, and are not intended to be a replacement for a full curriculum. Washington State uses an abbreviated instrument to review supplemental materials.

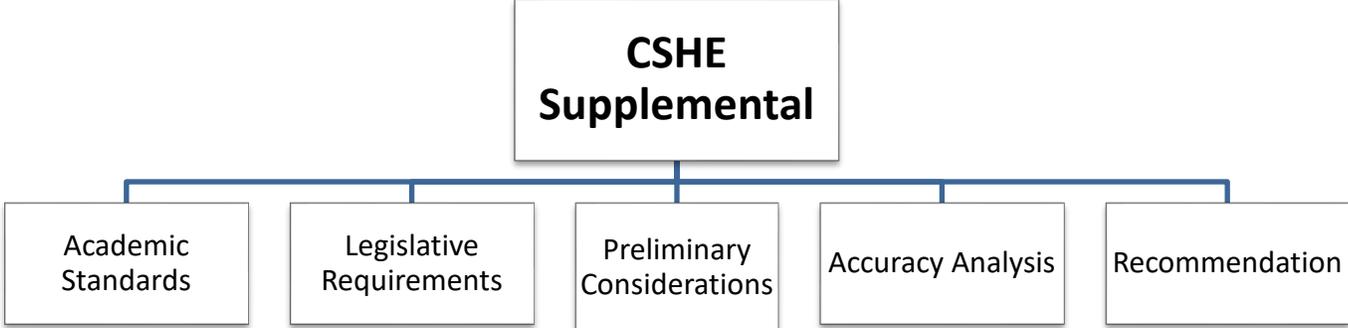


Figure 3. The supplemental instructional materials review instrument uses five abbreviated scales.

1.4 Findings

1.4.1 Full Curricula

A wide variety of instructional materials exists for elementary, middle, and high school sexual health education. Three full curricula were reviewed during the 2023 review process.

The results are displayed using a stacked bar chart showing the percent of reviewers who selected a particular response: Strongly Disagree, Disagree, Agree, or Strongly Agree. The percent positive value is calculated by adding the percent of people who selected Agree or Strongly Agree for a specific title. The percent negative value is calculated similarly. Responses were coded from 1 to 4 (Strongly Disagree = 1, ... Strongly Agree = 4) and the overall average was calculated for each title and is shown in the circular overlay on the stacked bars.

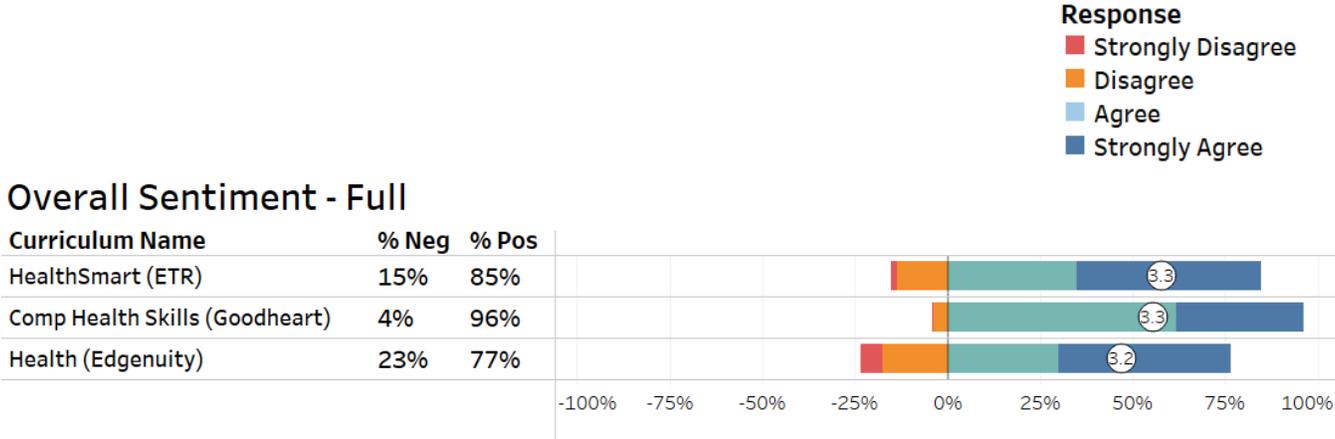


Figure 4. Overall sentiment ratings for all scales for full curricula.

All the full curricula received overall average ratings of 3.0 or greater. See *Section 4 Comprehensive Review Results* for more detail.

1.4.2 Supplemental Materials

Reviewers evaluated ten supplemental materials. Four of the titles received overall positive ratings at or above 75%, as seen in *Figure 4*.

By definition, supplemental products generally focus on one or maybe two topics. These short materials are designed to supplement a comprehensive curriculum. Most of the supplemental materials reviewed in 2023 focused primarily on puberty and several were developed for use with students with intellectual and developmental disabilities.

There were two items in the Washington Sexual Health Education Legislative Requirements scale that measured how well the supplemental product addresses HIV/AIDS.

- Materials address HIV/AIDS, its transmission, and its prevention.
- Behaviors that place a person at risk of contracting HIV and methods to avoid such risk are included in the materials.

Overall Sentiment - Supplemental

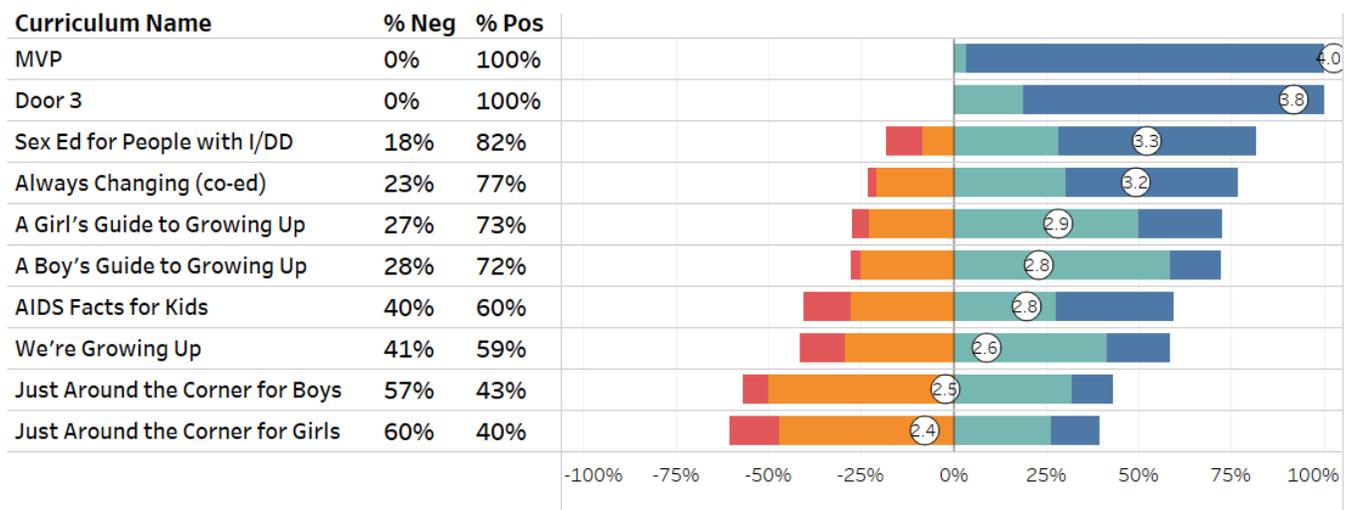


Figure 5. Overall sentiment ratings for supplemental materials.

Educators should preview the content and reflect on the fitness for their students and community for all supplemental materials.

1.5 Other Relevant Considerations

Research on effective sexual health education programs suggests those that focus on skills, attitudes, and beliefs are more likely to affect behavior than those that focus heavily on facts. Use of research-proven programs should be encouraged because they are more likely to result in healthy decisions and healthy outcomes.

According to Douglas Kirby, Ph.D., in *Emerging Answers: Research Findings on Programs to Reduce Teen Pregnancy and Sexually Transmitted Diseases*, (2007, p. 131) there are several common content elements of effective sexuality education programs.

1. Focused on clear health goals—the prevention of STD/HIV, pregnancy, or both.
2. Focused narrowly on specific types of behavior leading to these health goals (e.g., abstaining from sex or using condoms or other contraceptives), gave clear messages about these types of behavior, and addressed situations that might lead to them and how to avoid them.
3. Addressed sexual psychosocial risk and protective factors that affect sexual behavior (e.g., knowledge, perceived risks, values, attitudes, perceived norms, and self-efficacy) and changed them.
4. Created a safe social environment for young people to participate.
5. Included multiple activities to change each of the targeted risk and protective factors.
6. Employed instructionally sound teaching methods that actively involved participants, that helped them personalize the information, and that were designed to change the targeted risk and protective factors.
7. Employed activities, instructional methods, and behavioral messages that were appropriate to the teens' culture, developmental age, and sexual experience.
8. Covered topics in a logical sequence.

A comprehensive literature review² published in 2020 supports the provision of sexual health education beginning in elementary school that is scaffolded and of longer duration, that is LGBTQ-inclusive and that incorporates a social justice approach to healthy sexuality. Benefits for students who receive comprehensive sexual health education include:

- Appreciation of sexual diversity (lower homophobia; reduced homophobic bullying; expanded understanding of gender/gender norms; recognition of gender equity, rights, social justice)
- Dating and intimate partner violence prevention (improved knowledge and attitudes about, and reporting of, sexual and intimate partner violence; decreased sexual and intimate partner violence perpetration and victimization; increased bystander intentions and behaviors)
- Development of healthy relationships (increased relationship knowledge, attitudes, and skills; improved communication skills and intentions)
- Prevention of child sex abuse (improved knowledge, attitudes, skills, and social–emotional outcomes related to personal safety and touch; improved disclosure skills and behaviors)
- Additional outcomes (improved social/emotional learning, increased media literacy)

² [Three Decades of Research: The Case for Comprehensive Sex Education](#) *Journal of Adolescent Health*, Oct. 12, 2020.

2 Review Process

2.1 Overview

The sexual health education curriculum review process was modeled after other curriculum review projects conducted by OSPI. Educators, community members, and clinicians with expertise in health education and sexual health education were recruited to review the submissions through a statewide application process. Eighteen reviewers participated in the curriculum review, including three representatives from the Department of Health who focused on the medical and scientific accuracy assessment.

The review panel received training in the process for rating instructional materials using the Washington state comprehensive sexual health education review instruments. Reviewers spent an average of three to four hours per full curriculum evaluating the material. A minimum of four reviews were completed for each product to allow for a sufficient sample size.

Districts may choose to review material on their own, using the Washington state comprehensive sexual health [review instruments](#). Materials must be reviewed for medical accuracy in accordance with state laws.

2.2 Identification of Programs

The review included curricula currently used in Washington schools as reported in the 2020 School Health Profiles Survey and several brought to OSPI's attention by Washington educators. OSPI staff sought materials that would address new legislative requirements such as materials addressing affirmative consent and bystander intervention. Publishers were asked to provide online access to curriculum materials to the Sexual Health Education program for inclusion in the review. In some cases, the curriculum was acquired or accessed directly.

Curricula included in the last three reviews that have not been updated substantially or are not in wide use were not included in this review.

Programs selected for review included only those intended for use in a school setting for grades K-12 and available from publishers for school districts. Many programs exist that are intended for use only in community-based settings and which often contain values-based instruction. Because the CSHE Act applies to instructional programs in Washington public schools, the review was limited to materials intended for K-12 settings. With the resources available, and the timeline to complete the review, not every program that is available could be included. For locally developed programs and others that were not included in the review, districts will be able to use the Washington state comprehensive sexual health education review instruments to assist them in determining consistency with state academic learning standards and laws.

2.3 Reviewer Training

All reviewers participated in a half-day training before reviewing and rating any of the curricula. The training covered the following topics.

- Understand the purpose of the review and the OSPI/DOH collaboration.
- Review state regulations regarding sexual health education.

- Review the rubrics used to evaluate instructional materials.
- Establish common norms for scoring rubrics.
- Discuss frequently asked questions regarding scoring.

Reviewers completed reviews of a supplemental product during the training and discussed the results. The discussion helped clarify expectations and answered common questions from the reviewers. Staff were available to provide assistance and answer questions throughout the review.

Reviewers spent time accessing and independently reviewing their randomly assigned products and staff were available to provide support as needed.

3 Data Analysis Approach

The purpose of this section is to describe the survey design, data collection, and analysis approach for the curriculum review.

