

# *Comprehensive Sexual Health Education Instructional Materials Review*

## Health Smart High School

**Year Published/Revised:** 2020

**Publisher:** ETR

**Website:** <https://www.etr.org/healthsmart2/about-healthsmart/whats-new/#1>

**Full or Supplemental:** Full

**Grade Level:** High School (9-12)

**Student Population:** General

**Duration/Number of Lessons:** 25 lessons in the comprehensive sexual health unit

**Format and Features:** Online Textbook

**Evidence-based/informed:** Evidence-informed

**National Standards Alignment:** National Health Education, National Sexuality Education Standards

**Consistent with WA Health Education Standards?** Yes

**Consistent with Comprehensive Sexual Health Education Act?** Yes

**Consistent with AIDS Omnibus Act?** Yes

**Inclusive Materials/Strategies:** Yes

**Bias Free Materials:** Yes



Washington Office of Superintendent of  
**PUBLIC INSTRUCTION**

## Primary Subject Areas and Topics Required by Law:

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

## Reviewer Comments:

### *Reviewer 103*

There are multiple Standard 1 Outcomes missing in multiple areas or they are only implied in the “textbook” and PowerPoint information.

Standard 3 is missing information on accessing laws related to sexual health care services. No specific information on rape.

Some LGBTQ+ terminology is unclear and there is very limited information provided.

Affirmative consent is a lesson but provides limited information and practice for the students.

The “textbook” information, including the PowerPoints are vague and over emphasizes abstinence in comparison to condom use and other contraceptives that will protect against unwanted pregnancy and STDs/STIs.

I didn’t see where there is an option for this curriculum in any language other than English.

The ancillary material is more diverse than the textbook material but there are few LGBTQ+ examples and names are very white and generic.

Much of the information throughout the lessons is very surface level and seems in my opinion to be very conservative in the delivery of the information.



*Reviewer 116*

Health Smart HS is an incredibly comprehensive curriculum that utilizes a mixture of classroom workbooks and activities with ready-to-go PowerPoint presentations. The Teacher Guide and Preparation sections are especially robust. Each lesson comes with a package of materials already written and ready to print, colorful and engaging PowerPoint slides, directions on individual and group activities, advice for adjusting activities for student learning differences or time, assessments and extended learning materials. In short, this curriculum greatly reduces teacher preparation time. Also, because the activities are high quality and include a range of interactive and experiential methods, I rarely felt activities needed adjustment or improvement.

In addition to the 15 comprehensive sexual health lessons, Health Smart HS also includes several violence and injury prevention lessons focused on signs of teen dating violence, sexual exploitation, sexual abuse and protecting oneself. These lessons could easily be incorporated into the sexual health unit or taught as a separate unit for sexual violence prevention.

*Reviewer 112*

I am an advocate of this curriculum as it incorporates an inclusive formula of prioritizing subjects of sexual health and elaborates on subjects with age/developmental needs appropriately. Basing a comprehensive plan of addressing issues of Abstinence, Personal and Sexual Health, HIV/STD, Emotional and Mental Health and Violence and Injury Prevention, this curriculum addressing gender identity, and sexual preferences with each structured unit. One suggestion I have is to incorporate racial equity, and no-hate resiliency in the subject teachings with emotional and mental health.

*Reviewer 104*

The curriculum is extensive and very thorough. The activities are very basic and not the most exciting or engaging, but there are a number of strategies included that include a variety of ways for students to access and engage with the material.

The material is medically accurate and inclusive. There are multiple lessons that specifically address sexual orientation and gender identity terms and ideas, and which encourage advocacy for diverse groups.

The scenarios and examples were either explicitly heterosexual or used 'gender neutral' names and terms, which while striving for inclusion is not actually representative of diverse groups and can simply leave norms unchallenged.

There did seem to be a disconnect between the lessons labeled "Abstinence" and those labeled "STD/HIV/Pregnancy Prevention", where there was some significant overlap and repetition, which ended up feeling as though these were different 'tracks.' For example, there is an "Assessing Risks" lesson that is specific to abstinence and does not mention condoms, birth control or sexual activity at all, and there is an "assessing risks" lesson which is inclusive of abstinence, birth control, condoms, and sexual activity. It would be very important for teachers to ensure they are not duplicating materials but that they are also being sure to include the lessons that meet the standards and legislative requirements.

Finally, in some of the abstinence section lessons, there is a conflation between setting boundaries and saying no as a practice of abstinence and respecting boundaries as a sexual violence prevention tactic. This could convey to students that it is the responsibility of the



person saying 'no' if those boundaries are not listened to and respected. It is important that the practice and skill of setting a boundary and saying no is clearly understood as a practice of abstinence or sexual boundary setting and that asking for, respecting and seeking consent are distinct.

### *Accuracy Analysis Reviewer 123*

Overall: Could be improved with the use of videos and additional handouts from other sources. The two video segments provided are odd and there are likely better ones on external sites. Not sure why the title of the first section is Abstinence, Personal & Sexual Health.

Lesson 2 preventing infectious diseases. Slide 2H.

Ways to prevent infections:

“Safely handle and dispose of contaminated items. Examples: sterilize needles and other equipment. Never reuse needles or syringes.....” why did they say, sterilize needles but then never reuse? What other kinds of needles are they referring to?

Could add mask wearing to this module.

