



Bishop Fox's

High Standards & High Expectations

SEX AND RELATIONSHIPS EDUCATION POLICY

No.207

Date reviewed by Governors: May 2014

SEX AND RELATIONSHIPS EDUCATION POLICY

PURPOSE:

This policy sets out to define sex and relationship education and describe how it will be provided, monitored and evaluated. Teachers and all those contributing to sex and relationship education will be expected to work within the framework of this policy which takes account of current legislation.

This policy has been developed by representatives from the Governing body, teaching and non-teaching staff, parents and students with support from the advisory teacher for health related education.

Staff will have the full support of the Headteacher, Governors, LEA and parents if the guidance is followed.

AIMS:

- To provide all students with knowledge, to help understand relationships and support them when making decisions about their sexual health and relationships
- To provide those delivering sex and relationship education with guidelines as to content and teaching strategies
- To inform and support parents and carers

Sex and relationship education is lifelong learning about physical, moral and emotional development. It is about the understanding of the importance of family life, stable and loving relationships, respect, love and care. It is also about the teaching of sex, sexuality, and sexual health.

OBJECTIVES:

Young people should be prepared for an adult life in which they can:

- develop positive values and a moral framework that will guide their decisions, judgements and behaviour;
- be aware of their sexuality and understand human sexuality;
- understand the arguments for delaying sexual activity;
- understand the need for protected sex;
- understand the consequences of their actions and behave responsibly within sexual and pastoral relationships;
- have the confidence and self-esteem to value themselves and others and have respect for individual conscience and gain the skills to judge what kind of relationships they want;
- communicate effectively
- have sufficient information and skills to protect themselves and, where they have one, their partner from unintended/unwanted conceptions, and sexually transmitted infections including HIV;
- avoid being exploited or exploiting others;
- avoid being pressured into unwanted or unprotected sex;
- be aware of how to access confidential sexual health advice and support from outside agencies
- know how the law applies to sexual relationships.

All teachers should have the right to opt out of teaching topics which they find it difficult to teach because they hold moral reservations about content or method. Nevertheless all teachers must be familiar with the details of this policy.

The school must respect the right of individual parents to withdraw their children from all or part of the prescribed sex education programme, but not from teaching the biological aspects of human growth and reproduction necessary under national curriculum science. Procedures for doing this should be published in the school prospectus, which invites parents to contact the Headteacher in writing to request that their child be withdrawn from such curriculum provision. Prior to students completing a sex education module within the PSHE programme, parents will be informed by letter the intention to start this work.

Sex and relationship education will be delivered through the relevant National Curriculum Science topics, Religious Education and Personal Health and Social Education. See Appendix A

Equal Opportunities:

The whole school community will support an approach to sex and relationships education which ensures that no individual will be discriminated against on grounds of gender, race, religion or sexual orientation.

Through their representatives, all groups within the school community will be consulted, their views sought and included in the planning and delivery of the programme. The specific needs of groups within the school will be addressed appropriately.

Specific issues statements:

Teachers are not professionally qualified to give specific 'advice' about contraception to an individual, but are able, when considered appropriate, to give general information about contraceptives and their supply, redirecting specific enquires to health professionals. See Appendix B

Visitors will be used as an extra support resource and not supplant the role of the teacher in the sex and relationship programme.

This policy has links with the school's policies on Child Protection, Behaviour, PSHE and Confidentiality.

There will be no discrimination against any member of the school community who is infected or affected by HIV. The school's first aid procedures will be sufficiently rigorous to prevent any potential transmission of this and other blood borne similar viruses.

Health Clinic:

Since 2009-10 school year we have introduced an on-site health clinic service. This provides a source of information and support for students on a confidential basis. It is staffed by a school nurse on a weekly basis. In addition to this 1:1 referrals and sessions can also be organised or requested on a weekly basis.

Procedures for monitoring and evaluation:

A sample of students will be asked to respond to interim/questionnaires designed to gauge the extent to which they feel that the aims of this policy are met and the educational experience offered effective. This will be undertaken through PSHE in the summer term.

REVIEW AND EVALUATION:

This policy will be subject to annual review and evaluation by Senior Leaders Governors and the School Council.

Such a review will consider:

1. The aims of the policy
2. The curriculum content
3. The appropriateness and effectiveness of provision.

Appendix A

TIME LINE FOR PROGRAMME OF STUDY

YEAR	TERM	PSHE	R.E.	SCIENCE
7	Autumn	Emotional Intelligence, SEAL Programme	Who am I? Self-identity How others see us	Contraception, Birth, Menustration, Changes in puberty
	Spring	Making Choices		
	Summer	Peer Pressure		
8	Autumn			
	Spring		Marriage in religions Purpose of marriage	
	Summer	Healthy relationships and self esteem		
9	Autumn		Experience and self awareness	
	Spring	Healthy and Safe Relationships		Contraception, Birth, Menustration, Changes in puberty
	Summer	School Nurse Sex Ed Programme-STIs "What's love got to do with it"		
10	Autumn		Marriage and Assisted Marriage Abortion Contraception	Fertility Hormones and contraceptive hormones
	Spring	Healthy and Safe Relationships	Euthanasia Sanctity of Life Family pressures	
	Summer	School Nurse Sex Ed Programme	Divorce and family pressures	
11	Autumn	Diversity and Homophobic bullying		Fertility Hormones and contraceptive hormones
	Spring	School Nurse Sex Ed Programme	Relationships, self awareness	
	Summer			

The School Nurse is available for advice through self-referrals, weekly lunchtime sessions or via Pastoral Team.

Appendix B

Confidentiality for adults working in the school community

The DfE Circular 5/94 gives advice and this can be used as guidance, it is not binding in law. It is important that all adults in the school community are aware and understand the boundaries of their legal and professional role and responsibilities.

Teachers and other adults in the school community cannot offer absolute confidentiality however they are expected to act in the students' best interest. Health professionals, when working on a one-to-one basis, are bound by professional codes of conduct which uphold confidentiality. In the classroom situation they are expected to work within the school policy.

Students should be reassured that their best interests will be maintained but that adults in the school community can not offer unconditional confidentiality and students will be encouraged to talk to their parents and carers. Students should be aware of sources of confidential help displayed on public noticeboards in school.

In the case of suspected abuse the school's Child Protection Policy should be followed.

Confidentiality in the classroom.

The classroom is a public place and therefore confidentiality cannot be maintained. Adults and students should be aware that:

- no one (students or adult) will have to answer a personal question;
- no one will be forced to take part in a discussion;
- only the correct names for the body will be used; and
- meanings of words will be explained in a sensible and factual way.

The use of role play, case studies and appropriate videos will avoid embarrassment and protect privacy by depersonalising discussions.

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