The Washington state sexual health review instruments are described below:

- **Accuracy Analysis** identifies any medical or scientific errors, including errors of omission, missing references, outdated material, and misleading information which were found in the text. This instrument was revised in 2023 and is based on guidance from the Centers for Disease Control’s Health Education Curriculum Analysis Tool (HECAT) related to medical and scientific accuracy. Staff from Washington Department of Health completed the accuracy analysis rubric for each title.
- **Curriculum Design** contains several scales, and measures consistency with state requirements and the instructional supports provided to help the teacher successfully teach using the materials.
- **Academic Learning Standards** evaluates overall alignment with Washington health education academic learning standards using grade-level outcome examples. Each grade range has different outcome examples to ensure age-appropriateness.
- The **Overall Comments** measures the reviewer’s recommendation about the quality of the curriculum. This instrument also has a place for the reviewer to express their overall comments about the curriculum.
- The **Supplemental Evaluation Form** is a short version of the full set of instruments and is used with supplemental materials only. It measures consistency with state requirements, subject areas that are covered, and reviewer recommendations.

3.1 Accuracy Analysis

The Accuracy Analysis scale uses the same Likert values as all other scales.

- 4 = Strongly Agree
- 3 = Agree
- 2 = Disagree
- 1 = Strongly Disagree

Reviewers evaluated material using seven items in the Accuracy Analysis scale. They covered age-appropriate terminology, up-to-date data and information, accurate data in charts and text, the basis for factual statements, balanced presentation, and sources of data.

3.2 Curriculum Design

The nine scales used in the Curriculum Design instrument measure aspects of the overall design and the tools available for successful delivery of the materials in the classroom. This instrument is adapted from the CDC’s HECAT. The scales include:

- Washington Sexual Health Education Legislative Requirements

- Bias-free Materials Requirements
- Curriculum Design
- Learning Objectives
- Teacher Guidance and Preparation
- Instructional Strategies and Materials
- Teaching Health Skills
- Student Assessment
- Promoting Healthy Norms

The HECAT provides another scale, Continuity and Uniformity of Comprehensive Health Education Curriculum. OSPI did not use this scale, because the scope of the review related to sexual health education only.

Each scale in the Curriculum Design instrument contains 3 to 5 individual items. All items use a Likert response scale.

- 4 = Strongly Agree
- 3 = Agree
- 2 = Disagree
- 1 = Strongly Disagree

Respondents were able to select *Not Applicable* if the individual item did not apply to the materials being reviewed. This mostly applied to the supplemental products which generally have a narrow focus.

3.3 Sexual Health Education Module

The Sexual Health Education Module measures eight content-related standards.

Standard 1: Core Concepts	Students will comprehend concepts related to health promotion and disease prevention.
Standard 2: Analyzing Influences	Students will analyze the influence of family, peers, culture, media, technology and other factors on health behaviors.
Standard 3: Accessing Information	Students will demonstrate the ability to access valid information and products and services to enhance health.
Standard 4: Interpersonal Communication	Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.
Standard 5: Decision-Making	Students will demonstrate the ability to use decision-making skills to enhance health.
Standard 6: Goal-Setting	Students will demonstrate the ability to use goal-setting skills to enhance health.
Standard 7: Health Behaviors	Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.
Standard 8: Advocacy	Students will demonstrate the ability to advocate for personal, family, and community health.

Reviewers rate each standard using the same Likert scale used in the Curriculum Design rubric.

3.4 Overall Comments

The Overall Comments instrument measures the opinion of the reviewer regarding the quality of the materials. The three questions evaluate the program and instructional design, curriculum content and learning activities, and an overall evaluation. This scale uses the standard Likert scale described earlier.

No analysis was done on the narrative comments provided by the reviewers. Aside from formatting and minor grammatical editing, the comments can be seen along with the individual program results in Appendix C of this report and on the OSPI website, [CSHE Instructional Materials, Review Reports, and Tools](#).

4 Comprehensive Review Results

The following section shows overall results for the comprehensive products reviewed. Additional individual detail for specific products can be seen on the OSPI website. Three comprehensive (full) curricula were reviewed in this cycle. Reviewers looked at the most recent version/edition available during the spring of 2023. The products are shown below.

Table 1. Comprehensive curricula reviewed.

Short Title	Full Title (Publisher)	Grade Range
Comp Health Skills	Comprehensive Health Skills (Goodheart-Wilcox)	6-8
Health	Health (Edgenuity) <small>Note: Available through Edgenuity. Published by Carone Learning.</small>	4-5
HealthSmart	HealthSmart (ETR)	3-5

4.1 Academic Standards

The chart in *Figure 5* shows how each of the products were rated overall on coverage of the academic learning standards. Additional detail is shown in *Figure 6*.

Health Ed Standards - Full

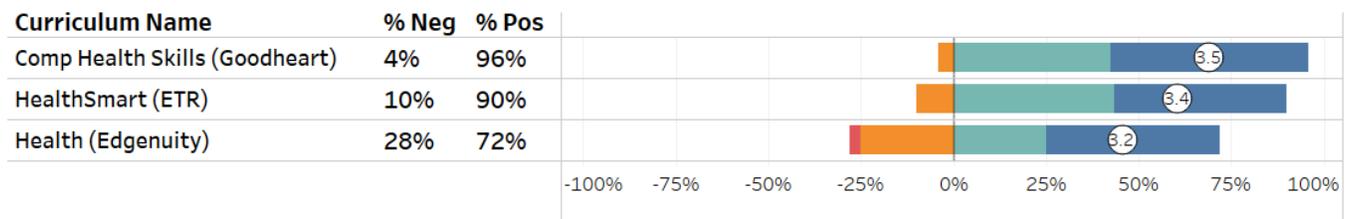


Figure 6. Product comparison for academic learning standards (Standards 1-8).

The following heat map shows the degree of alignment with each of the Washington state academic learning standards. Some standards do not have explicit grade-level outcomes for certain grades. If reviewers found evidence that a standard was addressed, they provided a rating.

Health Ed Standards - Full

Curriculum Name	Concepts	Analyze Influence	Access Valid Information	Interpersonal Communication	Decision-making Skills	Goal-setting Skills	Avoid Risk	Advocate for Self or Others
Comp Health Skills (Goodheart)	3.8	4.0	3.3	3.7	3.3	3.0	3.3	3.3
Health (Edgenuity)	3.3	3.0	2.8	3.3	3.3	3.3	3.3	3.3
HealthSmart (ETR)	3.0	3.5	3.3	3.8	3.8	3.0	3.3	3.3

Figure 7. Heat map showing how well reviewers felt the materials addressed Washington state health education academic learning standards.

This heat map can help teachers understand where supplementation may be needed to address a particular standard. The numbers in the heat map show the average rating from all reviewers for a title/standard combination. Strongly disagree is coded as 1, Disagree as 2, Agree as 3, and Strongly Agree is 4. Most of the curricula fully addressed all standards. Historically, Goal Setting Skills was rated lowest among the standards across all curricula. While still lower than other standards overall, this year’s materials showed an improvement in the ratings for Goal Setting Skills.

4.2 Curriculum Design

The Curriculum Design rubric has multiple scales. Detailed results are shown below.

4.2.1 Legislative Requirements

The scale items for Washington Sexual Health Education Legislative Requirements include:

1. Materials are medically and scientifically accurate.
2. Materials are age- and developmentally appropriate.
3. Materials are inclusive of all students, using language and strategies that recognize all members of protected classes.
4. Materials include information about abstinence and other methods of preventing unintended pregnancy and sexually transmitted diseases, neither to the exclusion of the other. *(Not developmentally appropriate for K-5 except for required HIV prevention instruction covered below. Select N/A for K-5 materials.)*

For materials used for HIV Prevention Education: *(Not required in grades K-4. Select N/A for K-4 materials.)*

5. Materials address HIV/AIDS, its transmission, and its prevention.
6. Materials include behaviors that place a person at risk of contracting HIV and methods to avoid such risk.

Reviewers selected Strongly Disagree, Disagree, Agree, or Strongly Agree for each item. In some instances, reviewers selected Not Applicable depending upon the context.

Legislative Requirements - Full

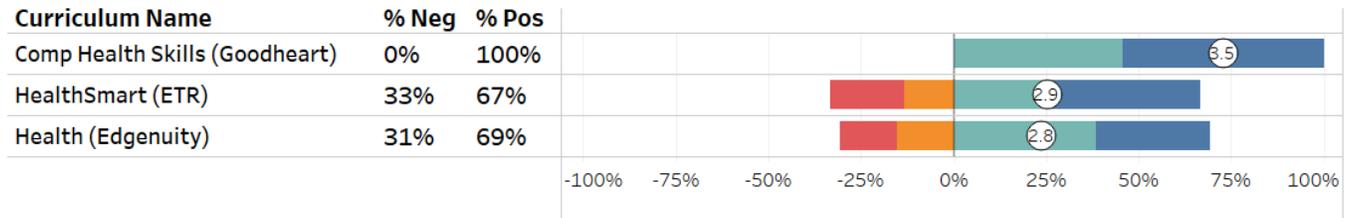


Figure 8. Legislative Requirements results for all full curricula.

4.2.2 Bias Free Materials

Items for the Bias-free Materials scale include:

1. Character traits such as courage, leadership, intelligence, integrity, etc. are distributed among diverse groups (genders/gender identities; races/ethnicities/cultures/tribal citizens; persons with disabilities; sexual orientations)
2. Intimate and family relationships are presented in a variety of ways and are not limited to heterosexual, same-race, same ability status, or traditional nuclear family configurations.
3. Materials use inclusive language, and are free from the language of racism, sexism, ableism, homophobia, and transphobia.
4. Oversimplified generalizations, stereotypes, and images of groups are avoided. People of all groups are presented in a variety of dress and activities, not just associated with the group’s traditional or historical roles or culture.

Bias-free Materials - Full

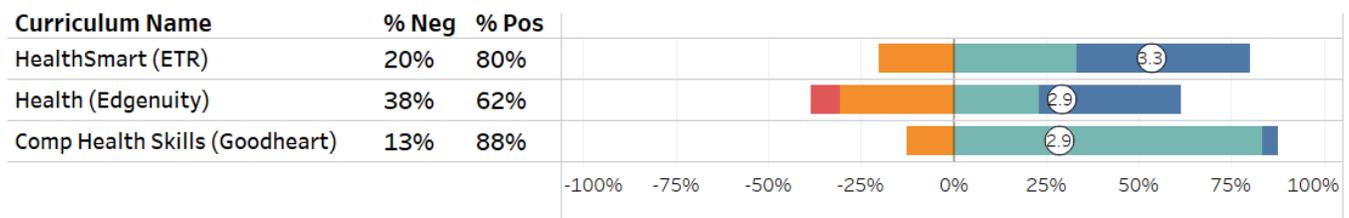


Figure 9. Bias-free Materials results for all full curricula.

4.2.3 Curriculum Design

Items for the Curriculum Design scale include:

1. The design, graphics, and language are engaging and current.
2. Quality student materials, such as texts, assessments, handouts, and audiovisuals are provided.
3. Helpful teacher guidance and teaching aids are provided.
4. Digital materials are consistent with the learning objectives and scope & sequence of the program, are easy to access, and incorporate updates as needed.

Curriculum Design - Full

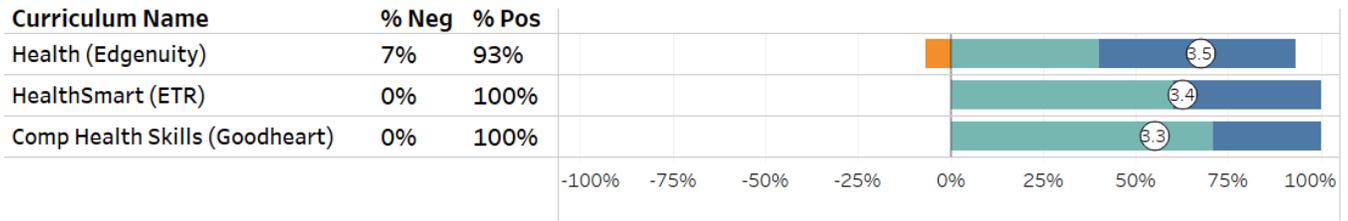


Figure 10. Curriculum Design results for all full curricula.

4.2.4 Learning Objectives

Items for the Learning Objectives scale include:

1. Learning objectives are clearly written and are measurable.
2. Learning objectives address important concepts and skills that support healthy behavioral outcomes.
3. The learning objectives address cognitive, affective, and skills domains.
4. Lesson plans include learning objectives, prerequisites, aligned activities, assessment, additional resources, and closure.