Define Chronic Disease – Show Slide 3F –

Heredity—the genes people are born with—can play a role in some of these diseases. Some can also develop

due to unhealthy habits and lifestyle choices. Sometimes things in the environment, such as lead, dust, chemicals,

smog or secondhand tobacco smoke, may contribute to the development of disease. Why is this included in the heredity sentence, this is a great opportunity to talk about environmental health.

Show Slide 3H. -- Summarize ----The good news is that people can change many of these things by making different behavior choices. The bad news is that many people don't look at how their habits and lifestyle choices could affect their health until they are faced with a chronic disease. this is a great opportunity to talk about environmental health and how race/space/place matter.

Show Slide 4G – Immunizations slide add discussion on COVID vaccinations

Make sure to frame HPV vaccine as a cancer prevention strategy

Lesson 5: Researching Health Habits – good section with relevant information and strategies.

Lesson 6: Setting a Goal to Improve My Personal Health – good section with relevant information and strategies.

Lesson 7: Understanding Sexuality – not sure why the conversation includes both sexuality and STIs. These are worth having separate conversations about.

Lesson 9: could be enhanced with the privacy laws and information about accessing medical care at different ages

Lesson 10. Suggest an entire focus on media; the focus is only on sexting and there are more issues than just this one.

Show Slide 13E – remember that sexual abstinence is defined as....

Suggest also stressing emotional consequences of initiating sexual activity before people are emotionally or even physically ready

Show Slide 13J – who could give you support....

Suggest adding medical providers



Time to Talk. Supporting abstinence

Master 13 D

What is the research on sexual violence with age differences and same sex relationships? It might be good to address this as well. This only addresses heterosexual male to female violence. Need to address all sexual violence.

Lesson 16: Roleplay Practice: Saying NO to Sexual Activity. Glad to see that there are videos but kind of strange and both link to ineffective role play videos:

<https://www.etr.org/healthsmart/videos/hs/abs/l16/pressure-is-on-ineffective/> suggest showing the ineffective first and then the effective video.

Here is the link to the “effective” video:

<https://www.etr.org/healthsmart/videos/hs/abs/l16/pressure-is-on-effective/>

HIV, STI & Pregnancy Prevention section

Lesson 1: What Do You Know About Sexuality? Would recommend an entire re-work of this section.

The order is confusing, how the material is organized, and the way topics are combined. For example, it is not clear why the risks of pregnancy and STIs are discussed prior to sexuality. Another example, why is sexual orientation not its own separate conversation? In this module, sexuality is tied to STIs.

Social media should be a separate topic.

Lesson 5: Avoiding Pregnancy, Master 5M. Birth Control Fact Sheet. Emergency Contraception. Emergency contraception should only be used in an emergency, when a regular method of birth control has failed, or in cases of rape. Strongly suggest adding having unprotected sex. Plus seeing a provider and getting screened for STIs if concerned; if seeing a provider for the IUD EC, then get screening too.

Add some additional details:

<https://www.who.int/news-room/fact-sheets/detail/emergency-contraception>

<https://www.plannedparenthood.org/learn/morning-after-pill-emergency-contraception/which-kind-emergency-contraception-should-i-use>

<https://www.cdc.gov/reproductivehealth/contraception/mmwr/spr/emergency.html>

<https://www.acog.org/clinical/clinical-guidance/practice-bulletin/articles/2015/09/emergency-contraception>

Lesson 10: Getting Tested for HIV, Other STIs & Pregnancy – add information on state law around access to health care and privacy for teens

Lesson 13: Roleplay Practice: Saying NO to Unsafe Sex

The video is odd in general; additionally, the person is supposed to be babysitting and then invites someone over.

Suggest showing ineffective video first and then the effective communication second

<https://www.etr.org/healthsmart/videos/hs/hiv/l13/no-condom-no-sex-effective/>

Supplemental lesson 1 Pregnancy options.

Move S8 to the first option in the slides. It seems tossed in rather than a very important viable option. Include state laws about abortion rights for teens.

If pregnancy occurs, mental health and legal considerations need to be added.

Ensure that there are connections to social supports...it has it under resources but should likely be highlighted elsewhere. This includes education, mental health counseling, etc.



Same as the Teacher page: more ending the pregnancy 1st. add resources about state laws and privacy protections for teens around abortion rights.

Lesson 18: Understanding Sexual Abuse.

Teacher page for supporting youth who have experienced abuse.

Could include additional teacher tips. An example:

<https://www.kcsarc.org/sites/default/files/Resources%20-20Creating%20Trauma%20Informed%20Classrooms.pdf>

Other resources:

<https://www.atg.wa.gov/resources-links-5>

<https://www.nsvrc.org/blogs/teen-dating-violence-prevention-resources-2021-update>

<https://www.cdc.gov/violenceprevention/intimatepartnerviolence/teendatingviolence/fastfact.html>

It would be useful to provide information if someone is a perpetrator of the violence; often times they are both the survivor of violence and the abuser. This needs to be addressed. Also, it is not just men, it can be women too.

<https://www.futureswithoutviolence.org/>

<https://www.futureswithoutviolence.org/engaging-men/programs-for-men-who-use-violence/>

<https://www.new-hope.org/perpetrators-of-domestic-violence/>

*Accuracy Analysis Reviewer 124*

No medical inaccuracies found!

