

Curriculum Review Summary Report California Healthy Youth Act

Published Curriculum

Curriculum Title: Positive Prevention Plus Middle School
Edition/Version: 2016 version **Printing (Year):** 2016
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Website/contact: http://www.positivepreventionplus.com/

Grades: Middle School – 9-12
Number of lessons: 13
Cost: \$279
Training offered: Yes, via Cardea Services

Criteria	Description	Compliance Assessment	Determination and Recommendations <small>Action/Curriculum adaptation needed to meet CHYA requirements.</small>
A. CA Education Code Requirements starting Jan. 2016, CA Healthy Youth Act			
Alignment with and Support of CHYA Purposes	<p>All instruction and materials must align with and support the purposes of the California Healthy Youth Act. EC § 51933 (c)</p> <p>All instruction and materials shall align with and support the purposes of this chapter as set forth in paragraphs (1) to (5), inclusive, of subdivision (b) of Section 51930 and may not be in conflict with them.</p>	<p>(1) To provide pupils with the knowledge and skills necessary to protect their sexual and reproductive health from HIV and other sexually transmitted infections and from unintended pregnancy.</p> <p>[Reference: Instruction and Materials]</p>	Compliant: Yes
		<p>(2) To provide pupils with the knowledge and skills they need to develop healthy attitudes concerning adolescent growth and development, body image, gender, sexual orientation, relationships, marriage, and family.</p> <p>[Reference: Instruction and Materials]</p>	Compliant: Yes
		<p>(3) To promote the understanding of sexuality as a normal part of human development.</p> <p>[Reference: Instruction and Materials]</p>	<p>Compliant: No, needs major modifications.</p> <p>Comments:</p> <p>The curriculum conveys a general discomfort about sexuality as a normal part of human development.</p> <p>Instruction on gender and orientation relies on definitions,</p>



Curriculum Review Summary Report California Healthy Youth Act

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			<p>and there are very few examples of same-sex couples throughout the curriculum. The minimal inclusion of LGBTQ representation throughout the curriculum led the reviewers to conclude that LGBTQ students may not feel affirmed about their sexuality being a normal part of human development. .</p> <p>The negotiation skills sections overemphasize refusal skills to the detriment of developing skills to negotiate age-appropriate behaviors.</p> <p>Further, some of the documentation in the appendices is outdated to the degree that it does not promote the understanding of sexuality as a normal part of human development.</p>
		<p>(4) To ensure pupils receive integrated, comprehensive, accurate, and unbiased sexual health and HIV prevention instruction and provide educators with clear tools and guidance to accomplish that end.</p> <p>[Reference: Instruction and Materials]</p>	<p>Compliant: Yes</p>
		<p>(5) To provide pupils with the knowledge and skills necessary to have healthy, positive, and safe relationships and behavior.</p> <p>[Reference: Instruction and Materials]</p>	<p>Compliant: Yes</p>
B. Instruction and Materials EC § 51933			
1	<p>Age Appropriate Material</p> <p>Instruction and materials shall be age appropriate.</p> <p>EC § 51933(a)</p>	<p>“Age appropriate” is refers to topics, messages, and teaching methods suitable to particular ages or age groups of children and adolescents, based on cognitive, emotional, and behavioral capacity typical for the age or age group.</p> <p>EC § 51931(a)</p>	<p>Compliant: Yes</p> <p>Comments:</p> <p>The sexting PowerPoint may have graphic images for middle school age students, but the reviewers believe the intent is to use the PowerPoint with staff and not students</p>

