

# RELATIONSHIPS AND SEX EDUCATION (RSE) AND HEALTH EDUCATION POLICY

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An academy within:



"Learning together; to be the best we can be"





### . Introduction

- 1.1. Our school's policy on Relationships and Sex Education (RSE) and Health Education is based on the requirements of the Education Act 2002 and the DfE document in which Relationships Education for primary pupils and Relationships and Sex Education (RSE) became statutory for secondary pupils from September 2020.
- 1.2. Additionally, from September 2020, it became compulsory for all schools to teach Health Education. These changes reflected the increasingly complex world today's young people are living their lives in, both on and offline. In today's society, young people need to know how to be safe and healthy, and how to manage their academic, personal and social lives in a positive way.
- 1.3. In the DfE document, RSE and Health Education (2021) is defined as 'learning about physical, moral, cultural, mental and emotional development'. The guidance states that in order to create a happy and successful adult life 'pupils need knowledge that will enable them to make informed decisions about their wellbeing, health and relationships and to build their self-efficiency'
- 1.4. The purpose of this policy is to set out the ways in which our school's provision for relationships and sex education will support pupils through their spiritual, moral, social, emotional and physical development, and prepare them for the opportunities, responsibilities and experiences of life. Our PSHE curriculum aims to enable our pupils to put their knowledge into practice by developing resilience, knowing how and when to ask for help and where to access support. The guidance also sets out both the rights of parents / carers to withdraw pupils from sex education (but not Relationships or Health Education) and the process that headteachers should follow in considering a request from a parent. Parents have the right to request that their child be withdrawn from some or all of sex education, delivered as part of statutory RSE and Health Education (2023)
- 1.5. As the guidance states, schools are able to determine how to deliver the content set out in the DfE guidance, in the context of a broad and balanced curriculum. Staff are fully aware that the delivery of RSE and Health Education lessons for some of our children may trigger experiences of past childhood trauma. This alone or in addition to a lower developmental age and understanding mean that when teaching RSE and Health Education; close partnerships with the school's wellbeing team, parents, carer's, social workers and virtual schools may be called upon to support the RSE and Health Education work with the child/ young adult.

### 2. Aims and objectives

#### 2.1. We teach children about:

- scientific anatomical names
- puberty and the physical development of their bodies as they grow into adults;
- having respect for and being in control of their own bodies;
- body satisfaction and self-concept
- the way humans reproduce;
- the importance of sexual activity as part of a committed, long-term, and





loving relationship between adults; healthy relationships

- that there are different types of families, all of which have equal value;
- discrimination and stereotypes; inclusion
- respect for the views of other people;
- moral questions;
- relationship issues including keeping safe online and seeking help;
- relationships and the media
- recognising the role of human rights in preventing violence against girls and women;
- unwanted contact and consent
- sexual abuse, and what they should do if they are worried about any sexual matters.
- decision making, risk management and support seeking skills
- positive mental health
- protected characteristics
- their rights as part of our 'rights respecting' curriculum

### 3. Context

- 3.1. High quality sex and relationships education helps create safe school communities in which pupils can grow, learn and develop positive, healthy behaviour for life. We teach RSE and Health Education on the understanding that:
  - it is taught in the context of family life;
  - it is part of a wider process of social, personal, spiritual and moral education;
  - children should be taught to have respect for their own bodies;
  - children should learn about their responsibilities to others, and be aware of the consequences of sexual activity;
  - our young people have the right to say no and they are able to change their minds at any point during sexual activity
  - our young people are aware of the rights of others and are taught about the importance of consent
  - children develop respect for diversity, risk management and support seeking skills.
  - it is important to build positive relationships with others, involving trust and respect, both in person and online;
  - it makes a significant contribution to our duty to safeguard and protect all children;
  - it plays a key role in improving health outcomes for children and young people, enhancing their decision making and support seeking skills and reducing teenage pregnancy and risk taking behaviour
- 3.2. Our RSE and Health Education programme is one of the most important ways we act on our responsibility to safeguard and protect our children, as set out in our Safeguarding/Child Protection policy. We also refer to guidance from the government and expert organisations on specific safeguarding issues, which are relevant to our cohort of children, as





listed in *Keeping Children Safe in Education*. To safeguard children effectively it is vital that opportunities are created in the curriculum to teach about healthy behaviour, caring relationships, online safety and when and how to get help. At our school we encourage children to develop skills in these areas so that they are equipped with strategies to help themselves in preventing or reporting harm or abuse.

3.3. In accordance with the principles of the Equality Act (2010), we believe that every child is entitled to receive RSE and Health Education regardless of ethnicity, gender, religion, age, cultural heritage, disability, sexuality, language needs or special educational needs. We use an inclusive, whole school approach to ensure RSE and Health Education can be accessed in an age appropriate way throughout a child's school career.

