

# *Comprehensive Sexual Health Education Instructional Materials Review 2025*

## Relate

**Year Published/Revised:** 2024

**Publisher:** Whatcom County Pregnancy Clinic

**Website:** [Relate - Whatcom County Pregnancy Clinic](#)

**Full or Supplemental:** Full

**Grade Level:** 7 - 12

**Student Population:** General

**Duration/Number of Lessons:** No clear number of lessons

**Format and Features:** Instruction provided by publisher only; students receive handbook

**Materials Provide Support for online or in-person learning:** in-person

**Available in Multiple Languages:** No

**Evidence-based/informed:** No

**National Standards Alignment:** No

**Consistent with WA Health Education Standards?** No

**Consistent with Comprehensive Sexual Health Education Law?** No

**Consistent with AIDS Omnibus Act?** No

**Inclusive Materials/Strategies:** No

**Bias-Free Materials:** No



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 375

This material is not comprehensive and heavily abstinence focused. It adopts a tone that borders on fearmongering and includes value judgments that risk stigmatizing students' sexuality and sexual health. While it claims to be inclusive by presenting its content as universally applicable, the material fails to reflect the diverse identities and lived experiences of many youth. Key concepts are missing around reproductive systems and health, fetal development/childbirth, puberty, and WA State laws. The unit on STI prevention omits critical information. The contraceptive section focuses on failure rates without adequately covering proper use or supporting informed decision-making. The unit on healthy relationships does not address consent and uses value-laden language when discussing intimacy, marriage, and sex, which can alienate students. At some points the teaching instructions are confusing (e.g., "Give example: Etch-a-Sketch"). The only resource provided to students is the clinic that wrote this curriculum. It references a "first day" and "last day" survey for students but those were not included in the review materials.

### Reviewer 378

#### 1. Instructional Design and Delivery

The Relate curriculum is well-structured and provides clear, easy-to-follow instructions for educators. It encourages students to set written goals, which is a strong instructional practice known to increase engagement, motivation, and long-term retention. The emphasis on reflection and personal development is commendable.



## 2. Notable Strengths

- Clear and organized instructional approach
- Emphasis on goal-setting and personal growth
- User-friendly for educators in structured classroom environments

## 3. Significant Areas of Concern

While the curriculum includes some strong pedagogical elements, it presents several content-related concerns that warrant major revision:

- **Marriage-Centered Messaging:** The content strongly promotes sexual activity only within the context of marriage, without offering alternative perspectives that reflect the varied realities of students' lived experiences.
- **Gender and Role Bias:** Traditional gender roles are reinforced throughout the material, which does not align with inclusive or gender-diverse education practices.
- **Monogamy as the Norm:** The curriculum assumes monogamy as the default or superior relationship model. This framing fails to recognize or respect individuals who choose ethical non-monogamy.

It's important to note that societal expectations around monogamy can create undue pressure and even lead to feelings of inadequacy, shame, or embarrassment for those whose relationship choices differ. In a public education setting, this lack of inclusivity can be harmful and counterproductive to fostering open, respectful dialogue among students.

## 4. Recommendations for Improvement

To ensure alignment with inclusive, comprehensive health education standards, I strongly recommend the following revisions:

- Use inclusive language (e.g., "partners," "couples") that avoids assumptions about gender, sexuality, or marital status.
- Acknowledge and validate diverse relationship structures, including non-monogamous and LGBTQIA+ partnerships.
- Update or supplement existing content to reflect modern understandings of gender identity, consent, and healthy communication.
- Review materials through a culturally responsive and trauma-informed lens to ensure psychological safety for all students.

## 5. Final Rating:

Due to the curriculum's current framing and the social and emotional risks posed by its biases, it is not recommended for public classroom (maybe suitable for values-based or faith-based educational settings) implementation in its existing form. Major content adjustments are needed to ensure alignment with equity-focused, inclusive health education practices.



### Reviewer 380

This curriculum does not outline any measurable objectives, outcomes, or assessments. It is not in alignment with most state and national standards. The topic is not clear as it jumps from an emphasis on marriage and abstinence to discussing sex in a shame-based manner, suggesting that sex outside of marriage cannot be

fulfilling, comparing hearts to garbage cans ("Think of our hearts as an empty garbage can. We try to fill it with food, work, alcohol, sex, video games or whatever to fill the emptiness in us.") and discussing birth control methods against best practices by focusing on their failure rates rather than success rates. The birth control effectiveness chart is not a good tool because it lists the rates that BC fails but labels it as effectiveness which can be confusing.

The definition of abstinence and overall theme of the lesson emphasizes that sex should be reserved for marriage. "'Sexual Abstinence' means that someone has made the CHOICE not to have sex. They are choosing to wait for sex until they are marriage [sic] or until they decide otherwise. You get to make this decision for yourself." There are many typos throughout this curriculum.

The emphasis on self-control steps is not rooted in evidence-based practices and it over-explains intimate behaviors/techniques in a mildly graphic manner.