Curriculum Review Summary Report California Healthy Youth Act

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				(although this is unclear in the curricular instructions).
2	Medically Accurate and Objective Information	<p>All factual information presented shall be medically accurate and objective.</p> <p>EC § 51933(b).</p>	<p>“Medically accurate” means verified or supported by research conducted in compliance with scientific methods and published in peer-reviewed journals, where appropriate, and recognized as accurate and objective by professional organizations and agencies with expertise in the relevant field such as the federal Centers for Disease Control and Prevention, the American Public Health Association, the American Academy of Pediatrics and the American College of Obstetricians and Gynecologists.”</p> <p>EC § 51931(f)</p>	<p>Compliant: No, needs modification.</p> <p>Comments:</p> <p>Full and detailed medical reviews have been given directly to the publisher/author.</p> <p>This curriculum contains one or all of the following: outdated information, inaccurate information, and/or uncited data.</p> <p>Per Education Code 51931(f), refer to the listed agencies’ current websites for the most medically accurate and objective information.</p>
3	Inclusivity Appropriate	<p>Instruction and materials shall be appropriate for use with pupils of all races, genders, sexual orientations, ethnic and cultural backgrounds, pupils with disabilities, and English learners.</p> <p>EC § 51933(d)(1)</p>		Compliant: Yes
4	English Learners	<p>Instruction and materials shall be made available on an equal basis to a pupil who is an English learner, consistent with the existing curriculum and alternative options for an English learner pupil as otherwise provided in this code.</p> <p>EC § 51933(d)(2)</p>		<p>All local educational agencies are required to ensure that curricula, including homework, are available to all student populations in primary language determined by previous year’s language census data.</p> <p>Comments:</p> <p>This curriculum has a student workbook in Spanish and parent information in Spanish. These were not reviewed.</p>
5	Youth with Disabilities	<p>Instruction and materials shall be made accessible to pupils with disabilities, including, but not limited to, the provision of a modified curriculum, materials and instructions in</p>		<p>All local educational agencies are required to ensure that curricula, including homework, are available to all students in formats and modalities that meet their students’ specific instructional needs.</p>

Curriculum Review Summary Report California Healthy Youth Act

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		alternative formats, and auxiliary aides. EC § 51933(d)(3)		Comments: There is a version of this curriculum for “special populations” that was not reviewed. Appendix B section titled "Special Issues" on pages 573-577 on parent resources for youth with disabilities is not cited and outdated (for example: references from 1986 and 1991). It references “homosexuality” despite on p. 37 of Lesson 1 part C notes column the curriculum authors themselves state that the term “homosexuality” is outdated. It references Norplant, a contraceptive method that is no longer on the market; assumes that parents will be opposed to having a gay or lesbian child; and glosses over the very fraught topic of sterilization of people with disabilities. This section should be replaced with something more current.
6	Unbiased Instruction	Instruction and materials shall not reflect or promote bias against any person on the basis of disability, gender, gender identity, gender expression, nationality, race or ethnicity, religion, sexual orientation, or any category protected by Section 220. EC § 51933(d)(4)		Compliant: Yes
7	Sexual Orientation	Instruction and materials shall affirmatively recognize that people have different sexual orientations and, when discussing or providing examples of relationships and couples, shall be inclusive of same-sex relationships. EC § 51933(d)(5)	Affirmatively recognize that people have different sexual orientations.	Compliant: No, needs major modification. Comments: The teacher binder defines these terms: sex, gender, gender role, gender identity, gender expression, and sexual orientation. However, the PowerPoint slides instruct the teacher to move the cursor over each term for an illustration but lack a definition. The binder and slides need to match. In Lesson 1 the curriculum encourages respect for differences and appreciation for diversity; however, this

Curriculum Review Summary Report California Healthy Youth Act

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				does not carry throughout the curriculum through the use of examples of diverse relationships.
			Provides examples of relationships and couples that are inclusive of same-sex relationships.	<p>Compliant: Yes</p> <p>Comments: Limited examples meet the minimum criteria; however there should be more examples of same-sex couples and relationships throughout.</p>
			Includes discussion of relationships and couples that are inclusive of same-sex relationships.	<p>Compliant: Yes</p> <p>Comments: Although there is limited discussion of same-sex relationships and couples, this meets the minimum criterion.</p> <p>This criterion should be improved through the use of same-sex names in addition to gender neutral names for scenarios and roleplays. This curriculum has very few vignettes/scenarios that represent the range of relationships, including LGBTQ relationships.</p>
8	Gender	<p>Instruction and materials shall teach pupils about gender, gender expression, gender identity, and explore the harm of negative gender stereotypes.</p> <p>EC § 51933(d)(6)</p>	Teaches about gender, gender expression, gender identity, and explores the harm of negative gender stereotypes.	<p>Compliant: No, needs minor modification.</p> <p>Comments: Instruction should more thoroughly address gender and the harm of negative gender stereotypes.</p> <p>The "Different Gender" activity in Lesson 1 could be trivializing to transgender students and/or those students who do not fit into the gender binary. The activity conflates gender expression and gender identity and does not thoroughly explore the harm of negative gender stereotypes.</p>
9	Adolescent	Instruction provides pupils with the knowledge	Teaches and promotes healthy attitudes about	Compliant: Yes