### 4. Organisation and Content

- 4.1. We teach about sex and relationships through different aspects of the curriculum. While we carry out the main RSE and Health Education in our PSHE curriculum, we also deliver some RSE and Health Education through the statutory science curriculum and other subject areas, such as ICT and PE. We also have our own Rights Respecting curriculum, in which children are taught weekly about their rights and RSE and Health Education is consolidated through this curriculum. We believe all of these contribute significantly to children's knowledge and understanding of their own bodies, and how they are changing and developing.
- 4.2. In PSHE, we use Rotherham Healthy Schools and the PSHE Association programme of study for PSHE to inform our curriculum. We adapt our curriculum to suit the needs of our young people and the PSHE lead devises a long-term curriculum for teachers to follow. We teach children about relationships, and what a healthy relationship looks like, including boundaries and consent. We encourage children to discuss the changes that happen as they grow up. We teach about the parts of the body, including the private parts, inappropriate touching, why males and females are different, and we explain to the children what will happen to their bodies during puberty. We encourage the children to ask for help if they need it, through real-world context. We ensure that both boys and girls know why children's bodies change during puberty, how to manage puberty when it happens, and how babies are made and born in the context of an adult sexual relationship. We always teach this with due regard for the emotional development of the children.
- 4.3. Under the science curriculum, teachers inform children about males and females and how a baby is born. We teach children that animals, including humans, produce offspring, which grow into adults, and we also teach them about the main parts of the body .Alongside this we teach about life processes including reproduction and the main stages of the human life cycle, in greater depth.

#### The role of parents

4.4. The school is well aware that the primary role in children's RSE and Health





Education lies with parents and carers. We therefore wish to build a positive and supporting relationship with the parents of children at our school, through mutual understanding, trust and cooperation. To promote this objective, we:

- inform parents about the school's RSE and Health Education policy and practice;
- answer any questions that parents may have about the RSE and Health Education of their child;
- take seriously any issue that parents raise with teachers or governors about this policy, or about the arrangements for RSE and Health Education in the school;
- encourage parents to be involved in reviewing the school policy, and making modifications to it as necessary;
- inform parents about the best practice known with regard to RSE and Health Education,, so that the teaching in school supports the key messages that parents and carers give to children at home;
- make the RSE and Health Education resources used in our lessons available for viewing.
- **4.4.1.** We believe that through this mutual exchange of knowledge and information, children will benefit from being given consistent messages about their changing bodies and their increasing responsibilities.
- 4.4.2. We acknowledge that parents have the right to withdraw their children from all or part of the sex education (but not relationships or health, as per DfE 2020 statutory requirements) taught in the school except for those parts included in the statutory National Curriculum: all children are expected to learn the content of the national science curriculum (see Appendix 1).
- 4.4.3. Parents are encouraged to establish exactly what is covered in the RSE and Health Education lessons relevant to their child's year group and discuss any concerns about lesson content with staff at the earliest opportunity. This is posted as a link on the school's website and has each class learning outlined linked to questions and themes. Children's PSHE long term overview will be shared with parents and if a parent wishes for their child to be withdrawn from any sex education lessons, they are able to fill in the reply slip on the letter informing them of their child's PSHE learning or RSE and Health Education week. The PSHE lead is available as first point of call should the need arise to discuss aspects of the programme and any concerns they might have. The school always complies with the wishes of parents in this regard.

#### The role of other members of the community

4.5. We encourage other valued members of the community to work with us to provide advice and support to the children with regard to health education. In particular, members of the local health authority, such as the school nurse and other health professionals, and our local community police officer, workshops and theatre companies can give us valuable support with our RSE and Health Education programme.





#### The role of the headteacher

4.6. It is the responsibility of the headteacher to ensure that both staff and parents are informed about our RSE and Health Education policy, and that the policy is implemented effectively. It is also the head teacher's responsibility to ensure that members of staff are given sufficient training, so that they can teach about RSE and Health Education effectively, and handle any difficult issues with sensitivity. The head teacher/PSHE Lead liaises with external agencies regarding the school RSE and Health Education programme, and ensures that all adults who work with our children on these issues are aware of the school policy, work within its framework and reports to governors, when requested, on the effectiveness of the policy.

### 5. Confidentiality

5.1. Teachers conduct RSE and Health Education lessons in a sensitive manner, and in confidence. However, if a child makes a reference to being involved (or being likely to be involved) in sexual activity, then the teacher will deal with it as a matter of safeguarding/child protection. Teachers will respond in a similar way if a child indicates that they may have been a victim of abuse. They will not try to investigate, but will immediately inform the named person for child protection issues about their concerns. The Designated Safeguarding Lead will then deal with the matter in consultation with health care professionals and other relevant agencies, as set out in our Safeguarding/Child Protection policy.