Learning Objectives - Full

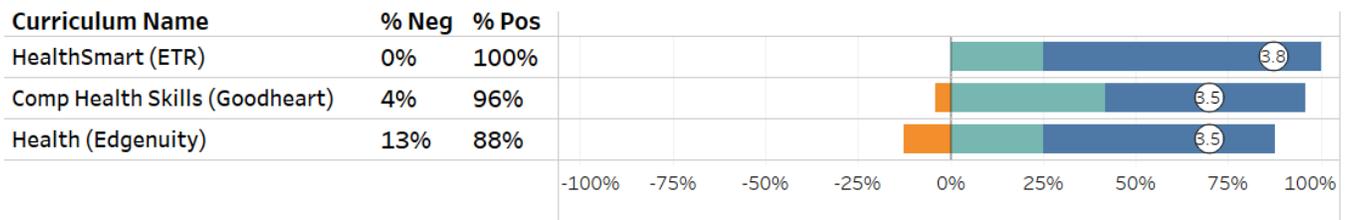


Figure 11. Learning Objectives results for all full curricula.

4.2.5 Teacher Guidance & Preparation

Items for the Teacher Guidance & Preparation scale include:

1. Background information is provided to assist the teacher, including assistance to set up conversations with students on the topics.
2. Clear, step-by-step procedures are provided to implement the curriculum.
3. Essential learning materials, handouts, and other instructional tools are provided to reduce teacher preparation time.
4. Guidance is provided to help the teacher adapt materials or differentiate instruction based on a variety of students' learning needs including the needs of English Learners.

Teacher Guidance & Prep - Full

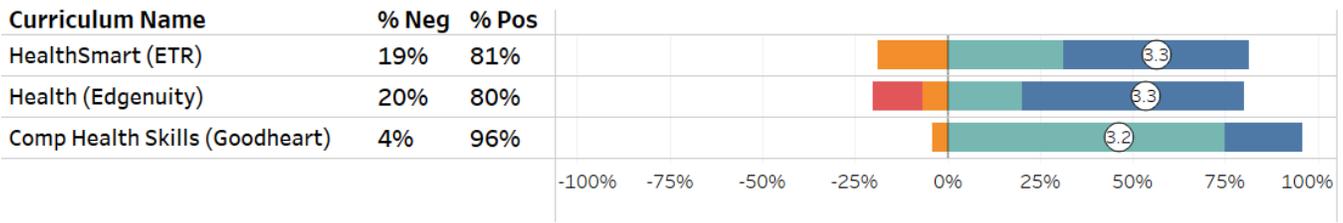


Figure 12. Teacher Guidance and Preparation results for all full curricula.

4.2.6 Instructional Strategies & Materials

Items for the Instructional Strategies & Materials scale include:

1. Instructional strategies use interactive and/or experiential methods.
2. Instructional strategies are culturally responsive and diverse.
3. Instructional strategies are developmentally appropriate.
4. Instructional strategies provide learning opportunities outside of the classroom, such as family or community activities.

Instructional Strategies - Full

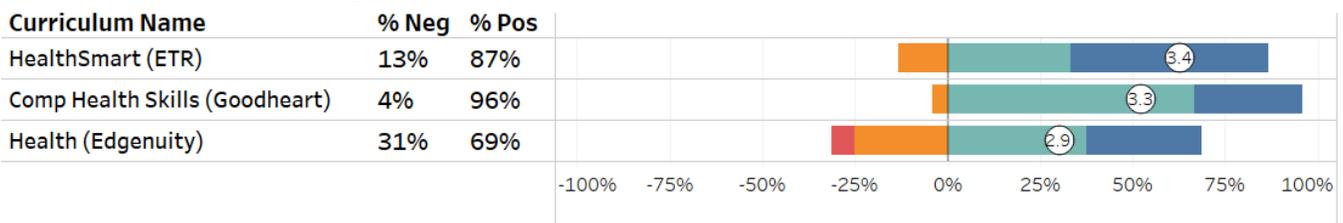


Figure 13. Instructional Strategies and Materials results for all full curricula.

4.2.7 Teaching Health Skills

Items for the Teaching Health Skills scale include:

1. Each lesson plan reinforces the one before it and sets the stage for the next one.
2. Guidance is provided to model or demonstrate health skills.
3. Teaching strategies are provided to guide students’ in-class and independent skills practice.
4. Clear criteria are included to provide feedback to students.

Teaching Health Skills - Full

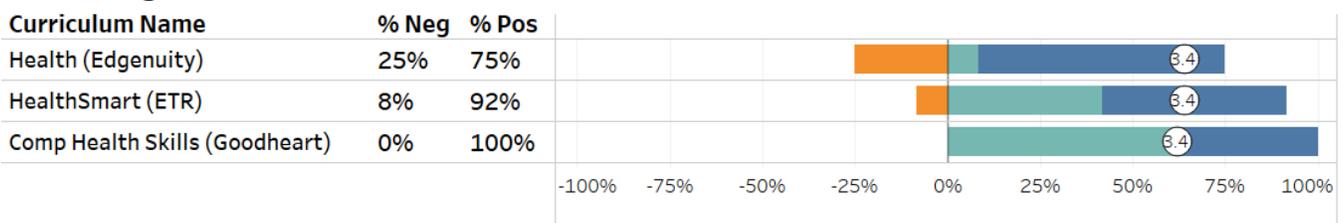


Figure 14. Teaching Health Skills results for all full curricula.

4.2.8 Student Assessment

Items for the Student Assessment scale include:

1. A variety of assessments are provided to measure students’ knowledge acquisition and skill performance.
2. Criteria are provided to help assess student learning.
3. Opportunities for students to assess their own progress and understanding are provided.

Student Assessment - Full

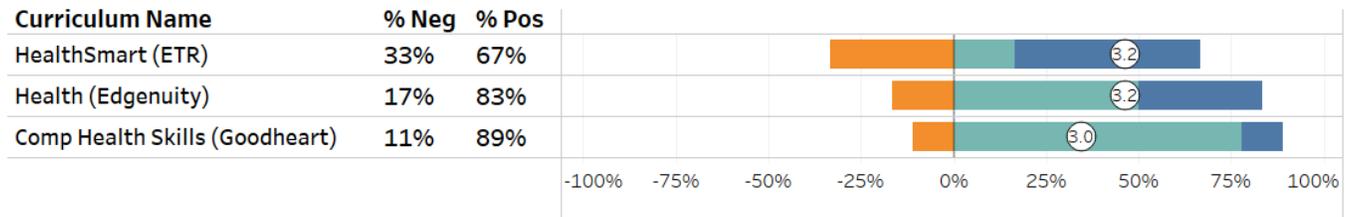


Figure 15. Student Assessment results for all full curricula.

4.2.9 Promoting Healthy Norms

Items for the Promoting Healthy Norms scale include:

1. Opportunities for peer-to-peer activities are provided.
2. Activities designed to influence the behavior of others are included.
3. Activities designed to counter student perceptions that many of their peers engage in unhealthy or risky behaviors are provided.
4. Strategies to actively engage parents, guardians, and caregivers in promoting healthy values and behaviors are included.

Promoting Healthy Norms - Full

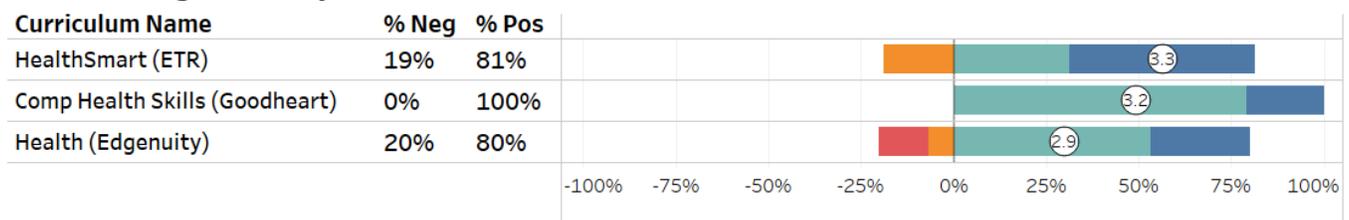


Figure 16. Promoting Healthy Norms results for all full curricula.

4.3 Medical and Scientific Accuracy

The updated Accuracy Analysis scale was used to evaluate medical and scientific accuracy. One or two independent reviewers with clinical expertise assessed each full curriculum for medical and scientific accuracy and provided comments related to their review.

Items for the 2023 Accuracy Analysis scale include:

1. The curriculum uses accurate and appropriate terminology, considering the intended age group.

2. Data, information, and sources of information are up to date.
3. Data is medically accurate and represented accurately in charts, graphs, and written text.
4. Statements of fact are based on data and sound science rather than anecdotal evidence or subjective opinion.
5. Written materials and conclusions accurately represent appropriate and current data.
6. Materials avoid distorting, exaggerating, or understating risk or prevalence.
7. Sources of data are clear and credible.

Accuracy Analysis - Full

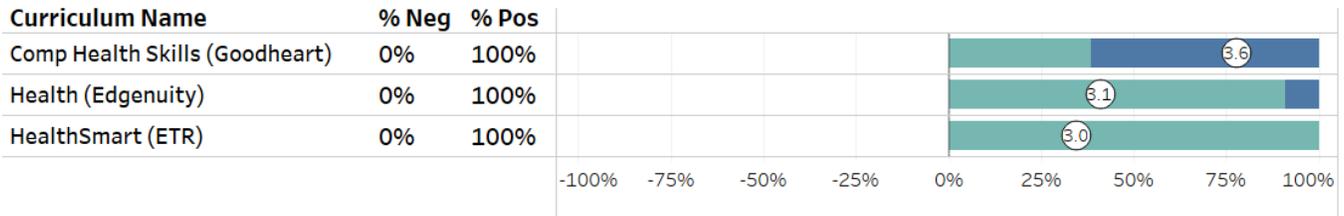


Figure 17. Accuracy analysis average score from medical/scientific accuracy reviewers.

All the full titles reviewed in 2023 had 100% positive scores for accuracy analysis. See the reviewer comments in the appendix for additional detail.

4.4 Reviewer Recommendation

Items for the Reviewer Recommendation scale include:

1. The instructional materials are easy to understand, appealing, and appropriate for the intended audience.
2. I would use this material in my classroom.

Reviewer Recommendation - Full

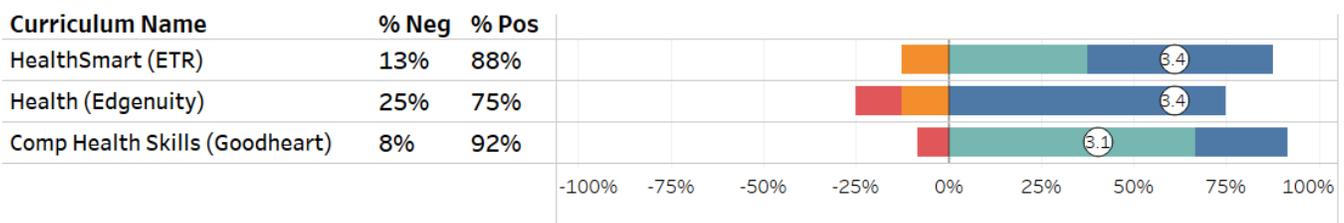


Figure 18. Reviewer Recommendation results for all full curricula.

5 Supplemental Results

In addition to the comprehensive programs described above, the 2023 review team examined ten supplemental materials. The results from their supplemental review are shown below.

Supplemental materials are typically a single unit or topic, and often do not have the range of instructional supports found in a comprehensive curriculum.

Reviewers used an evaluation tool that was based upon the Washington Sexual Health Education curriculum review instruments. It contained abbreviated rubrics for:

- Washington Health Education Standards
- Washington Sexual Health Education Legislative Requirements
- Preliminary Considerations
- Recommendation

Most of the supplemental materials reviewed in 2023 focused on puberty.

Table 2. Supplemental products reviewed.

Publisher	Title	Materials Type	Grade Level
Marsh Media	A Boy's Guide to Growing Up	Digital video	4-8
Marsh Media	A Girl's Guide to Growing Up	Digital video	4-8
Marsh Media	AIDS Facts for Kids	Digital video	5-8
Proctor & Gamble	Always Changing (co-ed)	Digital video	4-8
One Love	Door 3	Digital video	9-12
Marsh Media	Just Around the Corner for Boys	Digital video	4-6
Marsh Media	Just Around the Corner for Girls	Digital video	4-6
One Love	MVP	Digital video	9-12
National Council of Independent Living	Sex Ed for People with I/DD	Digital video	6-12
Marsh Media	We're Growing Up	Digital video	5-8

5.1 Subject Areas Covered

Figure 19 shows the subject areas addressed by each of the supplemental products.