Curriculum Review Summary Report California Healthy Youth Act

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	Development and Body Image	and skills to develop healthy attitudes concerning adolescent growth and development and body image. EC § 51930(a)(2)	adolescent development and body image.	Comments: Body image was mentioned primarily as something teens might be concerned about; there should be more instruction on how to develop a healthy sense about oneself and body image.
10	Communication with Parents, Guardians, Trusted Adults	Instruction and materials shall encourage a pupil to communicate with his or her parents, guardians and other trusted adults about human sexuality and provide the knowledge and skills necessary to do so. EC § 51933(e)	Encourages communication with parents, guardians or other trusted adults about human sexuality.	Compliant: Yes Comments: Every homework and class assignment has parent/trusted adult communication or engagement The homework/workbook is to be done by student and parent/trusted adult together.
11	Committed Relationships	Instruction and materials shall teach the value of and prepare pupils to have and maintain committed relationships such as marriage. EC § 51933(f)	Teaches the value and prepares pupils to have and maintain committed relationships, such as marriage.	Compliant: Yes
12	Healthy Relationships	Instruction and materials shall provide pupils with knowledge and skills they need to form healthy relationships that are based on mutual respect and affection, and are free from violence, coercion, and intimidation. EC § 51933(g).	Builds knowledge and skills to form healthy relationships that are based on mutual respect and affection, and are free from violence, coercion, and intimidation.	Compliant: Yes
13	Healthy Decision Making	Instruction and materials shall provide pupils with knowledge and skills for making and implementing healthy decisions about sexuality, including negotiation and refusal skills to assist pupils in overcoming peer pressure and using effective decision-making skills to avoid high-risk activities. EC § 51933(h)	Provides knowledge and skills for making and implementing healthy decisions about sexuality.	Compliant: Yes

Curriculum Review Summary Report California Healthy Youth Act

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14	Religious Doctrine Instruction and materials <u>may not teach or promote religious doctrine.</u> EC § 51933(i)	Does not promote religion/religious doctrine.	Compliant: Yes
Content: Factual and Medically Accurate Information EC § 51934			
15	Nature of HIV and STIs Information on the nature of HIV, as well as other sexually transmitted infections and their effects on the human body. EC § 51934 (a)(1)	Provides information on the nature of HIV and its effects on the human body.	Compliant: Yes Comments: “Little Secret” video is not representative of HIV-infected individuals today; hemophiliacs and rape survivors do not comprise the majority of the new infections in 2016. However, this video does utilize youth voices to describe HIV infection.
		Provides information on the nature of other STIs and their effects on the human body.	Compliant: Yes
16	Transmission of HIV Information on the manner in which HIV and other STIs are and are not transmitted, including information on the relative risk of infection according to specific behaviors, including sexual activities and injection drug use. EC § 51934(a)(2)	Provides information regarding the transmission of HIV.	Compliant: Yes, if HIV/AIDS FAQ handout is distributed to students. Comments: HIV/AIDS FAQ handout has this information. It is unclear whether this handout is to be given to students, but the reviewers assume that the intent is to provide this information to the students. Injection drug use is mentioned in the PrEP master on page 189 in the binder, but not on the corresponding PowerPoint slide. This should be corrected. “Red Light/Green Light” activity does not have a card for vaginal, anal, and oral sex with a condom which is an important concept relative to risk.

