

# Comprehensive Sexual Health Education Instructional Materials Review 2022

## Puberty: The Wonder Years

**Year Published/Revised:** 2021

**Publisher:** Puberty: The Wonder Years

**Website:** <https://pubertycurriculum.com/>

**Full or Supplemental:** Full

**Grade Level:** Elementary (4-6)

**Student Population:** General

**Duration/Number of Lessons:** 4<sup>th</sup> Grade: 6 Lessons  
5<sup>th</sup> Grade: 7 Lessons  
6<sup>th</sup> Grade: 10 Lessons

**Format and Features:** Digital/Print curriculum, resources for teachers and parents

**Available in Multiple Languages:** Student, family resources in English & Spanish

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

**National Standards Alignment:** Nat'l Health, 2020 Nat'l Sex Education Standards

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

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

**Consistent with AIDS Omnibus Act?** Yes

**Inclusive Materials/Strategies:** Yes

**Bias-Free Materials:** Yes



## Primary Subject Areas and Topics Required by Law:

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

## Reviewer Comments:

### Accuracy

*Reviewer 223*

Some inaccurate terminology needs better citations to back up some statistical data.

*Reviewer 224*

Overall, this resource received a 2 primarily because of lack of citations to support claims. However, there were also medical inaccuracies, most notably regarding development of reproductive anatomy, which will be outlined below. It should be noted that this review focused on material in the teacher guide and did not cover handouts or PowerPoints, which may have other inaccuracies.

Need for citation:

- Generally, there was inadequate citation to support claims about the efficacy of this curricular approach.



- Intro pages 9-13: Citations should be included for claims about efficacy of sexual education approaches such as “negative sex education contributes to the development of sexually unhealthy youth” and “ignorance about sex places children at greater risk of being victimized.” Similarly, commentary about the adapted health belief model and skill-based instruction must be cited. More recent citations are needed about the characteristics of effective sex education.
- Intro page 22: The citations in the “partnership strengthens the message” section are largely outdated. Further, the citations are from less rigorous sources rather than peer reviewed journals.
- Grade 6 page 89: Citation needed for statement that “research shows that the abstinence message is most effective if abstinence skills are taught prior to the onset of sexual behavior.”

There was also a lack of citation/references for medical facts including:

- Intro page 10: Puberty is starting at younger ages than it has before.
- Grade 5 p 68: Information about nighttime emissions.
- Grade 5 p 70: Volume of menstrual blood lost.
- Grade 6 p 98: Statistics about prevalence of STIs and efficacy of HPV vaccine.
- Grade 6 pp 127-129: Claim that most young people delay sex.

#### Inaccuracies

- Some claims were entirely inaccurate and need to be updated based on credible sources
- 4th grade: 76; 5th grade page 62; 6th grade 53: The description of reproductive organs development is inaccurate. In reality, embryos will have an undifferentiated gonadal ridge and undifferentiated gonads. Around week 7, testes determining factors will cause these structures to become male genitalia including testes. For female bodies, the absence of testes determining factor causes the undifferentiated gonads to become ovaries around week 9. Other internal organ development depends on the persistence/absence of Mullerian and Wolffian ducts, which will be governed by the presence/absence of signaling from the Y chromosome. There is also undifferentiated genital tubercles and swellings that become the penis/clitoris or labia/scrotum. It is inaccurate to say that male parts develop from female parts. It is incorrect that the clitoris develops into the penis etc. Everything needs citation once updated.
- Grade 5 p 72: Sperm donors can be used for artificial insemination in addition to IVF.

Other claims are of dubious validity, based on my review and would need citation from a credible source:

- Grade 4 p 84: Claims about thickening of skin in puberty.

Other claims should be reworded to promote clarity and accuracy

- Grade 5 p 60: Clitoris is listed as both internal and external anatomy. Although it extends internally, it should be listed as external anatomy.



