



# **KENILWORTH SCHOOL & SIXTH FORM**

## **Relationships and Sex Education Policy**

**MAY 2016**

### **POLICY DETAILS**

Date of policy: May 2016

Date of review: May 2018

Member of staff responsible for overseeing that this policy is implemented and regularly reviewed:  
Deputy Headteacher

## **Introduction – why we need a relationships and sex education (RSE) policy<sup>1</sup>**

“SRE is a lifelong learning process of acquiring information, developing skills and forming positive beliefs and attitudes about sex, sexuality, relationships and feelings” (*Sex Education Forum 1999*).

The 1996 Education Act consolidates all relevant previous legislation and states that all schools must provide an up-to-date policy that describes the content and organisation of RSE provided outside the National Curriculum Science Order. The DfEE Relationships and Sex Education Guidance (2000) supports this legislation and recommends that all schools should have a relationships and sex education programme tailored to the age and physical and emotional maturity of the pupils.

Effective relationships and sex education is key in supporting young people through their physical, emotional and moral development, enabling them to make informed life choices confidently, and furthering their respect for themselves and others as they move through life.

Strong delivery of RSE/PSHE by schools is known to be one of the main factors for reducing teenage pregnancy and improving sexual health (DfES 2006). Key features included; systematic delivery of RSE/PSHE in secondary schools; a strong focus on achieving National Healthy School Status and the use of the DfES RSE Guidance (issued in 2000) as a driver for training and support in schools, including planned programmes of training for Governors.

### **Local and national guidance and priorities**

This policy has been developed from a draft local authority policy based on the following documents:

- Sex and Relationship Education Guidance (DfEE,2000)
- Quality Standards for Sex and Relationships Education (Warwickshire LEA 2002)

#### **National Teenage Pregnancy Strategy**

The strategy was launched in 1999 with two key targets and aims:

- To have the under 18-conception rate by 2010 (with an interim target of 15% reduction by 2004) and establish a firm downward trend in the under 16 rate
- Increase participation of teenage mothers in education, employment, training to 60% by 2010 to reduce the risk for long term social exclusion

#### **Warwickshire Teenage Pregnancy Strategy**

Warwickshire has achieved a decrease in under-18 conception rates of 12.3% since 1998. The ‘traffic light’ assessment rating for progress towards reducing the under 18-conception rate is Red/Amber, where the rating is measured against the decrease in conception rate against the trajectory calculated to meet the 2010 target. However, the

---

<sup>1</sup> Warwickshire County Council has agreed the use of “Relationships and Sex Education (RSE)” as the preferred term for SRE to show a commitment to the importance of healthy relationships within relationships and sex education in schools.. to show a commitment to the importance of healthy relationships within relationships and sex education in schools.

strategy did not meet the 2004 interim reduction target of 15%. Rates of reduction will need to accelerate significantly to meet the 2010 target.

### The Children Act 1989

This places a duty on professionals to talk about relationships and sex with young people in order to help them acquire knowledge and information about their bodies, sex and sexual health and to develop relevant skills.

### The Children Act 2004

This builds on the above in that it places a duty on professionals working with young people to implement the 5 outcomes from Every Child Matters: Change for Children whilst ensuring their entitlement to relationships and sex education.

## **Our aims**

- To help support young people through spiritual, physical, emotional, sexual and moral development
- To deliver a quality relationships and sex education programme to pupils which is appropriate to their needs and meets national standards and initiatives
- To work in partnership with parents, families and the wider community to promote positive relationships and provide effective support for young people.
- To deliver relationships and sex education through a whole-school approach to PSHE Education
- To support staff to work effectively with young people on all personal relationship and sexual health issues.