Curriculum Review Summary Report California Healthy Youth Act

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17	Transmission of STI's	<p>Information on the manner in which HIV and other STIs are and are not transmitted, including information on the relative risk of infection according to specific behaviors, including sexual activities and injection drug use.</p> <p>EC § 51934(a)(2)</p>	Provides information regarding the transmission of other STIs.	<p>Compliant: No, needs minor modification.</p> <p>Comments:</p> <p>There is no instructional guidance for the STI grid. The STI grid would need to be passed out and incorporated into the lesson to be compliant.</p> <p>Only condoms and abstinence are discussed for risk reduction of STIs.</p> <p>The links and references, specifically those from the California Department of Public Health and the Hookup text service, are outdated.</p> <p>Should provide more information on injection drug use, but it is mentioned.</p>
18	Abstinence from Sexual Activity and Drug Use	<p>Information that abstinence from sexual activity and injection drug use is the only certain way to prevent HIV and other sexually transmitted infections and abstinence from sexual intercourse is the only certain way to prevent unintended pregnancy. Instruction shall provide information on the value of delaying sexual activity while also providing medically accurate information on other methods of preventing HIV and other sexually transmitted infections and pregnancy</p> <p>EC § 51934(a)(3)</p>	<p>Provides information that abstinence from sexual activity and injection drug use is the only certain way to prevent HIV and other STIs.</p> <p>Provides information regarding abstinence from sexual activity being the only certain way to prevent pregnancy as well as provide information about the value of delaying sexual activity.</p>	<p>Compliant: No, needs minor modification.</p> <p>Comments:</p> <p>This is missing that abstinence from injection drug use, delaying sexual activity, and abstaining from naked genital-to-genital contact are methods of prevention from HIV and STIs.</p> <p>Compliant: Yes</p>

Curriculum Review Summary Report California Healthy Youth Act

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19	Methods of Protection, HIV and STIs	<p>Information about the effectiveness and safety of all federal Food and Drug Administration (FDA) approved methods that prevent or reduce the risk of contracting HIV and other sexually transmitted infections, including use of antiretroviral medication, consistent with the federal Centers for Disease Control and Prevention.</p> <p>EC § 51934(a)(4)</p>	<p>Provides information about the effectiveness and safety of the FDA approved antiretroviral medical intervention consistent with the U.S. Centers for Disease Control and Prevention.</p>	<p>Compliant: No, needs minor modification.</p> <p>Comments: The curriculum instructs teachers to “close the binder and go off the slide set.” However, PEP is not mentioned in slide set, but it is in the binder. The binder and the slide set need to match.</p>
			<p>Provides information about the effectiveness and safety of all FDA approved methods that prevent or reduce the risk of contracting HIV and other STIs.</p>	<p>Compliant: Yes</p> <p>Comments: Lesson 8 binder page 229 says that Hepatitis B and HPV can be completely prevented by vaccinations: this is inaccurate.</p> <p>On page 229 “Gardasil” is misspelled as “Guardasil”.</p> <p>Full medical reviews have been sent to publishers/authors.</p>
20	HIV Risk Reduction	<p>Information about the effectiveness and safety of reducing the risk of HIV transmission as a result of injection drug use by decreasing needle use and needle sharing.</p> <p>EC § 51934(a)(5)</p>	<p>Provides information about the effectiveness and safety of reducing HIV transmission by decreasing needle use and needle sharing.</p>	<p>Compliant: Yes, if HIV/AIDS FAQ handout is distributed to students.</p>
21	Treatment of HIV and STIs	<p>Information about the treatment of HIV and other sexually transmitted infections, including how antiretroviral therapy can dramatically prolong the lives of many people living with HIV and reduce the likelihood of transmitting HIV to others.</p>	<p>Provides information about treatment of HIV and other STIs that can reduce the likelihood of transmitting HIV to others.</p>	<p>Compliant: Yes</p> <p>Comments: Should provide more information on treatment of STIs and HIV.</p>
		<p>EC § 51934(a)(6)</p>	<p>Provides information how antiretroviral therapy can dramatically prolong the lives of many people living with HIV and reduce the likelihood of transmitting HIV to others.</p>	<p>Compliant: Yes</p>