Subject Area Heat Map

Curriculum Name	Anatomy and Physiology, Reproduction and P..	Growth & Development/ Puberty	Self-Identity	Pregnancy/STD Prevention	Healthy Relationships
A Boy's Guide to Growing Up	0%	100%	0%	0%	0%
A Girl's Guide to Growing Up	40%	100%	0%	0%	0%
AIDS Facts for Kids	0%	0%	0%	100%	25%
Always Changing (co-ed)	80%	100%	20%	0%	20%
Door 3	0%	0%	25%	0%	100%
Just Around the Corner for Boys	80%	100%	0%	0%	0%
Just Around the Corner for Girls	67%	100%	0%	0%	0%
MVP	0%	0%	0%	0%	100%
Sex Ed for People with I/DD	83%	100%	50%	83%	83%
We're Growing Up	80%	100%	0%	0%	0%

Percent Checked

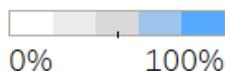


Figure 19. Percent of reviewers who indicated the subject area was covered for a title.

Three of the supplemental materials reviewed in 2023 contained content about Healthy Relationships. Within the broad context of Healthy Relationships, there were several sub-topics, including:

- Affirmative Consent
- Bystander Training
- Communication Skills
- Development of Meaningful Relationships
- Understanding Influences of family, peers, community, and the media

Healthy Relationships Subject Detail

Curriculum Name	Affirmative Consent	Bystander Training	Communication Skills	Development of Meaningful Relationships	Understanding Influences
A Boy's Guide to Growing Up	0%	0%	0%	0%	0%
A Girl's Guide to Growing Up	0%	0%	0%	0%	0%
AIDS Facts for Kids	0%	0%	0%	0%	0%
Always Changing (co-ed)	0%	0%	0%	0%	0%
Door 3	0%	50%	50%	75%	25%
Just Around the Corner for Boys	0%	0%	0%	0%	0%
Just Around the Corner for Girls	0%	0%	0%	0%	0%
MVP	0%	25%	100%	75%	75%
Sex Ed for People with I/DD	83%	0%	50%	33%	0%
We're Growing Up	0%	0%	0%	0%	0%

Percent Checked

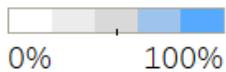


Figure 20. Healthy relationship subtopics covered with supplemental materials.

5.2 Health Education Standards Covered

Figure 21 shows the percent of reviewers who indicated the health education standard was covered in the supplemental product. Supplemental materials, by definition, address very specific topics, and are typically of very short duration. School districts should not rely on supplemental materials to provide comprehensive coverage of a health education academic learning standard.

Health Ed Standards - Supplemental

Curriculum Name	Concepts	Access Valid Information	Analyze Influences	Interpersonal Communication	Decision-Making	Goal-Setting	Health Behaviors	Advocate for Self and Others
A Boy's Guide to Growing Up	100%	0%	100%	25%	50%	25%	50%	0%
A Girl's Guide to Growing Up	100%	0%	100%	20%	0%	0%	20%	0%
AIDS Facts for Kids	100%	25%	100%	25%	50%	0%	50%	25%
Always Changing (co-ed)	100%	20%	100%	0%	20%	0%	40%	0%
Door 3	50%	25%	50%	100%	25%	0%	25%	75%
Just Around the Corner for Boys	100%	0%	100%	0%	20%	0%	40%	0%
Just Around the Corner for Girls	100%	0%	100%	0%	17%	0%	33%	0%
MVP	75%	50%	75%	100%	75%	0%	50%	50%
Sex Ed for People with I/DD	100%	17%	100%	17%	17%	0%	17%	0%
We're Growing Up	100%	20%	100%	0%	0%	0%	20%	0%

Percent Subject..



Figure 21. Percent of reviewers who felt a health education standard was covered for a supplemental product.

5.3 WA Sexual Health Education Legislative Requirements

The supplemental evaluation instrument used very similar scales for the CSHE Act and AIDS Omnibus Act consistency as the full curriculum review.

The scale items for Legislative Requirements include:

1. Materials are medically and scientifically accurate.³
2. Materials are age- and developmentally appropriate.
3. Materials are inclusive of all students, using language and strategies that recognize all members of protected classes.

³ This item represents the opinion of the reviewer. See the Accuracy Analysis section for a more in-depth review of the supplemental materials by health care experts. School districts using these rubrics should not rely solely on this item to evaluate medical and scientific accuracy. A full medical and scientific accuracy review of the materials should use the Accuracy Analysis Rubric and should be completed by a person or people with deep clinical expertise in the content area. This could be WA Department of Health, or a team including county health department, family planning clinic, or university clinical staff for example.

4. Materials designed for a specific group of students reflect the group in a bias-free and culturally responsive manner.
5. Materials include information about abstinence and other methods of preventing unintended pregnancy and sexually transmitted diseases, neither to the exclusion of the other. *(Not developmentally appropriate for K-5 except for required HIV prevention instruction covered below. Select N/A for K-5 materials.)*

For materials used for HIV Prevention Education: *(Not required in grades K-4. Select N/A for K-4 materials)*

6. Materials address HIV/AIDS, its transmission, and its prevention.
7. Behaviors that place a person at risk of contracting HIV and methods to avoid such risk are included in the materials.

Reviewers selected Strongly Disagree, Disagree, Agree, or Strongly Agree for each item. In some instances, reviewers selected Not Applicable depending upon the context.

Legislative Requirements - Supplemental

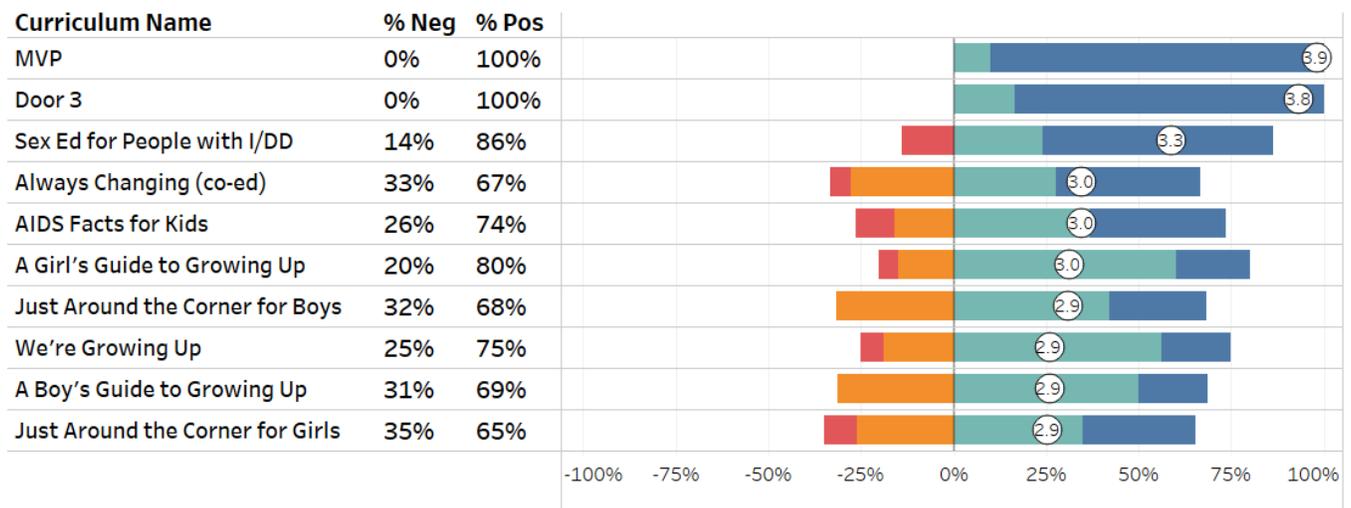


Figure 22. Results for supplemental products for consistency with state legislative requirements related to the CSHE Act and the AIDS Omnibus Act.

5.4 Preliminary Considerations

The Preliminary Curriculum Considerations contain two items, Acceptability and Instructional Supports. Both items are shown separately in this section.

Acceptability Analysis: The material is appropriate for all students in the intended audience (inclusive), avoids oversimplified generalizations and stereotypes about groups of people, avoids promoting personal or religious values, and presents intimate and family relationships in a variety of ways. *(note: OSPI's [Screening for Biased Content in Instructional Materials](#) tool is available for more in-depth bias reviews)*

Instructional Supports: Learning objectives, teacher guidance, and formal or informal student interaction and assessment supports are included.

Preliminary Considerations - Bias-free, Avoids Promoting Values

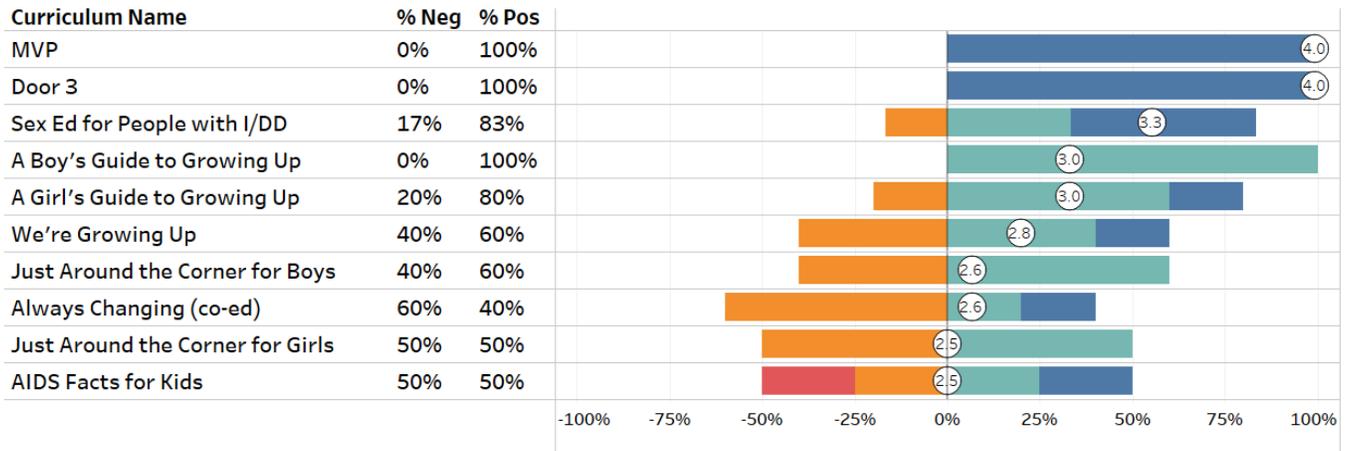


Figure 23. Acceptability analysis results for supplemental materials.

Many supplemental products contain instructional supports to assist educators in implementation. For some supplemental products, their message is so simple and direct that they may not need or include instructional supports, but they can still be high quality additions to a comprehensive sexual health education program. The chart in Figure 24 shows the ratings for instructional supports.

Preliminary Considerations - Instructional Supports

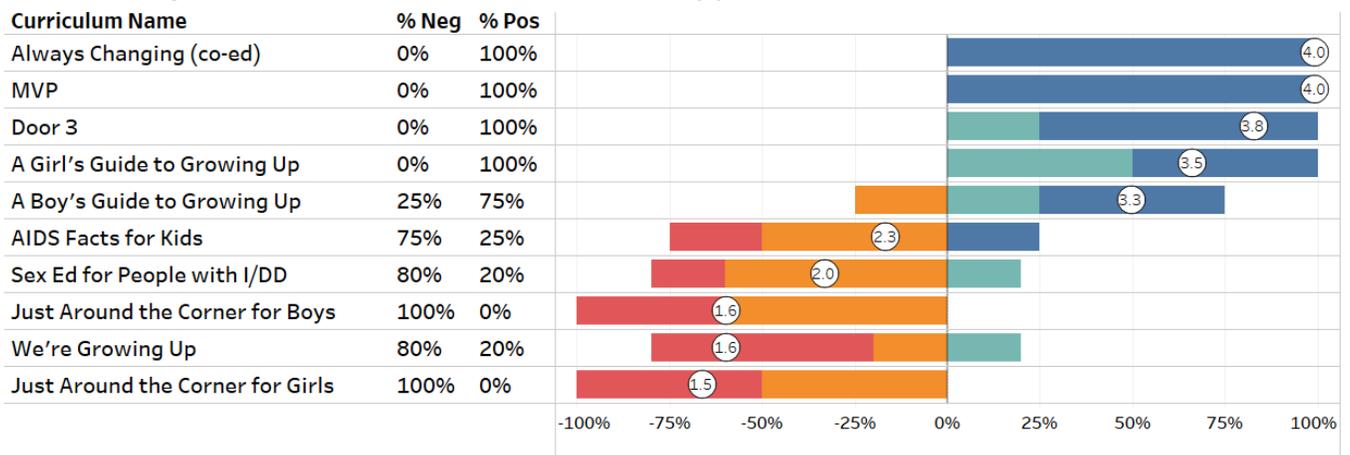


Figure 24. Degree to which instructional supports are included.