### 6. Monitoring and review

6.1. The policy review board is responsible for monitoring the delivery of our RSE and Health Education policy. The policy review board give due consideration to any comments from parents about the RSE and Health Education programme, and require the head teacher to keep a written record of parents' comments.





## **Appendix 1: SRE Elements of the National Science Curriculum**

#### Pupils should be taught to:

• identify, name, draw and label the basic parts of the human body and say which part of the body is associated with each sense

#### Pupils should be taught to:

- notice that animals, including humans, have offspring which grow into adults
- describe the importance for humans of exercise, eating the right amounts of different types of food, and hygiene

#### Pupils should be taught to:

- describe the life process of reproduction in some plants and animals
- describe the changes as humans develop to old age

#### Pupils should be taught to:

 recognise that living things produce offspring of the same kind, but normally offspring vary and are not identical to their parents

Department for Education, September 2013

At Abbey School, we use the PSHE Association programme builders to help to develop our PSHE education schemes of work, whilst ensuring that RSE and Health Education content is fully covered. We adapt the programme of study to fit the needs of our young people. L1-L5 follow the primary curriculum, with L1-L3 following a questions-based model and L4 and L5 following a thematic model, covering the three key themes of relationships, health and wellbeing and living in the wider world.

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		Autumn 1 Relationships	Autumn 2 Relationships	Spring 1 Health and Wellbeing	Spring 2 Living in the wider world	Summer 1 Health and Wellbeing	Summer 2 Living in the wider world	
		Relationships	Relationships	Treater and Weinseling	Living in the wider world	Treater and Weinseling	Living in the what world	ıst
		What is the same and different about us?	Who is special to us?	What helps us stay healthy?	What can we do with money?	Who helps to keep us safe?	How can we look after each other and the world?	
<u>-</u>	<b>L</b> 1	Ourselves and others; similarities and differences; individuality; our bodies	Ourselves and others; people who care for us; groups we belong to; families	Being healthy; hygiene; medicines; people who help us with health	Money; making choices; needs and wants	Keeping safe; people who help us	Ourselves and others; the world around us; caring for others; growing and changing	
2	2	Friendship; feeling	What is bullying? Behaviour; bullying; words and actions; respect for others	safe? Keeping safe; recognising	People and jobs; money; role of the internet	stay healthy? Being healthy: eating, drinking, playing and	How do we recognise our feelings? Feelings; mood; times of change; loss and bereavement; growing up	
2	2	How can we be a good friend? Friendship; making positive friendships, managing loneliness, dealing with arguments	What are families like? Families; family life; caring for each other	What keeps us safe? Keeping safe; at home and school; our bodies; hygiene; medicines and household products	What makes a community?  Community; belonging to groups; similarities and differences; respect for others	Why should we eat well and look after our teeth? Being healthy: eating well, dental care	Why should we keep active and sleep well? Being healthy: keeping active, taking rest	

Autumn: Relationships			Spring: Living in the wider world			Summer: Health and Wellbeing		
Families and friendships	Safe relationships	Respecting ourselves and others	Belonging to a community	Media literacy and digital resilience	Money and work	Physical health and Mental wellbeing	Growing and changing	Keeping safe
Positive friendships,	Responding to	Respecting differ-	What makes a	How data is shared	Making decisions	Maintaining a bal-	Physical and emo-	Medicines and
including online	hurtful behaviour;	ences and similari-	community; shared	and used	about money; using	anced lifestyle; oral	tional changes in	household products
	managing confiden-	ties; discussing dif-	responsibilities		and keeping money	hygiene and dental	puberty; external	drugs common to
	tiality; recognising risks online	ference sensitively			safe	care	genitalia; personal hygiene routines;	everyday life
							support with pu- berty	
Managing friend-	Physical contact and	Responding respect-	Protecting the envi-	How information	Identifying job inter-	Healthy sleep	Personal identity;	Keeping safe in
ships and peer	feeling safe	fully to a wide range	ronment; compas-	online is targeted;	ests and aspirations;	habits; sun safety;	recognising individ-	different situations,
influence		of people; recognis-	sion towards others	different media	what influences	medicines, vaccina-	uality and different	including responding
		ing prejudice and		types, their role and	career choices;	tions, immunisations	qualities; mental	in emergencies, first
		discrimination		impact	workplace stereo-	and allergies	wellbeing	aid and FGM

As our pupils reach secondary PSHE education, students follow a competencies based approach, learning skills and attributes in independence and aspirations; autonomy and advocacy and choices and influences (including risk management and help-seeking strategies). Building knowledge and developing competencies is an essential part of our PSHE curriculum.