Curriculum Review Summary Report California Healthy Youth Act

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22	Social Views About HIV and AIDS	<p>Discussion about social views on HIV and AIDS, including addressing unfounded stereotypes and myths regarding HIV and AIDS and people living with HIV. This instruction shall emphasize that successfully treated HIV-positive individuals have a normal life expectancy, all people are at some risk of contracting HIV, and the only way to know if one is HIV-positive is to get tested.</p> <p>EC § 51934(a)(7)</p>	<p>Provides discussion on social views and addresses myths and stereotypes about HIV and AIDS, and people living with HIV.</p> <hr/> <p>Emphasizes the following required CHYA instruction:</p> <ul style="list-style-type: none"> • That successfully treated HIV-positive individuals have a normal life expectancy • All people are at risk for contracting HIV • The only way to know if someone has HIV is to get tested 	<p>Compliant: Yes</p> <p>Comments:</p> <p>The Lesson 6 “Loss Activity” could be triggering for some students. Reviewers encourage using a trauma-informed approach for this activity.</p> <hr/> <p>Compliant: Yes</p>
23	Resources and Rights to Sexual and Reproductive Health Care Access	<p>Information about local resources, how to access local resources, and pupils’ legal rights to access local resources for sexual and reproductive health care such as testing and medical care for HIV and other sexually transmitted infections and pregnancy prevention and care, as well as local resources for assistance with sexual assault and intimate partner violence.</p> <p>EC § 51934(a)(8)</p>	<p>Provides information about local resources, how to access local resources, and youth’s legal rights to access local resources for sexual and reproductive health.</p>	<p>Compliant: No, needs minor modifications.</p> <p>Comments:</p> <p>LEAs will need to develop their own local resource list. There is some guidance provided within the curriculum about creating a local resource guide.</p> <p>There is incorrect information about minor consent that needs to be changed. There is no age requirement for minors accessing pregnancy-related services, including contraception. A full list of the rights of minors is here: http://teenhealthlaw.org/wp-content/uploads/2015/10/CaMinorConsentConfChartFull11-11.pdf</p>
24	FDA Approved Contraceptive Methods	<p>Information about the effectiveness and safety of all FDA-approved contraceptive methods in preventing pregnancy, including, but not limited to, emergency contraception.</p>	<p>Provides information on the effectiveness and safety of all FDA-approved contraceptive methods:</p> <ul style="list-style-type: none"> • Implants 	<p>Compliant: No, needs minor modification.</p> <p>Complete medical reviews have been sent to the publishers/authors.</p> <p>The “Birth Control Choices for Teens” chart states that</p>

Curriculum Review Summary Report California Healthy Youth Act

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		EC § 51934(a)(9)	<ul style="list-style-type: none"> • Intrauterine devices (IUDs) • The Shot • The Ring • The Patch • The Pill • Condoms: External ("male condom") • Condom: Internal/Insertive ("female condom") • Other barrier methods • Permanent methods • Emergency contraception 	<p>male/external condoms are recommended to be used with spermicides. This information could not be found using the citation given. Spermicides may be an irritant and thus diminish the advantage of condom use as a method to reduce the risk of STIs and HIV.</p> <p>It is unclear why the female/insertive condom is grouped with spermicides in the "Birth Control Choices for Teens" chart. It should be clarified that insertive condoms do not need to be used with spermicides.</p> <p>The "Birth Control Choices for Teens" chart states there are no advantages to sterilization, withdrawal, and the rhythm method. This should be improved by offering more nuanced information about the perceived advantages and future advantages of these methods, and describe why these methods may be difficult for younger people to use.</p> <p>Unnecessary detail regarding sterilization surgery versus implant sterilization for middle school students, but it is important to include instruction that sterilization is an option for adults who do not wish to have future children.</p>
25	Legally Available Pregnancy Outcomes	<p>Instruction on pregnancy shall include an objective discussion of all legally available pregnancy outcomes, including, but not limited to, all of the following:</p> <p>(A) Parenting, adoption and abortion</p> <p>(B) Information on the law on surrendering physical custody of a minor child 72 hours of age or younger, pursuant to Section 1255.7 of the Health and Safety Code and Section 271.5 of the Penal Code</p> <p>(C) The importance of pre-natal care</p> <p>EC § 51934(a)(9)</p>	<p>Provides objective discussion on all of the following legally available pregnancy outcomes:</p> <ul style="list-style-type: none"> • Parenting • Adoption • Abortion • Information on surrendering physical custody of a minor child 72 hours of age or younger • Importance of pre-natal care 	<p>Compliant: No, needs minor modification.</p> <p>Comments:</p> <p>The lesson is skewed towards safe-surrender and pre-natal care (4 slides) with no slide on abortion or adoption. This lesson discusses unplanned birth rather than unplanned pregnancy.</p> <p>The one "con" listed for abortion is: "they may experience criticism from others" which is not listed on any of the other options when this may also be a "con" for parenting and adoption</p> <p>This curriculum does not discuss the three pregnancy options equally and does not provide for an objective discussion of each.</p>