5.5 Reviewer Recommendation

Reviewers rated the supplemental materials on three items related to their overall opinion of the product.

1. The supplemental material is high quality, including audio and visual quality.
2. The supplemental material is engaging, appealing and appropriate for the intended audience.
3. I would use this supplemental material in my classroom.

Reviewer Recommendation - All

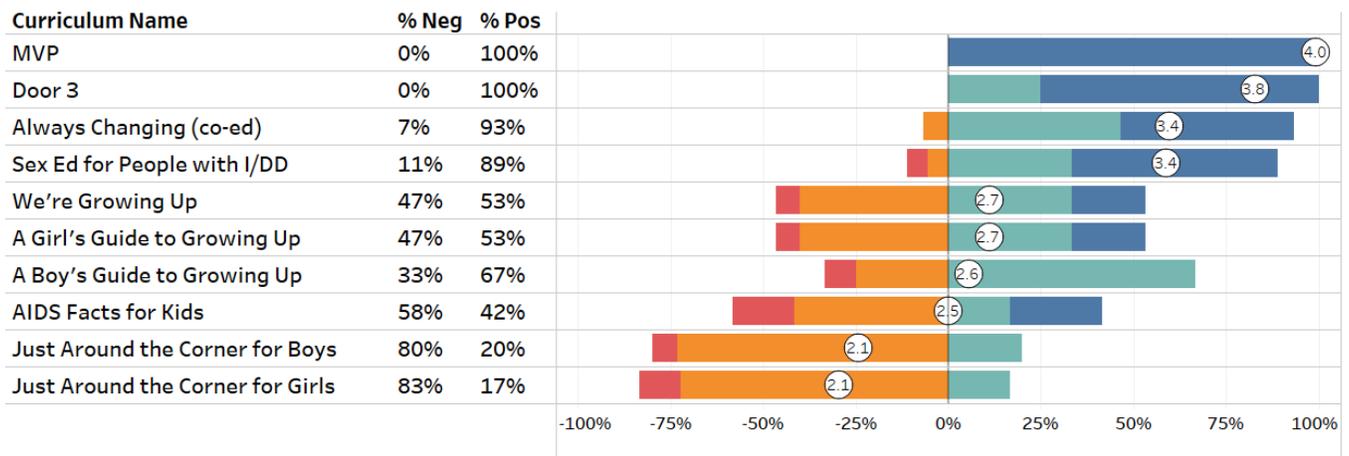


Figure 25. Reviewer recommendations for supplemental products.

5.6 Supplemental Materials – Accuracy Analysis

Medical accuracy reviewers used the Accuracy Analysis scale to evaluate supplemental products.

Items for the 2023 Accuracy Analysis scale include:

1. The curriculum uses accurate and appropriate terminology, considering the intended age group.
2. Data, information, and sources of information are up to date.
3. Data is medically accurate and represented accurately in charts, graphs, and written text.
4. Statements of fact are based on data and sound science rather than anecdotal evidence or subjective opinion.
5. Written materials and conclusions accurately represent appropriate and current data.
6. Materials avoid distorting, exaggerating, or understating risk or prevalence.
7. Sources of data are clear and credible.

No issues regarding medical or scientific were identified in the 2023 review of supplemental materials.

Accuracy Analysis - All

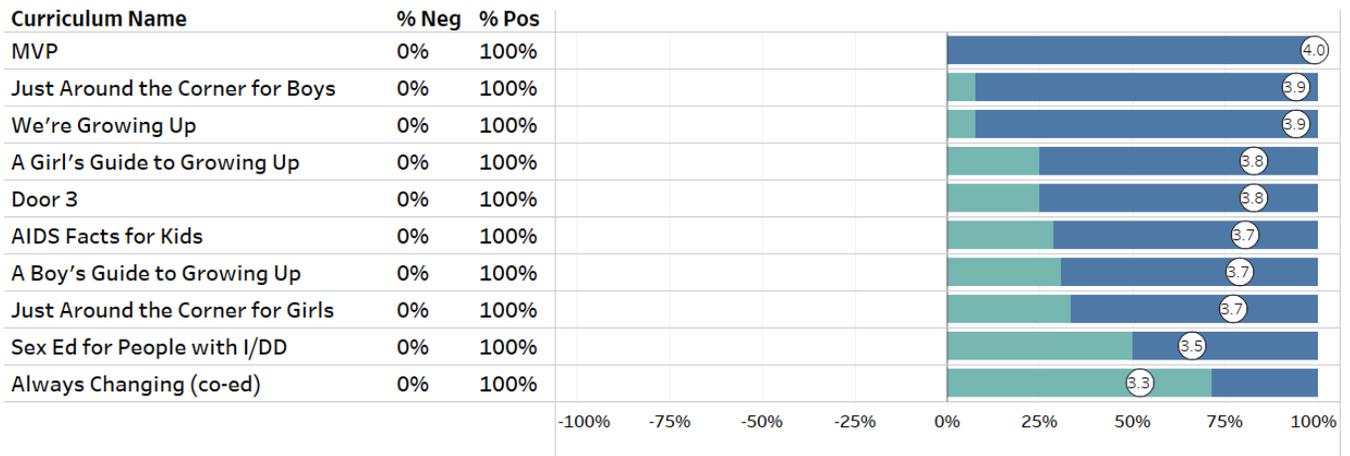


Figure 26. Average accuracy analysis scores by medical accuracy reviewers.

Appendix A. Data Collection and Analysis Methods

Reviewers used electronic survey forms to record comments, scores, and evidence. The scores were extracted and transferred to a CSV text file for analysis and data visualization using Tableau.

Most of the data collected used a 4-point Likert scale (Strongly Disagree, Disagree, Agree, Strongly Agree) to address questions about their overall evaluation of the product. The responses were assigned values from 1 to 4 for analysis. The percentage of reviewers selecting a particular response was reported. An average value was calculated for an item, scale, or overall to allow for simple comparison between materials. The data was treated as nominal for the purpose of reporting a blended score from multiple reviewers.

For the supplemental materials, two “check all that apply” scales were used in addition to the Likert scales described above. Users selected one or more subject areas from a list, and they also selected one or more health education standards based on what the supplemental material covered. For check all that apply data, results were shown in a heat map that indicated the percent of reviewers who selected the item for a particular set of materials.

There were a few instances where the data was re-coded. For the supplemental material, reviewers were instructed to select “Not Applicable” (N/A) when materials did not cover a specific topic related to the item being evaluated. For example, if a reviewer is evaluating a 5-minute video about bullying that does not address HIV/AIDS prevention, then the items about HIV/AIDS prevention should be marked as “N/A”.

Most reviewers selected “N/A” as appropriate. In a few instances, the reviewers selected “Strongly Disagree” instead of “N/A”.

A rating of N/A is neutral and has no effect on the overall rating of a product. A rating of “Strongly Disagree” does have a negative impact on the overall rating.

If the reviewer clearly indicated that HIV/AIDS Prevention was not covered in the materials, their response to the HIV/AIDS questions were re-coded from “Strongly Disagree” to “N/A” to avoid unfairly rating a product that never intended to cover HIV/AIDS.

Readers are encouraged to look at the reviewer comments in the appendix to gain additional insight on the materials reviewed.

Appendix B. Acknowledgements

We are indebted to the volunteers who thoughtfully assisted in conducting the comprehensive sexual health education instructional materials review. The panel members endeavored to apply the scoring criteria objectively and with a commitment to providing a quality resource to school districts looking for guidance. They devoted many days out of their busy schedules to do this work. We are grateful for their efforts. In a few instances, reviewers were unable to complete all their assigned reviews. When we were unable to find a substitute reviewer, OSPI staff reviewed three titles to ensure each had a minimum number of readings.

Sexuality Education Curriculum Review Panel Members

Name	Organization
Ann Richey	University of Washington School of Public Health graduate student
Briana Gulas	Parent and Former Educator
Caitlin Yoes	Neighborcare Health
Danielle Bowlden	Mukilteo School District
Isabella Kent	Public Health – Seattle & King County
Jada Wittow	Neighborcare Health
Jill Collier	Lake Washington School District
Katie Leigh	Bainbridge High School
Lisa "Page" Page	Common Goodness Project
Lisa Olson	Parent, Pierce Co. private school
Mason Culbertson	University of Puget Sound
Nikki Van Wagner	Program Consultant, OSPI Sexual Violence Prevention ⁴
Sarah Kim	Bellevue School District
Taylor Allen	Western New Mexico University School of Social Work graduate ⁵
Vicki Horton	Retired Educator
Bob Lutz, MD	Washington State Department of Health
Lisa Baldoz	Washington State Department of Health
Michael Barnes	Washington State Department of Health

OSPI Staff

Laurie Dils, MSW, Associate Director – Secondary Health & Sexual Health Education

Taylor Allen, MSW, Administrative Assistant, Secondary Health & Sexual Health Education

Consultant

Porsche Everson, MBA, Relevant Strategies

⁴ This reviewer works for the Office of Superintendent of Public Instruction but did the review on her own time, not as a contractor or employee.

⁵ This reviewer works for the Office of Superintendent of Public Instruction but did the review in her capacity as listed.

Appendix C. Reviewer Comments

Reviewer comments have been lightly edited for grammar, spelling, length, and scope. Comments represent the opinion of the reviewer, not OSPI or DOH.

Full

Comprehensive Health Skills (Goodheart)

Reviewer 306

This curriculum is very thorough and covers all the needed and required topics. The workbook, handouts, and companion website provide lots of different resources and options for students and opportunities for teachers to pick and choose what might work best for their classes. While this curriculum does use some gender-neutral language, there are some areas where it could be more inclusive in the language used. The section on sexuality and gender covers important topics, but the ideas about there being a range and spectrum of gender and sexual orientation and identity could be worked better in throughout the curriculum. Some of the case studies do include non-binary and transgender people in them, which is good, but it could be better in this aspect.

It does include some information about birth control and pregnancy prevention other than abstinence, but really focuses on abstinence and encourages young people to wait to engage in sexual activity, which may not be realistic. All scenarios and case studies regarding young people engaging in sexual activity include things like getting STIs, or other negative consequences and seem to be coming from a fear-based approach to young people and sex.

Overall, this is a comprehensive curriculum that is age appropriate, with lots of detailed information and activities to give students the opportunity to engage in critical thinking, and practice decision making and communication skills as well.

Reviewer 307

The curriculum is comprehensive, has up to date information, and is easy for an instructor to use. There is a companion website with videos, flash cards, vocabulary games, and online quizzes available. Some of the online materials are available in Spanish, but that is the only alternate language. The curriculum includes a variety of family types in its' examples and tries to be inclusive. There is a wealth of good information; however, it would be difficult to cover it all in a typical semester health class. Unit 6 covers Healthy Relationships. A variety of relationship types are covered and ways to determine the quality of those relationships are addressed. Bullying, cyberbullying, abuse, neglect, and other types of violence are addressed with information given as to how to prevent and respond to these situations. How to respond as a victim and bystander is addressed. Unit 7 covers child development, puberty, and other stages of life. It does a good job covering STI's and HIV in a comprehensive, inclusive manner. Unit 8 does a good job covering sexuality including lessons on biological sex, gender, gender roles, gender identity, and sexual orientation. Material is presented in a non-judgmental, informative way. Sexting is covered. The physical, emotional, and social consequences of being sexually active are covered. Refusal skills and affirmative consent have quality lessons. All in all, this is a comprehensive, updated middle school curriculum.

Reviewer 308

This is a well laid-out curriculum. The companion website, student workbook, and handouts give options for different learners or the ability to switch up styles for different units. Overall, it is a good, comprehensive resource.

Reviewer 309

It appears that some new sections have been added to address support for LGBTQ+ students and to combat homophobia and transphobia. However, other sections continue to use outdated language and assumptions.

Students questioning or exploring their gender identity or sexual orientation are described as “confused.” Gender diverse identities are not mentioned in main section on gender identity.

Use of “opposite” to describe sex and gender assume only two exist. “Different” is more appropriate given the diversity of gender and biological sex.

Intersex bodies are presented as disordered rather than as natural human variation. Only male and female offered as biological sexes. In chromosome discussion, XXY is referred to as male, not as intersex.

Case study, “Aidan's 'Perfect' Relationship” reads as shaming and reinforces stigma associated with STIs.

A heavy emphasis on abstinence with no discussion of planning or safeguards, such as condoms, to prepare when intentions to remain abstinent change in the moment.

