

# Comprehensive Sexual Health Education Instructional Materials Review 2022

## Great Body Shop (Health World)

**Year Published/Revised:** 2021 (NOTE: "Special Topics" Targeted Extension Activities must be used in order to meet state requirements for comprehensive, inclusive instruction.)

**Publisher:** The Children's Health Market

**Website:** <https://www.thegreatbodyshop.net/>

**Full or Supplemental:** Full

**Grade Level:** Middle School (6-8)

**Student Population:** General

**Duration/Number of Lessons:** Middle School 1: 9 lessons; Middle School 2: 9 Lessons

**Format and Features:** Teacher, student, parent materials, print & downloadable materials.

**Available in Multiple Languages:** Spanish, French

**Evidence-based/informed:** Yes

**National Standards Alignment:** Nat'l Health Education, Nat'l Sexuality Education

**Consistent with WA Health Education Standards?** With modification

**Consistent with Comprehensive Sexual Health Education Law?** Yes, when used with optional "special topics" targeted extension activities and supplemental materials on affirmative consent/bystander intervention.

**Consistent with AIDS Omnibus Act?** Yes, with modification and when used with optional "special topics" targeted extension activities.

**Inclusive Materials/Strategies:** Yes, when used with optional "special topics" targeted extension activities.

**Bias-Free Materials:** With modification



## 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:

### Accuracy

*Reviewer 223*

There are several minor inaccuracies or missing pieces of information that instructor should be able to correct if there are questions, but given that this is an elementary text, those omissions are not particularly problematic

*Reviewer 224*

Overall, this resource was assigned its grade based on the numerous smaller-scale errors present. Individually, the many of errors are not difficult to correct, but collectively, addressing everything requires moderate effort. Most importantly, there are a number of inaccurate medical claims, most significantly regarding fetal development. Location of these problems is grade.month.lesson so that 6.2.4 represents grade 6 month 2 lesson 4.



## Inaccurate Claims

- Citation needed for timeline for fetal development. In particular, claims that the fetal heartbeat can be detected at 3 weeks are inaccurate. In the MS1 student packet, claims about the most vulnerable time periods in fetal development are inconsistent with authoritative sources (6.6.2 and student packet, MS1.TGM14.6, MS1 packet, MS2.TGM24.5, MS2 packet).
- According to *UpToDate.com* and Mayo clinic, the average menstrual cycle lasts 28-35 days, not 21-31 as the resource states. Citation needed (6.6.1, reinforcement).
- Difficulty breathing and digestive system complications are not classic presentations of Fetal Alcohol Syndrome. Behavioral changes, facial abnormalities, difficulty learning, height/weight, and brain development are more classic (6.6.2, MS2.TGM24.activity 11).
- Claim that many children born to mothers who use substances die is imprecise and suggests higher than actual infant mortality. All claims in this section need citation. (6.6.student packet).

## Incomplete/Unspecific Information:

- Clitoris is not listed in list of female genitals (6.6.4, 6.6 optional reinforcement of female hygiene).
- Classifying sexual behavior as risky isn't necessarily accurate. It is more accurate to state specific sexual behaviors as risky such as intercourse without a condom (6.6.2, 6.8.1).
- Discussion of hormonal contraception should include the implant as it is commonly used and extremely effective (6.6.activity 15, MS1.TGM14.activity 7, MS2.TGM24.activity 4).
- Claim that the embryo looks like a miniature baby after 2 months is subjective and mischaracterizes the appearance of the embryo (6.6.studentpacket, MS2.TGM24.act5).
- Use of condoms is missing from the list of behaviors that help prevent infection from HIV (6.8.3).
- Citation needed that most teens abstain for sex and the claim that the most common reason people chose abstinence is pregnancy prevention (6.6.2, 6.8.3, MS1.TGM14.7, MS2 activity 1).
- Claim that abstinence can deepen relationships is not evidence based (6.6.16, MS1.TGM14.11).
- The claim that abstaining from sexual involvement respects your immune system is not entirely accurate. Respect here is poorly defined. Regardless, it is STIs not sex itself that challenges the immune system (6.8.2).

## Full

*Reviewer 202*

These materials are biologically and scientifically accurate and age appropriate for 6-8 graders. The curriculum contains good information about STDs, specifically HPV and HIV. GBS provides many examples of teens making healthy choices and conducting in healthy behaviors such as abstinence, being responsible, and not falling to peer pressure. However, I found the curriculum



design to be cumbersome and difficult to navigate which may present challenges for both teachers and students using this material.

*Reviewer 207*

Even though the information provided is age appropriate and easy to understand, I would consider the lessons as general overviews. It does offer the opportunity for parents to engage with their student using a Family Bulletin and Home Connection. Overall, I feel that this material is one that could be used with additional supplementary materials to fill in the gaps.

*Reviewer 211*

The material included within the Great Body Shop curriculum is extremely comprehensive and detailed, with a number of options to personalize curriculum (including handouts in English and Spanish). Additionally, many of the materials assist students in organizing their own thoughts around topics, including practice using graphic organizers. That being said, nearly all of the resources rely heavily on the written word, which can create barriers for students who may have learning disabilities or are learning English as a Second Language. It may be useful for educators to supplement this curriculum with videos and other audio-visual components for some learners.

This curriculum addresses a number of issues on varying scales, ranging from microscopic understandings of cells and viruses within the human body, to considering community and environmental influences. Given the focuses and discussions around violence within communities, I was disappointed by the failure to acknowledge structural causes of community violence. Additionally, while certain sections of the curriculum differentiate well between sex and gender, some areas fail to take this into account.

Overall, the breadth and depth of the curriculum is impressive, they take into account many issues related to health, and have updated the curriculum to be relevant (including addressing COVID-19 as an example of a communicable illness, considering how it has influenced student understandings of vaccinations, etc.). There are many materials, activities, and discussions that can be personalized by educators and school districts to fit the needs of classes and students.

*Reviewer 218*

The Great Body Shop integrates sexual health education within a larger scope of general health and wellness that is meant to be taught across an entire school year. While integrating lessons on the reproductive system, HIV/STDs, healthy relationships, and refusal skills across a range of topics may help normalize conversations and lessons around sexual health, the program lacks key areas to ultimately be considered comprehensive. For instance, there are lessons which reinforce abstinence as the healthiest choice for middle school students, but the program lacks any lessons on correct condom use or birth control methods. The material is also highly gendered in both its language and images; experiences and relationships of LGBTQ+ young people are not mentioned. Intimate and family relationships are presented almost exclusively



heterosexual, able-bodied and within the traditional nuclear family configuration. Overall, the material does not appear to be representative to a diverse student population, is not inclusive across protected classes, and does not include fundamental lessons of protection methods.