Curriculum Review Summary Report California Healthy Youth Act

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26	Harassment, Abuse, Violence and Trafficking	<p>Information about sexual harassment, sexual assault, adolescent relationship abuse, intimate partner violence and sex trafficking.</p> <p>EC § <u>51934(a)(10)</u></p>	<p>Provides information about sexual harassment, sexual assault, adolescent relationship abuse, intimate partner violence and sex trafficking.</p>	<p>Compliant: No, needs major modification.</p> <p>Comments: This section should be completely revised to remove incorrect information and edit for accuracy. Additionally, sexual assault and rape should be defined and addressed through a framework of consent.</p> <p>The top of page 83 starts with a statistic on the percentage of teen births where fathers are 19 years of age or older. This statistic has been proven wrong. In most teen pregnancies, the two parents are within a year or three of each other's age. This statistic is also misleading because it does not acknowledge the age of the mother, which could be 18 or 19 years old and still considered a teen pregnancy.</p> <p>This section is trying to explain the rules of Penal Code 261.5 which is entitled "unlawful sexual intercourse with a minor" and not "statutory rape." By using the words "rape" and "assault" at the end of the page without defining and distinguishing them from Penal Code 261.5, the page conflates rape with "statutory rape" and this is confusing. In addition, if Penal Code 261.5 is addressed, information that provides greater legal context for this statute and its enforcement should be included.</p> <p>"Harassment" is never explicitly mentioned but the "Protect Yourself" activity on page 149 deals with harassing situations and how to deal with them, but this should be enhanced and discussed directly.</p> <p>Lesson 3 video is a great example of student-created media and is used effectively in this lesson.</p>

Curriculum Review Summary Report California Healthy Youth Act

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Additional CA Education Code requirements that allow for implementation of the CA Healthy Youth Act			
27	Right to Obtain Confidential Services Requires school districts to “notify pupils in grades 7-12 inclusive and the parents and guardians of all pupils enrolled in the district, that school authorities may excuse any pupil from school for the purpose of obtaining confidential medical services without the consent of the pupil’s parent or guardian.” EC § 46010.1	Provides the knowledge of the right for the pupil to be excused from school to obtain confidential services.	Compliant: No, needs minor modification. Comments: On page 349 the curriculum states that “anyone 12 and older in California can receive confidential HIV, STI & pregnancy – related services...” This is incorrect. There is no lower age limit for pregnancy–related services and contraception. This same language same language needs to be corrected on the sidebar note on page 104.
28	Resources and Rights for LGBTQ pupils Information on existing school site and community resources related to the support of lesbian, gay, bisexual, transgender, and questioning (LGBTQ) pupils must be provided EC § 234.1(d)	Provides information about local resources, how to access local resources, and youth’s legal rights to access local resources that support LGBTQ pupils and their families	Compliant: No, needs minor modification. Comments: There are some resources in the appendix; however, LEAs will need to provide their own local referrals.
29	Affirmative Consent *required only if a health education course is a graduation requirement Comprehensive information for grades 9-12, inclusive, on sexual harassment and violence that includes but is not limited to all of the following: a discussion of the affirmative consent standard, as defined in paragraph (1) of subdivision (a) of Section 67386 EC § 33544(a)(2)	Provides knowledge of the affirmative consent standard and skills needed to establish boundaries in peer and dating relationships.	N/A for middle school but this is included. There is a note in the teacher’s binder about affirmative consent.

ADDITIONAL COMMENTS:

This curriculum should more strongly embrace the spirit of the law, with a focus on healthy relationships, sexuality as being a healthy part of who we are, and navigating actual relationship dynamics.

Overall, this curriculum is missing citations and reviewers have some concerns about the data sources in some listed statistics. While we understand that data can become outdated quickly, it is much easier for a local education agency to make updates to curricula if they have the data source clearly listed. This is also critical to assessing the medical accuracy of a program.