Reviewer 311

This is a very promising curriculum to use. It provides quality content that is inclusive of many contemporary and relevant topics. The teacher resources included are easy to navigate. The textbook for students itself is what was so impressive to me. The inclusion of sexuality and identity formation, sexual violence awareness and prevention, and healthy relationships is huge, especially in this age group. I do wish the text had discussed the existence of puberty suppressors or “puberty blockers” or discussed the transition from old terms to new terms and the nuances therein more, using intersex has changed to using disorders of sex development (some folks in this community prefer differences of sex development for instance.) The text is well-written and more comprehensive than many other curricula on the same topic that this reviewer has reviewed over the years. I would recommend this curriculum for teachers to use. I would also still encourage them to discuss things within and outside of the text with their classes. This curriculum still has some room to improve (e.g., paying attention to trans-inclusive language, particularly non-binary language) however, over all the curriculum is very high quality.

Reviewer 322

Units 6, 7, and 8 contain age-appropriate, science-based, and well-written information on an impressive breadth of topics related to healthy relationships, prevention, and sexual and social wellness. The curriculum center offers a very large selection of teacher resources and supplemental materials, offering print and online learning and assessment tools. Spanish versions of the text, audio transcripts, and closed captioning make the curriculum more accessible. I am not sure if the materials are fully compatible for text-to-speech. They offer pedagogical tips, including skills-based,

critical thinking, differentiation, health literacy, and cultural responsiveness. There is a clear bias towards abstinence and avoidance as you progress through the reading and accompanying activities. I wish for more discussion opportunity on how youth can healthily explore their growing curiosity around sex and acknowledge more of the potentially positive outcomes from sexual exploration. Overall, the curriculum presents moderately inclusive and bias-free information. I hope authors continue to strive toward better visual and descriptive representation of diverse bodies and wider variety of experiences and mental/emotional relationships to one's changing body and sexuality.

Other notable strengths: - Question & answer/Interview style videos with young actors. - The content feels modern and incorporates online communication/use of smart devices practically and non-judgmentally; covers online relationships, cyberbullying, and the legal/emotional consequences of sexting. - "Develop Your Skills" sections, I found those to offer some of the most critically engaging activities. - Gender-neutral terms are used consistently throughout. - Descriptions of emotional challenges common at different stages of life including grief. - Appreciate the normalization around masturbation. - Included the medical use of hormonal birth control to treat menstrual pain. - There are solid sections on consent (particularly figure 19.25) and preventing sexual harassment. - Inclusion of community-based strategies for prevention, safety, and promoting culture of respect.

Other improvements needed: Graphics and illustrative scenarios depict mostly heterosexual couples and completely omit people with disabilities. - de-stigmatize some language around intersex youth/diversity of sexual development: e.g., replace "unclear biological sex/sexual traits" with "distinctive" or "unique" sex organs or sexual traits - Boundaries and refusal skills are valuable subjects included and I wish they were also applied to non-dating relationships and not only to promote abstinence. Include skills-building around learning and respecting another person's boundaries. - Expand coverage of power differentials in relationships and how to mitigate - Missing dental dams as a form of STI prevention. - Ch 19 overemphasis on the negative consequences of sexual activity and how to resist sexual risk and pressure. I support the goal to delay sexual activity. What troubles me is that these sections make sex sound terribly stressful, which I would not necessarily want to promote. - "Avoiding risky situations" and "responding to sexual assault" sections of 19.3; there are more suggestions to keep oneself from "being" sexually assaulted as opposed to strategies to reduce perpetration; also, the authors do not acknowledge that freezing and passive resistance are common survival responses during sexual assault and rape.

Reviewer 324 (Med/Sci)

Overall, I found the information accurate and well presented; there were some updates needed in data. It was, however, written at a very advanced level and the formatting made it challenging to read - if I found it to be so, this will likely be even more challenging for middle school students.

Health (Edgenuity)

Note: Available through Edgenuity. Published by Carone Learning.

Reviewer 303

Strengths include an easy to navigate website with many accessibility features such as text-to-speech and options for larger font size. Information and assignments addressing boundaries, preventing sexual abuse, and bullying are included.

Shortcomings include minimal background information and guidance for teachers/parents on how to navigate discussions on these topics with students. There is a distinct lack of diverse representation of sexual orientation and gender identity. While some explanation of anatomy is included, it is significantly limited and arguably incomplete. The explanations and visuals of anatomy make it difficult to understand where is being referred to on the body. The use of euphemistic labels such as “bottom” may be confusing to students. The material lacks representation of a variety of family structures, limited only to heterosexual traditional nuclear families. Certain values around sex are specifically promoted, primarily abstaining from sex outside of marriage. For the prevention of HIV and STDs, abstinence is the sole strategy discussed and any others are excluded.

Reviewer 310

I like everything about 4a and 4b. I like the listing of two kinds of boundaries. I would like to see more details in the drugs categories to include fentanyl and how pills look like they are real. The kids need to know that drug dealers make their own pills look real. They need to know that mixing happens, and that one pill could end your life. I like how peer pressure is detailed in this program. Peer pressure is mostly from your very own friends. I would like to see the lesson mention how often friends are the pressure makers. I did see the assignment mentioned “your friend” as being the one doing the pressuring. I like how the class teaches students to pay attention to food labels. I like how this program differentiates gang vs group. I would like to see what the classrooms use to go with this program. If the teachers are supplementing, then we cannot review the supplementing contents to learning. This is a very good program. It's very basic and does not use words that would single out any group of people.

Reviewer 313

This information was very clear, and easy to review. My only concern would be the amount of online learning needed for this very digital learning technique.

Reviewer 314

Each section of the units appears in same format: Lesson, Brain Exercise/Assignment, Quiz.

This curriculum is offered both as multimedia and as text. It would be possible to modify the assignments presented in a variety of ways to differentiate. For example, a teacher could take a discussion question and use it for whole group discussion, small group discussion, one on one discussion, journaling, and even parent involvement.

At times the information presented in the lessons were duplications of previous lessons. Maybe that is provide familiarity for students between the units, but exact videos were shown in different places. When this happens, I think there is a chance of children losing interest. Specifically, 4A 2.1 and 5A 2.1.

Reviewer 324 (Med/Sci)

There was an occasional inaccuracy e.g., the lungs are smooth muscle, but for the most part, the content was accurate and written at an appropriate level.

HealthSmart (ETR)

Reviewer 307

This is an easy to implement curriculum for elementary teachers who already have so much on their plate. Materials are easy to use, clear and engaging. I would use this in my classroom if I taught this age group.

Reviewer 310

In grade 3, I think it's important to teach about the harm of bullying and would like to see all schools really focus on prevention. This program helps teach about bullying to prevent it from occurring. I would like to see a different word choice for image 15D; "convince others" seems a bit vague. I also thought image 16D was a bit creepy looking...the girl sitting with her skirt showing her bare legs.

In grade 4 review, I would like to see different word choices for materials in Lesson 26. "Things that are Hard" and "Things that are Good" need to be changed in my opinion. Just stick to using the words Difficult and Positive as shown in Teacher Resources of Lesson 26.

In grade 5 review, I think lesson 7 needs more reasons for why kids bully. For lesson 14, I like the modern approach of discussing how media affects a child and how media can be cruel. In lesson 33, I like the way the lesson mentions how your family wants you to make good choices but maybe add that our community wants us all to make good choices too.

Lessons 34 and 35 briefly mention gender identity. This makes me uncomfortable. For lessons 34 and 35, I do not see the need to have an alternative lesson. I worry that at this young age, you may be encouraging gender identity exploration by offering the gender-neutral alternative.

Lesson 36 briefly mentions gender identity. *"This lesson emphasizes the importance of respecting self-expression in oneself and others. Students read stories about kids their age and discuss whether they think the character is a boy or a girl or unclear and why. They learn terms related to gender roles and expression and discuss why it is important to respect the different ways different people may express themselves around gender. After revisiting a story about a child who is bullied due to gender expression, they create a text message campaign to encourage peers to accept and respect diversity."* This topic of gender is political these days. I would like to see politics and gender identity kept out of schools. If you must have these topics in schools, then they need to be provided with full consent given from parents.

Lesson 37 is about abstinence. When I first read this lesson, a phrase caught my eye, "does not mean give something". I would like to see this part removed because it might confuse someone. Here is the section I am referring to: *"Abstaining, being abstinent, or practicing abstinence all mean the same thing. Abstinence is an important idea for kids when it comes to sexual activity. Abstinence means not having sex and not expressing your sexuality in inappropriate ways. Some people think abstinence means giving up something. The truth is that abstinence gives you self-respect, future choices, and many other things."* Maybe make this clearer. Also, be clearer on the benefits of your health from abstaining from sex. Less likely to have certain cancers.

Supplemental Lesson: What is HIV? is just too much of one thing. I would like to see students know more about the fact that many diseases exist and how important it is to prevent them. You can detail how diseases affect the future of the body. i.e., cancers come from HPV. Permanent use of medications will result from HIV, etc. I would like to see more focus on prevention so that the student can choose to be healthy.

Overall, I think the lessons are good. I know that we don't get to see everything because schools supplement. With no supplements, I would teach these lessons in my classroom with the exceptions to the lessons I discussed above. I would not teach the sections I disagree with.

Reviewer 313

This is a great sex ed tool. It is inclusive of all people/groups and easy to follow. I support this material without hesitation.

Reviewer 314

This curriculum offers a rich variety of teacher and student resources. For example, there are power points, graphics, scope and sequence, alignments to standards, journal prompts and a variety of student activities to name a few.

Also, of note are lessons in grade five (Lessons 34, 35 and 36) that separately teach puberty from the boys' perspective, the girls' perspective. A gender-neutral lesson on puberty is offered as well.

Reviewer 326 (Med/Sci)

Very little detail or data is provided in this very general health curriculum. One statement of concern noted, that is subjective vs. factual: "abstinence means not having sex and not expressing your sexuality in inappropriate ways" - given that "inappropriate" is not defined, this seems values-laden vs. factual. The HIV lesson contains insufficient information to meet WA State AIDS Omnibus Act requirements (e.g., no mention of condoms, PrEP or Pep). I did not see any sources of data listed in the curriculum, though very little data was included.

Supplemental

A Boy's Guide to Growing Up

Reviewer 303

Strengths include explaining private body parts with proper anatomical terms in a non-shaming way, including some information and skills for preventing sexual abuse. The language throughout is simple and easy to understand. The teacher's guide includes objectives and a variety of activities that can be chosen from or modified to meet student needs. It also includes actionable guidance for creating a positive learning experience for students, as well as important background information such as the higher likelihood of sexual abuse in youth with intellectual disabilities.

Shortcomings include a lack of subtitles for the video, posing an accessibility issue for some students. While anatomy, wet dreams and erections are covered, there's no information about reproduction and pregnancy, so additional material would be needed to cover these topics. While

they include information for preventing sexual abuse, there isn't explicit messaging explaining to students that any inappropriate behavior toward them is not their fault.

Reviewer 304

This material is specifically developed for students with intellectual or developmental disabilities. You can see this in certain directions that allow for differences in ability, like “the goal for students who are verbal...” and “for lower-ability students...”. Puberty and bodily changes are presented in a positive, shame-free light, and a consideration note reminds teachers that various families have differing levels of openness around body/puberty language. The materials seem easy to teach (worksheets and specific lesson plans are included).

Unfortunately, puberty is completely decontextualized from reproduction or sexual activity, thus indirectly de-sexualizing all individuals with I/DD, and thus underpreparing them for any sexual feelings, urges, or actions that they may experience. The gender binary is also not very inclusive (see the title). The only real difference in the content is the Girl's Guide offers instructions on how to use a menstrual pad, and the Boy's Guide explains that nocturnal emissions are normal. These two curricula could easily be blended to affirm all gender identities, and to emphasize the need for respect for various bodies and identities, but the designers chose to miss that opportunity in favor of the gender binary and segregation. The teaching materials/worksheets included are not very in-depth.

Reviewer 305

As previously stated with the We're Growing Up curriculum, although the production quality isn't poor, it is not representative or reflective of youth from this generation (feels dated a few decades). I believe with modern updates and a more trauma informed approach, it could be updated to be successful as puberty education, but not comprehensive sex ed. If it is meant for students with IDD, there may be a need for more tailored content to match folks with disabilities, or a broader spectrum of understanding and experiences (i.e., a 3rd grader and an 8th grader will need different information). The teacher guide is very clear and would be helpful to me as a facilitator. It would be helpful to have a section of appropriate answers to commonly asked student questions on the topics in the Girl's Guide Teacher's Guide.