	Autumn 1 Autumn 2		Spring 1	Spring 2	Summer 1	Summer 2
	Independence and Autonomy and advocacy Choice		Choices and influences	Independence and aspirations	Autonomy and advocacy	Choices and influences
79	Developing goal setting, organisation skills and self-awareness: Personal identity and values Learning skills and teamwork Respect in school	Developing empathy, compassion and communication:  Making and maintaining friendships Identifying and challenging bullying Communicating online	Developing agency, strategies to manage influence and decision making:  Regulating emotions  Diet and exercise  Hygiene and dental health  Sleep	Developing self-confidence and self-worth:  • Puberty and managing change  • Body satisfaction and self-concept	Developing assertive communication, risk management and support-seeking skills:  Rights in the community  Relationship boundaries  Unwanted contact  FGM and forced marriage	Developing agency and decision making skills:  Drugs, alcohol and tobacco  Safety and first aid
U1_and Horizon 1	Managing online presence     Digital and media literacy	Developing respect for beliefs, values and opinions and advocacy skills:  Stereotypes, prejudice and discrimination  Promoting diversity and equality	Developing agency and strategies to manage influence and access support:  Drugs and alcohol Introduction to contraception Resisting peer influence Online choices and influences	Developing goal setting, motivation and self-awareness:  Aspirations for the future  Career choices  Identity and the world of work	Developing communication and negotiation skills, clarifying values and strategies to manage influence:  Healthy relationships Boundaries and consent LGBT+ inclusivity 'Sexting' Managing conflict	Developing agency and strategies to manage influence and access support:  Maintaining positive mental health Importance of physical activity
U2 U3 and Horizon 2	skills and decision making: GCSE options Sources of careers advice Employability	Developing self-confidence, risk management and strategies to manage influence:  Friendship challenges  Gangs and violent crime  Drugs and alcohol  Assertive communication	Developing empathy, compassion and strategies to access support:  Mental health (including self-harm and eating disorders)  Change, loss and bereavement  Healthy coping strategies	Developing analytical skills and strategies to identify bias and manage influence:  Financial decisions  Saving and borrowing  Gambling, financial choices and debt	Developing assertive communication, clarifying values and strategies to manage influence:  Healthy/unhealthy relationships  Consent  Relationships and sex in the media	Developing decision making, risk management and support-seeking skills:  Sexually transmitted infections (STIs)  Contraception  Cancer awareness  First aid
U4 and Horizon 3	Managing transition to key stage 4 including learning skills     Managing mental health concerns	Developing empathy and compassion, strategies to manage influence and assertive communication:  Relationship expectations  Impact of pomography  Identifying and responding to abuse and harassment	Developing agency and decision making, strategies to manage influence and access support:  First aid and life-saving  Personal safety  Online relationships	Developing goal setting, leadership and presentation skills: Skills for employment Applying for employment Online presence and reputation	Developing respect for diversity, risk management and support-seeking skills:  Nature of committed relationships  Forced marriage  Diversity and discrimination  Extremism	Developing motivation, organisation, leadership and presentation skills:  Preparation for, and reflection on, work experience

U5 – U6 & Horizon 4	Developing resilience and risk management skills:  Money management  Fraud and cybercrime  Preparing for adult life	Developing communication and negotiation skills, risk management and support-seeking skills:  Relationship values  Maintaining sexual health  Sexual health services  Managing relationship challenges and endings	Developing confidence, agency and support-seeking skills:  Making safe and healthy lifestyle choices  Health promotion and self-examination  Blood, organ, stem cell donation	Developing empathy and compassion, clarifying values and support-seeking skills:  Families and parenting  Fertility, adoption, abortion  Pregnancy and miscarriage  Managing grief and loss	Developing confidence, self-worth, adaptability and <u>decision making</u> skills:  Recognising and celebrating successes  Transition and new opportunities  Aligning actions with goals	Developing motivation, organisation, leadership and presentation skills:  Preparation for, and reflection on, work experience		
U7	Developing resilience and risk management skills:	Developing confidence, agency and support-seeking skills:  Building independence Developing understanding of the wider world Living in the wider world	Developing communication and negotiation skills, risk management and support-seeking skills:  Relationship values  Mainteining sexual health  Sexual health services  Managing relationship challenges and endings	Developing empathy and compassion, clarifying values and support-seeking skills:  Developing an understanding of bias, concensus, free speech, law and social justice, Understanding of Human Rights.  Developing an understanding of honour based violence, women's rights, sexual assault, Understanding of feminism, People Acts and Rights.	Developing confidence, self-worth, a Recognising and celebrating successes Transition and new opportunities Aligning actions with goals Building independence Living in the wider world (Travel Trail			