"If the relationship continues it can lead to a lingering kiss or prolonged kiss. When we talk of prolonged kiss, we mean this is on the lips but without tongue. Once it gets to French Kiss/Make-Out (with tongue) things can progress quickly. It typically leads to sexual touch and then sexual intercourse. For many people, sexual touch and sexual intercourse happen quickly. Due to this, many people are caught off guard because they didn't understand or know about how our hormones work or how our bodies get aroused (which we will discuss)."

I would not recommend this curriculum, nor would I teach it.

### Reviewer 384

Relate is a highly biased, values-based health curriculum designed for use in Whatcom County.

There are multiple references made to abstaining from sex until marriage, and the materials clearly promote this behavior. A student handout labels certain behaviors as being in a "Danger Zone," which includes French kissing. The materials say that French kissing "typically leads to sexual touch then sexual intercourse" without citing any source. Other language in the materials includes the statement, "There is no condom for the heart," and "Sex outside of marriage/life-long relationship... can cause destruction."

In addition to the overt bias present in the materials, they are not professionally arranged. There are references to examples meant to be shared with students without any explanation (e.g., "Etch-a-sketch"). The materials are not divided into separate lessons but appear to be one very long lesson without any written goals or learning objectives. The materials sometimes reference numbers that presumably come from the Healthy Youth Survey, but do not cite their source or define the demographic to which they refer.



Lastly, the data presented about the failure rate of various forms of contraceptives is misleading. The numbers presented are the "typical use" failure rates, which is not mentioned anywhere in the materials. This, along with an activity involving identifying on a calendar when a sexually active person can contract an STD, creates a fear-based atmosphere not ideal for student learning.

### **Reviewer 386**

These lessons do not mention various relationship formats. It references marriage and love frequently. The analogies are outdated and the materials are not interactive.

### **Reviewer 389**

The RELATE curriculum is designed with different developmental stages in mind, so the content is tailored to be suitable for each age group. For middle school students, the lessons focus on building foundational knowledge about relationships, communication, consent, and emotional skills in a way that is easy for younger students to understand. The activities are interactive and help students practice important life skills in a supportive environment.

For high school students, the curriculum dives deeper into more complex topics, including sexual health, decision-making, and understanding consent in a broader context. It includes discussions around healthy relationships, boundaries, and how to handle peer pressure. While both age groups receive the core teachings of the program, the way the material is presented, and the level of depth varies to ensure it is appropriate for their maturity levels. The content is designed to be inclusive and relevant for students of all backgrounds, so it resonates with both middle and high school students effectively.

Prep time varies depending on the lesson and the teacher's comfort level with the material. For most lessons, the prep time is minimal, usually involving reviewing the lesson plan, gathering materials, and setting up any activities or group discussions. Some teachers may choose to spend additional time preparing for sensitive topics or creating a more inclusive environment for students. Overall, RELATE is designed to be teacher-friendly with manageable prep time.

### **Med/Sci Reviewer 385**

Effectiveness birth control chart- factual and like that it has clear levels of least effective to most effective methods but a little busy/ confusing on what numbers/ percentiles mean.

Pregnancy discussion covers options and decisions.

STI coverage brief without a lot of detail but clear on prevention and risks. Oral sex is not defined very clearly- broad confusing statement of "mouth on other body parts." Only clear description was penis in the mouth.

Sex was discussed with discussion of risk of pregnancy so excluding other types of sex. Discussion of marriage was always written with assumption of assigned male at birth and assigned female at birth couple since marriage is discussed with the discussion of pregnancy.

More discussions about relationships/ feelings/ choices and goals. Facts and data present but much more briefly reviewed.

Resources: good list of valid/ factual and unbiased resources.



## Med/Sci Reviewer 387

Of all of the full curriculums I reviewed, this resource seemed to have the most problems with medical information. Overall, the content is mostly accurate and simple to understand for a middle and high school audience.

Information is presented in a non-judgmental way, which I think will appeal to teens.

However, there are some science information that are oversimplified, such as follows:

- Does anyone know the 2 types of STI/STDs? (This is oversimplified. There are other forms of STIs like trichomoniasis, which is a protozoon; pubic lice, which is a parasitic insect. )
- Bacterial – These can be treated with antibiotics yet can have
- significant consequences if not treated or if you don't have
- symptoms to know you have an infection. Examples: Syphilis,
- Gonorrhea, Chlamydia (consider changing to "can have significant consequences if not
- detected and treated in a timely manner or if undertreated")
- "One last comment – they (can) piggyback. If someone gets one STD their resistance is
- down, and they (can be) more susceptible to other STD/STI's"

Also, effectiveness of birth control methods mentioned appears accurate. But I think the wording of "If you don't use a birth control method 85% failure rate {31}" is difficult to understand and might overstate risk– could modify this for more clarity, and potentially more effective info. ie "When no birth control method is used, there is an 85% chance of pregnancy in a year of typical use."