Reviewer 306

A Boy's Guide to Growing Up has many strengths. The teacher's guide has a lot of activities that supplement and help reinforce the information in the video and student handbook and give students a chance to practice some skills. The student handbook is a good companion to the video and has the same information in a visual format, providing options for students who are different types of learners. The information in both the video and handbook is presented in a clear and straightforward manner and is thorough on the topics it is intended to cover. One shortcoming is that the visuals are basic in the video, but they are easy to see and follow. Overall, this video, handbook, and teaching guide are useful products for those looking for puberty materials for students with disabilities.

A Girl's Guide to Growing Up

Reviewer 304

This material is specifically developed for students with intellectual or developmental disabilities. You can see this in certain directions that allow for differences in ability, like “the goal for students who are verbal...” and “for lower-ability students...”. Puberty and bodily changes are presented in a positive, shame-free light, and a teachers note reminds teachers that various families have differing levels of openness around body/puberty language.

Unfortunately, to make concepts accessible for a wide range of abilities, it oversimplifies ideas and ignores some important ideas. Puberty is completely decontextualized from reproduction or sexual activity, thus indirectly de-sexualizing individuals with I/DD, and thus underpreparing them for any sexual feelings, urges, or actions that they may experience. The materials seem easy to teach (worksheets and specific lesson plans are included); however, the materials do not look particularly engaging. The video and booklet don't feature any examples of characters making decisions; instead, it's just a narrator stating good ideas. The gender binary is also not very inclusive (see the title).

Reviewer 305

As previously stated with the We're Growing Up curriculum, although the production quality isn't poor, it is not representative or reflective of youth from this generation (feels dated a few decades). I believe with modern updates and a more trauma informed approach, it could be updated to be successful as puberty education, but not comprehensive sexual health education. If it is meant for students with IDD, there may be a need for more tailored content to match folks with disabilities, or a broader spectrum of understanding and experiences (i.e., a 3rd grader and an 8th grader will need different information). The Teacher Guide is very clear and would be helpful to me as a facilitator.

Reviewer 307

This resource is designed for students with mild to moderate disabilities (developmental disabilities or delays, Down syndrome, Autism spectrum disorder, learning disabilities, behavioral disabilities, and communicative disorders). Topics covered are external anatomy, physical and emotional changes of puberty, health and hygiene, and privacy/safety. This is a needed resource for certain students. I work with our Transition Class students, and this resource makes a lot of sense to have available for them. There is a lot of basic information delivered simply. For the intended population, it is a quality resource.

Reviewer 308

While the information itself is thorough and clear, the video feels very dated. It also moves quite slowly. It is broken up into sections, which could be watched and discussed individually to make it more engaging for students. It was unclear if there were accompanying materials, which may have been helpful as well.

Reviewer 309

The materials do not recognize gender diversity despite the prevalence of gender diverse identities among students with disabilities. Biological females are assumed to be girls.

AIDS Facts for Kids

Reviewer 306

While this video does do a few things well, there are some major concerns. It includes a good, straightforward, age-appropriate discussion of ways HIV is and is not transmitted and addresses common misconceptions about transmission. The graphics/visuals are not great, seems like they were made a while ago, not as high quality as more modern graphics.

The video states to avoid getting AIDS “don't have sex.” While this video is aimed at Grades 5-8, that guidance is part of an abstinence-only model of education, and a fear-based one. Rather than discussing current therapies and treatments such as PrEP and PEP, or at least referencing that treatments exist, and there is evidence that HIV can become almost impossible to transmit with proper treatment, it is stated the only way to avoid HIV/AIDs is to not have sex and to not do anything to mix blood. This does not align with current research and information about HIV transmission. The messaging is very absolute, and it does not offer other prevention strategies.

The video also does not include many instructional supports, it just has one paragraph that describes what is included in the video and the learning objectives.

Reviewer 308

The basic information in this video about how bloodborne diseases are spread is decent—it is clearly stated and thorough. The video itself is quite dated. At no point in the video are safe sex practices covered. It repeatedly tells the viewer to “Make the healthy choice” to not have sex. It sounds like the messaging is that having sex is unhealthy and that having any bloodborne disease is a conscious choice that the person made.

Reviewer 313

This is an older video, and only includes white and black students. No Asian or other cultures are represented - which doesn't accurately represent Washington state.

Reviewer 321

I thought the video was engaging and covered the material well. I believe one thing missing is the use of condoms as a form of protection against HIV. I understand this is a young audience, and abstinence should be encouraged. I think a statement that explains as one gets older and decides to have sex, using a condom is one way to prevent HIV (though not 100%). In addition, it would be helpful to have more formal or informal student interaction and assessment supports as part of this video.

Reviewer 320 (Med/Sci)

Noting that only abstinence is discussed as a risk reduction strategy. Given age group, there may be sexually active middle schoolers who could benefit from more nuanced discussion of safer sex strategies. Indicates HIV means “Human Immune Deficiency Virus”, but it is “Human Immunodeficiency Virus” (not significant difference but wanted to note it).

Always Changing (co-ed)

Reviewer 307

The video is fast-paced and engaging. It's designed for grades 5-8. It seems better suited to the lower end of this age range. The information promotes more traditional (white) cultural beliefs:

washing hair every other day (not considering braided black hair) is one example. While they do talk about different types of family structures, it could go much further to be inclusive of more students' situations. It is developed by Always products (Proctor and Gamble), so that advertisement is there. The supplemental materials are helpful but not necessary to use. I would use this in my class but would add more information to the discussion to make it more inclusive for my students.

Reviewer 309

Language and imagery do not reflect gender diverse students. Language is consistently binary and assumes alignment between sex and gender. Fails to acknowledge intersex bodies. Suggest use of female and male in place of girl and boy.

Language assumes heterosexuality. In discussion of nocturnal emissions, twice thoughts of "girls" is mentioned.

Language and imagery do not reflect students with disabilities.

Language assumes each child has a mom and dad in most cases and assumes that gender of adults is aligned with their sex and puberty experience. Suggest use of caregiver in place of parent and use of female and male language.

Lastly, content neglects to encourage those experiencing significant cramps from asking for help.

Reviewer 314

This is an excellent supplemental information product introducing puberty. Likeable kids in the video but they might be considered young by some students.

Teachers could adapt and utilize this information (and video) to teach Washington Health standards that are skill-based standards. Specifically portions of Standard 2, Standard 3 and Standard 6

Teacher support is good with strong emphasis on teachers' communicating in a timely fashion with administration, parents, and students prior to teaching the material.

Pre- and post-tests are available that are specific to gender. Teacher material defines biologic sex, gender identity as well as gender roles and stereotyping.

Reviewer 321

The video and instructional materials were extremely detailed and well-created. I thought the video was very engaging and interesting to watch. To make the video and instructional materials even better, I would suggest adding information related to contraception. The materials discuss how pregnancy can occur but do not mention how to avoid pregnancy. Even though this is a young age group, it would be beneficial to provide resources or information related to pregnancy prevention. In addition, healthy relationships and self-identity were discussed briefly in the teacher's instructional guide, but I didn't see it mentioned in the video. That information could be added to the video to provide a more in-depth discussion of healthy relationships and self-identity as one goes through puberty.

Reviewer 322

Both the video and supplemental guide were informative and engaging. It offers co-ed or gender-divided options. The video is age-appropriate (intended for grades 5-8) and youth-centered, with high production quality, and the question-answer structure is easy to digest. No closed captioning

was available at least in the way I accessed the video, and I could not find alternative language options. The instructor's guide is thorough and provides a solid framework for implementation, I appreciate common questions, parent engagement, and pre-/post-test sections. There are Spanish versions of the print materials. There is some room for improvement in inclusivity. Language and graphics feel unnecessarily cis-normative and heteronormative. Graphics depict racial and body diversity, though no dis/ability representation. I appreciate the section included on sex, gender, & society, but it feels a little forced; it's confusing why they did not also replace binary terms in this section (and throughout) to be more gender-neutral like "they" "adult", "parent", "young people". Omits non-binary and trans youth experiences; it would be nice if they acknowledged that puberty can be a dysphoric change for some youth. Includes helpful sections on healthy choices, healthy relationships, and decision-making. Wish there was more coverage on self-esteem and peer and [social] media influence on body image. A very extensive look at periods; I appreciate that it is not watered down at all in the co-ed video. It does feel a little like marketing for its sponsored brands, especially in the discussion guide, and the sections on bio-male bodies are comparatively slim. Overall, I think it is a strong material to address puberty, I would probably supplement with more reflection opportunities around the myriad emotions that might come up around the subject.

As an aside, Always.com does have some more resources on their site that better address a couple of the shortcomings I listed and might be helpful to explore (note there is more content for "girls" than any other gender group).

Reviewer 326 (Med/Sci)

Puberty age range - typical age range for girls is a little longer than indicated (7-14 vs. 7-12 as stated in teacher's guide & 7-13 in video); for boys it should be extended to 9-15 vs. 9-14 as stated in teacher's guide, not stated in video.

Menstrual cups and underwear are mentioned in teacher's guide, but no information provided about either. They were not mentioned at all in the video.

Medication is not mentioned as a possible way to treat menstrual cramps.

Video does not mention that women stop having periods when they get older - there are generalized statements like "yes, your female teachers have periods too."

Video designed to be used in co-ed settings, but two pre- and post-tests are designed for girls and boys specifically. There's no co-ed/combined test.

Door 3

Reviewer 303

The scenario and concepts portrayed feel relevant, realistic, and accessible for high school students to explore what relationship behaviors and dynamics are healthy or unhealthy. English and Spanish subtitles are available, enhancing accessibility for students who may need them. The material is considerate of possible emotional responses students may have, including content warnings and providing teacher guidance for preparing students and helping them navigate these emotions. Information and experiences specific to LGBTQ+ people and relationships are included, as well as portrayals of LGBTQ+ characters.

There are multiple options for adapting the lesson plans and activities to meet group needs/interests and time available. However, most of the activities provided are discussion or individual journaling, so it would've been nice to have options for more hands-on or game-like activities. Specific learning objectives are not included in the teacher guide.

Reviewer 308

The preface is good to let students know that the material might impact folks differently, and what they can do if it hits too close to home for them. All the material is intentionally very inclusive. The video alone could be confusing but used with all the accompanying material (especially the discussion guide), this is a great look at characteristics of healthy vs. unhealthy relationships, how to identify those characteristics, and how to navigate the ups and downs of relationships.

Reviewer 321

I thought the video and instructional materials were excellent. I appreciated the examples in the video that showed technology abuse as a form of teen dating violence, since that is a relatively new concept and not always discussed or recognized as abuse. I also thought the instructional support materials had great resources for pronouns and LGBTQ+ specific examples to show how relationship abuse can occur in every relationship. The only item I would add to this lesson plan is a discussion on consent and contraception (i.e., talking about how partners cannot decide contraception methods for you, cannot pressure you into sex, etc.).

Reviewer 325

Door Three does an excellent job accurately representing a friendship that many students may find themselves in. The curriculum is inclusive and engaging and is easy to follow. The discussion guide is very useful in guiding the facilitation of this curriculum.

Just Around the Corner for Boys

Reviewer 304

This product seems very dated. The clothing and items (and general production and theme song) seem like it was made in the 90s. The fact that this product is specifically marketed toward boys further makes it seem dated, as most of the information included is applicable towards students of all genders (like “take showers and eat healthy foods”), and the implied idea that students should only be learning about their own bodies and not the bodies of others seems antiquated. The video states that sexual maturation is for reproductive purposes and doesn't acknowledge the aspect of pleasure at all. The video doesn't seem engaging, because it doesn't have any real characters—just a narrated list of things you should do, and things that might happen to you. There are no additional teacher guides or supports.

Reviewer 309

The language and imagery do not reflect gender diverse students, students with disabilities, or diverse family structures.

Much of this information does not need to be sex segregated.

An emphasis on the importance of appearance is consistent throughout the video. “Looks” are considered “important,” including in a conversation on the benefits of exercise. However, the

section on body image, present in the video for girls, is missing here. This emphasis on appearance and different approaches to the sexes reinforces harmful gender stereotypes.

Reviewer 311

The Just Around the Corner - for Boys, video is short and covers several key topics. There is one glaring issue that I saw in this product: this product is very cis-gendered and normed, it does not allow for the representation or education of trans or intersex youth who may benefit from this content. In addition, the product asserts there is no way to slow down puberty. This assertion is false and outdated. Since the approval of puberty suppressors (puberty blockers), there is medicine that can be taken to slow down the process of puberty particularly for trans or gender-diverse youth who need more time to navigate their identity. The animated person they use to explore anatomy is white, this is the same issue in the JATC for Girls. Overall, the product seems dated, though still useable as a supplement not a standalone tool and may require additional discussion and caveats to be given by the teacher/facilitator.