## **Our objectives and desired outcomes**

In order to achieve the aims above, we will work towards the following objectives:

- Pupils are provided with accurate information
- Young people are taught about human sexuality in a way that encourages them to mature and respect themselves and others
- Children and young people are informed about relationships, love, care and the responsibilities of relationships and parenthood
- Young people are provided with information about different types of contraception, safer sex, where to access contraception and how they can access information from local sources of advice and treatment, including aspects of confidentiality
- Young people are supported to understand how the law applies to sexual relationships

## **Desired outcomes**

- Pupils demonstrate confidence in talking, listening and thinking about feelings and relationships
- Young people make responsible and well-informed decisions about their lives

- Pupils feel prepared for the opportunities, responsibilities and experiences of adult life
- Young people feel informed and supported through the emotional and physical changes of puberty
- Young people develop positive values and a moral framework to guide their decisions, judgements and behaviour
- The incidence of teenage conceptions is reduced
- The incidence of sexually transmitted infections is reduced
- Young people have the skills to avoid being pressured into risk-taking behaviours

## **Staffing and staff development**

During induction to our school, staff will have time planned to gain a good understanding of the relationships and sex education policy and other related policies.

Teachers are provided with training as required to support their delivery of RSE and extend their confidence in doing so. The personal attitudes and beliefs of teachers will not influence their delivery of the RSE curriculum within the PSHE Education framework. Staff who attend training are given opportunity to comment and review RSE training through communication with the PSHE co-ordinator.

## **Relationships and sex education curriculum**

*“SRE is lifelong learning about physical, emotional and moral development. It is about the understanding of the importance of marriage for family life, stable and loving relationships, respect, love and care. It is also about the teaching of sex, sexuality and sexual health. It is not about the promotion of sexual orientation or sexual activity...”*

*(DFEE 2000)*

The sex education elements of the National Curriculum Science Order are mandatory for all pupils of primary and secondary school age. These cover anatomy, puberty, biological aspects of sexual reproduction and use of hormones to control and promote fertility.

Secondary schools are required to provide an RSE programme which includes (as minimum) information about sexually transmitted infections (STIs) and HIV/AIDS.

Other elements of Personal, Social and Health Education (PSHE), including RSE, are non-statutory. However, following a review of Relationships and Sex Education in schools, the Government announced in October 2008 that comprehensive Relationships and Sex Education will be made compulsory as a part of a statutory PSHE Education curriculum in the future.

For more information about the PSHE Education curriculum see the PSHE Education Policy

## **Teaching strategies promoted by the school**

### Ground rules

As established through schemes of work, prior to delivering RSE staff are required to develop a set of ground rules to create a safe environment in which no-one feels embarrassed or anxious about unintended or unexpected questions or comments from pupils. Examples of ground rules the school promote include:

- No-one will have to answer a personal question
- No-one will be forced to take part in a discussion
- Only the correct names for body parts will be used
- Meanings of words will be explained in a sensible and factual way

### Distancing Techniques

Teachers will avoid embarrassment and protect pupils' privacy by always depersonalising discussions. For example, role play will be used to help pupils 'act out' situations about fictitious characters. Case studies with invented characters, appropriate videos and visits to theatre-in-education groups will all help pupils discuss sensitive issues and develop their decision-making skills in a safe environment.

### Dealing with questions

Teachers will establish clear parameters of what is appropriate and inappropriate in a whole class setting. Below are guidelines the school encourages:

- If a question is too personal, the teacher will remind the pupil of the ground rules. If the pupil needs further support, the teacher can refer her or him to the appropriate person, such as a school counsellor, school nurse, helpline, or an outside agency or service
- If a teacher doesn't know the answer to a question, the teacher will acknowledge this, and suggest that the pupil or teacher or both together research the question or refer on to medical practitioners (such as school nurse)
- If a question is too explicit, feels too old for a pupil, is inappropriate for the whole class, or raises concerns about sexual abuse, the teacher will acknowledge it and promise to attend to it later on an individual basis. To maintain trust and respect the teacher must remember to talk with the pupil later and if concerned that a pupil is at risk of sexual abuse, they will follow the school's child protection procedures.