- Grade 5 p 67: A person with a penis is able to cause a pregnancy once sperm are present in semen during puberty. Although nocturnal emissions correspond with this, they are an imperfect marker, and it is misleading to say that they are “the change that indicates” boys are able to cause a pregnancy.
- Grade 5 p 69: Although unlikely, it is possible for a female to get pregnant before her first period.

## Full

*Reviewer 204*

Strengths: Excellent organization, robust materials (slides, worksheets, etc. available), and implementation guidance. Extensive support documents and resources, including sample questions and responses. Question box and family discussion-based homework are strong learning strategies.

Weaknesses: Value judgements inherent in many lessons (e.g., “optimal sexual behavior” and “costs of ineffective sex education” which included statistics of sexually active 9th graders, “making responsible decisions”, “gender-normative” vs. “gender non-conforming” expression.) Vague or not totally inclusive language around anatomy (e.g., “male-bodied” and “female-bodied”). Options and support for gender segregated classrooms (Appendix H) which is not a best practice or outcome-supported strategy in the field. Many resources such as videos and other lesson materials must be purchased separately (difficult to access).

Overall, this curriculum is too careful and seems to be trying to please a variety of audiences with opposing perspectives (those who are ready and willing to discuss gender, sexual orientation, condoms, or HIV, and others who are not, or only vaguely). The language and lessons were not direct enough for middle school students. For example, the Lesson E Add-on regarding gender and sexual orientation was based on a very confusing metaphor of “roles their eyes play” and would be difficult to facilitate with this age of students.

Without access to slide decks and videos it was difficult to assess culturally responsive and diverse (strategies and bias-free materials). While teacher guidance was robust, it did not include adaptations for English Learners. Specific to 4th grade, I did not find communicable disease information. Nor was there HIV information or sexual abuse content included in 5th grade. Specific to 6th grade (standard 1), it did not cover sexual health care services available to youth or behaviors that constitute sexual offenses. Generally speaking, I did not find adequate discussion around social media or legality of sexual content.

*Reviewer 207*

The curriculum is setup in such a way that teachers would be able to pick it up, flip through the pages, and layout their materials for instruction. The material and activities are engaging and support the objectives. This curriculum would work well as a foundation for a comprehensive curriculum with some added supplementary materials.



*Reviewer 210*

The curriculum is incredibly comprehensive. The images should more culturally diverse.

*Reviewer 212*

Activity 3 in lesson 5 is promoting a narrative that having close sexual contact will make it so they are unable to focus on reaching their future goals and can result in pregnancy, implying a sex negative approach. I know it is not developmentally appropriate to discuss contraceptives at this age and there can be a different way of talking about this that is more sex positive. Use of more gender inclusive language regarding the reproductive systems is suggested. Internal reproductive organs should be used instead of female/male. I noticed the language is confusing, often alternating between using female bodies/people with vulvas/AFAB (assigned female at birth) bodies which can be simplified to not relate genitalia with gender.

*Reviewer 221*

Puberty: The Wonder Years is a high quality, comprehensive sexual health education program! It's research-based and utilizes best practices in sexual health instruction. The introduction offers a wealth of resources that prepare teachers to provide positive, inclusive, strengths/skills-based, classroom facilitation, community engagement, and student support. Language is inclusive of a full range of gender identities and is free of value-laden descriptions, in fact this program intentionally identifies oppressive stereotypes and speaks to the importance of undoing prejudice including racism, homophobia, and transphobia. The lessons cover a range of the most important topics for students in this age range, 4th - 6th grade and are well organized for ease of use. Caring and engaging scripts are provided, and the highly structured activities include thorough instructions. The Teacher Tips offer expert advice. Extension activities link these lessons to academic subjects such as language arts, social studies, and science. The lessons on brain development and social emotional learning include in-depth yet simple descriptions, guided by CASEL's social emotional learning competences, which will help students understand their own emotions, thoughts, relationships, and choices. Students', teachers', and families' comfort and confidence with sexual health education would increase with the use of this program and I would recommend it.