Reviewer 321

Overall, I thought the video was fine and informative. However, I thought the video seemed a little outdated and youth in grades 4-6 may struggle to pay attention to the information. An additional shortcoming of the video is that there aren't instructional materials to help evaluate student's learning or spark discussion. Regarding inclusivity, the video does not address diverse self-identities and uses binary gendered language.

Reviewer 322

*Was on the fence between Agree/Disagree on first 2 items of Recommendation Section. Details below.

This video is short, informative, uses age-appropriate (intended for grades 4-6) and normalizing language, covering the physical, social, and emotional changes that occur during puberty. It lacks resources or lessons to go with it. No closed captioning is available at least in the way I accessed the video, but there is a Spanish version. Two shortcomings of the script: First, they should add the section on body image and media's influence from the "girls" video here as well; it's relevant to all contemporary youth. Second, the topic of pregnancy and fertilization is not covered equally across the "girls" and "boys" videos. The material inadvertently places the responsibility of pregnancy only on "girls". I appreciate the inclusion of self-esteem, peer influence, and self-consciousness.

Overall, the material does not seem sufficiently inclusive, bias-free or culturally responsive. The material is highly gender-dichotomous in both its language and images; experiences of non-binary and trans youth are excluded. The cheerful tone leaves no space for the dysphoric changes experienced by some youth around puberty. There is some diverse representation in its actors, but in general lacking especially of gender, dis/ability, culture/religion, or body shape.

The audio and visual quality is overall good, but the footage and effects are outdated. Depiction of technology particularly needs modernizing (no mention of smart phones or social media). I found the visuals somewhat distracting from the narration; I had to rewatch to capture all the information being said. If I were to use this material, I would immediately follow it with the "girls" video for more comprehensive instruction. More likely, I would try to find a different video altogether.

Reviewer 320 (Med/Sci)

The material discusses the impact of technology during puberty but is outdated in 2023.

Just Around the Corner for Girls

Reviewer 302

While the A/V aspects are good, the video and animation feel very dated with outmoded animation and lacking diversity. The initial actor and main focus is a blond, blue-eyed girl, and there is a lack of diversity in both ability and body-types found in typical classrooms. Even though the video talks about self-esteem and mentions the false perfection of media, the media used to display a female body is a stereotypical hourglass figured Caucasian. As a 15-minute standalone, it's effective at discussing puberty but is unlikely to retain student attention for 15 minutes.

Reviewer 304

This product looks like it was made in the 90s. I don't think students will find it engaging, as it is simply a narrator telling them a list of things that will happen to them, rather than providing a plot with characters to see those things happen and how people might deal with the changes. There are no supportive texts/lesson plans/questions for teachers to use in conjunction. The forced gender binary is not only a dated idea, it's also not necessary here; most of the video is applicable to all genders and the anatomy specific information can be learned by all genders. The content is almost identical to the product made for boys, with the strong exceptions of anatomy and the idea that "almost all girls" have body image issues—ignoring the fact that boys may have similar issues.

Reviewer 309

Language and imagery do not reflect gender-diverse students, students with disabilities, or students with diverse family structures.

Most of the information does not need to be sex segregated.

Emphasis on the importance of appearance is consistent throughout the video. Twice the "looks" of "girls" is mentioned, once as a benefit of exercise. The discussion of body image states that it is more important for "girls" than for "boys." These comments perpetuate harmful gender stereotypes.

Reviewer 311

Just Around the Corner - for Girls was brief and manages to cover several topics quickly. This tool is outdated and asserts that puberty cannot be slowed down, so it does not educate youth on puberty suppressors (Blockers) which do just that. The product is exclusive of intersex and trans or gender diverse youth. The video does address media representation of females and the way this misrepresentation can make young femmes feel insecure or have negative body image which was a great segment to include. The animated body used to discuss anatomy is a white student, the same issue is present in the JATC- for Boys product. Overall, the product is outdated but can still be useable if the facilitator or teacher provides additional content from more up to date resources and provides ample space for discussing the gaps in this product's content. Best for 4-5th grade.

Reviewer 321

Overall, I thought the video was fine and informative. However, I thought the video seemed a little outdated and youth in grades 4-6 may struggle to pay attention to the information. An additional

shortcoming of the video is that there aren't instructional materials to help evaluate student's learning or spark discussion. Regarding inclusivity, the video does not address diverse self-identities and uses binary gendered language.

Reviewer 322

This video is short, informative, uses age-appropriate (intended for grades 4-6) and normalizing language, covering the physical, social, and emotional changes that occur during puberty. It lacks resources or lessons to go with it. No closed captioning available at least in the way I accessed the video, but there is a Spanish version. Anatomical graphics are simple and approachable but incomplete (does not include any external anatomy of the vulva). I appreciate the inclusion of self-esteem, peer influence, and media's influence on body image. The topic of pregnancy and reproduction is not covered equally across the "girls" and "boys" versions of this material. It inadvertently places the responsibility of pregnancy only on "girls".

Overall, the material does not seem sufficiently inclusive, bias-free or culturally responsive. The material is highly gender-dichotomous in both its language and images; experiences of non-binary and trans youth are excluded. The cheerful tone leaves no space for the dysphoric changes experienced by some youth around puberty. There is some diverse representation in its actors, but in general lacking especially of gender, dis/ability, culture/religion, or body shape.

The audio and visual quality is good overall, but the footage and effects are outdated. Depiction of technology particularly needs modernizing (no mention of smart phones or social media). I found the visuals somewhat distracting from the narration. If I were to use this material, I would partner it with the "boys" anatomy section for more comprehensive instruction. More likely, I would try to find a different video altogether.

Reviewer 320 (Med/Sci)

This material discusses the impact of technology during puberty but is outdated in 2023.

MVP

Reviewer 303

The scenario and concepts portrayed feel relevant, realistic, and approachable for high school students. The material provides key information for students to recognize and understand healthy/unhealthy/abusive relationship behavior. It also outlines specific and actionable strategies for navigating complex relationship dynamics and supporting a friend. The activities, journal prompts, and discussion questions provide opportunities for students to identify their own personal values and consider how they might apply in relationships.

English and Spanish subtitles are available, enhancing accessibility for students who may need them. The material is considerate of possible emotional responses students may have, including content warnings and providing teacher guidance for preparing students and helping them navigate these emotions.

The teacher guide provides detailed guidance, clear learning objectives, resources, and options for adaptation depending on time constraints and class needs. However, most of the activities provided are discussion, role-play, or individual journaling, so it would've been nice to have options for more hands-on or game-like activities.

Reviewer 305

I have been teaching bystander intervention and healthy relationship skills for several years and this is one of the best videos I've seen (in terms of cultural accuracy, relevancy to teens, and production quality). I think it is incredibly valuable that it not only shows a diverse range of teens, but also abuse that is not physical and that a young man is experiencing. The way that his male peers show up for him sets a wonderful example for other young men who may view the content. I would use this in my presentations.

Reviewer 306

The MVP video and workshop are a great resource. It would fit well in any curriculum about healthy relationships, or on its own as a workshop. The video is well produced and does a good job conveying unhealthy relationship behaviors without being over-the-top or unrealistic. It did a good job of showing a situation that many young people might not recognize as unhealthy. The materials that go with the video are high quality and helpful. The discussion guide companion to the video offers three different lengths of workshops and could easily be adapted to the time length and setting. Overall, there are no obvious downsides to this curriculum, I would highly recommend it.

Reviewer 321

I thought the video and instructional materials were powerful. In particular, the breakup planning worksheet. It is such an important conversation to have that may not always be discussed at home, so having these resources is important for students. Overall, I also thought the video was great and showed that relationship abuse can go both ways in the relationship. The instructional materials do not cover pregnancy prevention (which would be helpful in this lesson plan), so that is the only shortcoming identified.

Reviewer 326 (Med/Sci)

The scenario is realistic, based on valid information re: dating abuse. No medical/scientific material included, but sources of data and resources are credible and reliable.

Sex Ed for People with I/DD

Reviewer 302

This 10-part stand-alone video series is intended to be available independent of classroom setting; the audio/visual quality is very high, and discussion is tactful, straightforward, and delivered in short segments making it easy to watch for all abilities and accessibilities. The speakers are representative of many different racial, physical, gendered populations, and closed captioning and audible descriptive for sight-impaired make content as accessible as possible. There is no curriculum support and is not intended to provide for standards 2-8 with student demonstration.

Reviewer 304

The series of ten videos are very short (about 2-3 minutes each) and can be accessed by anyone, including students with I/DD. The series would serve as good starting points for larger lessons and discussions, but nothing beyond that. The videos cover a wide range of topics. There is a link that says it leads to a discussion guide, but there is no discussion guide. The videos solely feature people with I/DD, from a range of races and gender identities, so the videos provide positive representation of the target population.

Reviewer 306

This set of videos thoroughly covers topics in a straightforward and clear manner. Normalizes topics that can often be stigmatized by discussing in a frank, matter of fact manner. A strength of these videos is they also discuss pleasure and masturbation, topics often not covered in sex education. There is no judgement about behavior, they are just providing information. One quote that stood out was “masturbation is healthy, normal, and safe.” The videos also did a good job of not using gendered language.

There were no obvious shortcomings to the material, it covered a wide range of topics concisely. They are fairly brief about most topics but highlight the most important points. If someone was looking for more in-depth information about STIs, or any specific information for HIV/AIDs, they would need additional materials, but these are a great introduction to many important topics.

Reviewer 311

The “Sex Ed for People with I/DD” was a very positive and normalizing series of videos totally less than twenty minutes. This series can easily be integrated into one day's lesson or several days- each video features members from the I/DD community providing education and modeling skills on the topics. This video series was sex-positive and de-stigmatized topics helping normalize talking to our classrooms about sex education including our students with I/DD. The speakers in the video show compassion for being sexually curious while explaining the importance of safety, healthy decision making, and healthy communication/relationships. I feel the series is well done for being so brief, it was visually engaging and explained educational material in a way that was digestible and open.

Reviewer 313

This was way too much information to be covered—not appropriate for secondary school. I had a hard time watching all these videos. Not appropriate.

Reviewer 321

The video series covered a wide variety of topics and was interesting and engaging. I thought the video series did a great job of using inclusive language, such as “person with a penis”, to represent all identities. I did not see instructional support materials and believe this would be a helpful addition to assess student's understanding and learning.

Reviewer 319 (Med/Sci)

There were no sources identified for the videos.

We're Growing Up

Reviewer 303

Strengths include that explanations of many of the key concepts covered were straightforward and the accompanying visuals helped further illustrate the information. Physical and emotional changes were discussed in a normalizing, non-shaming way.

Shortcomings include a lack of closed captioning, hindering the accessibility of the material for students who may need it. Some wording was unnecessarily euphemistic, which may be confusing for some students (e.g., “beginning of new life” instead of “pregnancy”). Overall, the video feels somewhat outdated in terms of language, content, and style.

Reviewer 305

Although the production quality isn't poor, it is not representative or reflective of youth from this generation (feels dated a few decades). Though I don't feel it over generalizes too much, it directly states many insecurities youth may experience (i.e., feeling like breasts are too big or not big enough) which may increase stigma and shame rather than appear as relatable to youth, especially coming from the adult voices from the narrators. I believe with modern updates and a more trauma informed approach, it could be updated to be successful as puberty education, but not comprehensive sexual health education.

Reviewer 307

This video is very basic. It refers to the vas deferens as "the main sperm duct." While they make a small attempt to be inclusive, it misses the mark. Drawn people are all white. They only refer to "boys and girls" and neglect the complexity of gender. It focuses on societal standards of certain cultures (sharing razors, shaving, etc.) that don't need to be included. I wouldn't choose this resource for my classes, but in some more conservative communities it may get a better reception. It is very "traditional."

Reviewer 314

The video shows real kids of appropriate ages with a variety of body types and ethnicities.

Fact filled short video that could be used as an intro to puberty. Very short informative introduction to emotional health. No teacher material was provided.

We're Growing Up addresses puberty which is a portion of Standard 1. The teacher could possibly utilize the video to teach Washington Health Education Standards 2-8 specifically Standards 3, 6 and 7.

Reviewer 321

Overall, I thought the video communicated puberty changes effectively, and correctly emphasized that everyone is different in their development. The only reason why I rated this video as "agree" instead of "strongly agree" for inclusiveness is because the video showed anatomy on light skin tone rather than different skin tones. I think adding different skin tones to the video would promote more inclusiveness as students of all races will be watching this video. In addition, the video could be strengthened by adding more instructional support, such as student interaction and assessment opportunities to evaluate understanding and learning.