## **How the school will respond to sensitive issues**

*(See also 'Confidentiality and handling disclosures' below)*

### Puberty

Relationships and sex education is established within a context of PSHE Education, so as pupils reach puberty they will know and understand that they will change and develop, and will have confidence in managing the physical and emotional changes.

### Menstruation

The onset of menstruation can be alarming for girls if they are not prepared. As with puberty, the school programme of RSE will include preparation for menstruation and information for both girls and boys. The school will also make adequate and sensitive preparation to help girls cope with menstruation and with requests for sanitary protection.

### Contraception

In line with national and local government guidance, trained staff, such as the school nurse, will give young people full information about different types of contraception,

including emergency contraception and their effectiveness. Trained staff will also give pupils – individually and as a class – additional information and guidance on where they can obtain confidential advice, counselling and, where necessary, treatment.

### Abortion

When abortion is covered within a programme, the school will offer young people the opportunity to explore the dilemmas, enable them to know and understand about abortion, and develop the communication skills to discuss it with parents and health professionals. This is covered in depth through KS4 Short-Course Religious Studies, which is compulsory for all students.

### Safer sex, HIV/AIDS and STIs

The emphasis on relationship and sex education will be on prevention of infection, through delaying sexual activity and teaching the reasons for safer sex. Young people will also be given appropriate information on diagnosis and treatment.

Strategies for teaching about HIV/AIDS and STIs will include:

- Helping pupils clarify their knowledge of HIV/AIDS and STIs
- Teaching them assertiveness skills for negotiating relationships
- Enabling them to become effective users of services that help prevent/treat STIs and HIV

### **Pregnant school girls and school-aged parents**

When a schoolgirl discloses that she is pregnant, the school will identify a key member of staff to co-ordinate education and support for the pregnant schoolgirl. Once parental consent has been agreed, the identified staff member will inform the County Teacher Co-ordinator for School-Age Parents, who co-ordinates education and support for pregnant schoolgirls and school age parents across Warwickshire.

A meeting will take place between the student, her parents/carers, the designated teacher and an Inclusion teacher from the Early Intervention Service, teaching & Learning (EIS). A learning timetable will be developed, taking into account future exams, work experience opportunities and other educational commitments and opportunities. Additional holistic support needs will be identified and referrals made to appropriate support agencies, for example, Children's Centres, housing and counselling services.

The designated teacher will discuss the level of confidentiality within the school and determine who may need to be informed. If there are Child Protection concerns identified, the designated teacher for the student will inform the designated teacher for Child Protection. For those students in public care, the designated teacher for Looked-After Children will determine who may need to be informed. If there are Child Protection concerns identified, the designated teacher for the student will inform the designated teacher for Child Protection. For those students in public care, the designated teacher for Looked-After Children will be included in discussions. For those students on the Special Educational Needs Register, the Special Education Needs Co-ordinator will be included in the discussions, and for those with statements, the relevant Statementing Officer consulted.

The designated teacher will ensure that all associated non-attendance (for medical check-ups and antenatal visits) is properly authorised and seek advice from the School Health Service or Education Social Work Service, as appropriate. The designated teacher will undertake the necessary risk assessments, using the model for pregnant staff members as guidance.

The pregnant pupil will remain in school with support from the EIS, unless medical needs dictate a home support package. Post birth, following an acceptable six-week medical check, a plan will be formulated with appropriate professionals to reintegrate the girl into full-time education. The designated teacher will ensure that the school age mother has received information about the importance of using contraception to prevent a second pregnancy from an appropriate health professional. EIS will continue to support pastorally until the student leaves school by introducing local support groups for young parents and referring to the Connexions service.

Schools should acknowledge the additional needs that school age fathers or fathers-to-be may have, and offer the same support, guidance and advice that they provide to pregnant schoolgirls, signposting to local services if necessary. When the relationship between the school age father and mother continues and the father wants to be involved, the designated teacher should ensure he is supported to attend antenatal and postnatal appointments, the birth itself and other necessary appointments, authorising absence appropriately. With the school age mother's approval, he may also be invited to attend pre and post birth meetings between the school, other professionals and the young woman.

## **Partnerships**

The school liaises closely with parents to reassure them of the content of the RSE programme, the context within which it is taught, and to support them in their teaching of RSE ensuring they feel confident engaging in discussions about the subject with their children.

The school will help support parents in:

- Helping their children learn the correct names of the body parts
- Talking with their children about feelings and relationships
- Answering questions about growing up, having babies, feeling sexual attraction, sex, contraception, relationships and sexual health
- The school will also consult parents regularly on the content of the relationships and sex education programme and invite parents to view RSE resources. The school will ensure that parents are informed of their legal right to remove their child from RSE sessions if they wish.
- Other agencies supporting the school's RSE curriculum are: health professionals, school nurse, healthy living network, and where appropriate, Connexions and the Youth and Community Service, all of which are aware of this policy, the RSE programme and work in-line with it. Outside visitors work within the framework outlined in the school's 'Using outside visitors in school' policy.

## **Equality of opportunity**

All pupils regardless of their developing sexuality are entitled to an RSE curriculum which is relevant to their age group and sensitive to their needs. Teachers should be aware that for some children the RSE they receive at school will be the main, and sometimes only, source of sex education, particularly for children from some ethnic communities.

## **Special educational needs and learning difficulties**

The school will ensure that pupils with special educational needs (SEN) receive relationship and sex education.

Relationship and sex education will help all pupils to understand their physical and emotional development and enable them to make positive decisions in their lives. Some parents and carers of children with SEN may find it difficult to accept their children's developing sexuality. Some pupils will be more confused about what is acceptable public behaviour. These children will be given more help to develop skills to reduce the risks of being abused and exploited, and to learn what sorts of behaviour are, and are not, acceptable.

Teachers may need to be more explicit and plan work in different ways in order to meet the individual needs of children with SEN or learning difficulties. The school will take care not to marginalise relationship and sex education. Pupils with SEN will not be withdrawn from PSHE Education so that they can catch up on National Curriculum subjects.

## **Confidentiality and handling disclosures**

Teachers, pupils and parents should be aware of the boundaries regarding confidentiality within the curriculum. Pupils must be made aware that confidentiality cannot be guaranteed and that they will be informed of all actions relating to their disclosure.

Health professionals are bound by their own codes of conduct to maintain confidentiality. When working within a classroom they are also bound by the school's policies. Outside the classroom situation, they can exercise their own professional judgement maintaining the pupil's best interests at all times.

Teachers cannot offer or guarantee absolute confidentiality, but should ensure pupils are informed of sources of confidential help, e.g. school nurse, counsellor, GP, advice services. If a pupil discloses information which is sensitive, not generally known, and which the pupil asks not to be passed on, the request will be honoured unless this is unavoidable in order for the teacher to fulfil their professional responsibilities. Only in the most exceptional circumstances will information be handled without parental knowledge. Where younger pupils are involved this will be grounds for serious concern and child protection issues should be addressed.

## **Management and co-ordination**

Our school's relationships and sex education programme is co-ordinated as part of Personal, Social, Health and Economic Education by PSHE Education Co-ordinator, and as part of Science, by the Science Co-coordinator. They are supported by the Deputy Head in charge of curriculum.

Child Protection designated teachers are clear on all procedures and progressive steps in dealing with incidents should they arise. This policy will be reviewed every 2 years as part of the school's rolling programme of policy reviews. The review will be led by the PSHE Co-ordinator and supported by governors and the senior management team. The effectiveness of the policy will be judged according to quality of the written, oral and observed evidence available to demonstrate that the objectives and desired outcomes stated above have been achieved.

## **Further information**

For further information about current initiatives and resources to support relationships and sex education agenda visit: [www.warwickshire.gov.uk/respectyourself](http://www.warwickshire.gov.uk/respectyourself);  
[www.warwickshirehealthyschools.com](http://www.warwickshirehealthyschools.com) and [www.healthyschools.gov.uk](http://www.healthyschools.gov.uk).