Sex and relationships education in schools

Guidance March 2010

Information

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Audience
Headteachers, governing bodies, personal and social education coordinators and teachers of sex and relationships education in all maintained schools. Local health boards, school nurses, looked after children nurses, sexual health nurses and other health professionals working in schools. LAC education coordinators responsible for the health and education of looked after children. Welsh Network of Healthy School Scheme Coordinators, Children and Young People’s Partnerships, local authorities and coordinators/providers of sex and relationships education training programmes.

Overview
From September 2010, this document will replace Sex and Relationships Education in Schools National Assembly for Wales Circular 11/02.

Action required
Any comments on this document should be sent to Adrienne Rees, by 31 May 2010, at the address below or e-mailed to personalandsocialeducationenquiries@wales.gsi.gov.uk

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Additional copies
This document is available in electronic format only and is available on the Assembly website in ‘The school curriculum for Wales’ section in Curriculum and Assessment at: www.wales.gov.uk/educationandskills

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Introduction

1.1 Schools play a central role in having a positive and sustained impact on children and young people’s sexual health and well-being. All learners in Wales should receive high quality sex and relationships education (SRE) as part of their personal and social development.

1.2 The Welsh Assembly Government is fully committed to the United Nations Convention on the Rights of the Child (UNCRC). Rights to Action (2005) sets out the Welsh Assembly Government’s Seven Core Aims for children and young people. Core aims 2 and 3 describe the entitlement of children and young people to access educational and health services. This guidance is designed to help schools achieve those core aims.

1.3 There are excellent examples where schools are delivering effective SRE programmes. These schools have established clear sex education policies in consultation with learners, parents/carers, governing bodies and the wider community. However, Estyn’s 2007 report Sex and relationships guidance indicated that there are wide variations in the quality and impact of teaching of SRE across Wales.

1.4 This guidance draws on best practice in SRE. All schools in Wales should:

- create a culture that supports open and responsible discussion of relationships and sexual health and well-being
- be confident in providing positive, holistic sex and relationships education programmes that meet the needs of all learners.

1.5 The guidance aims to:

- explain the context for SRE in Wales
- clarify the legal requirements for schools
- identify expected outcomes for learners
- assist with developing a sex education policy
- ensure inclusion for all learners
- clarify roles and responsibilities relating to confidentiality
- address issues concerning safeguarding and child protection
- provide specific guidance for primary, secondary and special schools
- outline strategies for learning and teaching of SRE
- provide advice about sensitive issues that may arise when teaching SRE
- emphasise the importance of working in partnership with parents/carers, foster parents and corporate parents, where a child is looked after by their local authority
• identify opportunities for working in partnership with the wider community
• identify opportunities to address SRE within the school curriculum in Wales.

1.6 In this guidance, the use of the term ‘must’ refers to a statutory requirement in legislation. The use of the term ‘should’ indicates that schools are strongly advised to adopt the suggested approach.

The context for sex and relationships education

1.7 The Welsh Assembly Government’s Seven Core Aims describe the entitlement of children and young people to access educational and health services. Effective school SRE programmes help learners to develop the skills and knowledge appropriate to their age, understanding and development. Learners are enabled to make responsible decisions about their relationships, sexual health and well-being.

1.8 Cultural and social influences – the media, peer pressure and alcohol and drug use – can all influence sexual behaviour. Rates of teenage pregnancy continue to remain high in Wales and young people bear the greatest burden of sexually transmitted infection. The most recent study of Health Behaviour in School-aged Children showed that Wales had one of the highest proportions of 15-year-olds (in the 34 European and North American participating countries reporting) having had sexual intercourse, at 41 per cent of girls and 30 per cent of boys. Evidence also suggests that young people who are at a disadvantage socio-economically are more likely to be sexually active, to experience sexual ill-health or an unplanned pregnancy than those with greater advantages including good educational and employment prospects.

1.9 The consultation document, Sexual Health and Wellbeing for Wales 2009–2014: Draft Working Paper (July 2009), renewed the Welsh Assembly Government’s commitment to:

• improving sexual health and well-being by narrowing sexual health inequalities
• developing a society that supports open discussion about relationships, sex and sexuality.
1.10 Schools are recognised as having a central role to play in having a positive and sustained impact on children and young people’s sexual health and well-being. All learners need help to build up their confidence, awareness and self-esteem, which will in turn assist them in managing and negotiating their personal relationships. Schools should ensure that all teachers fully appreciate the role that effective SRE can have in improving sexual health and well-being and in reducing the number of teenage conceptions and rates of sexually transmitted infections (STIs) and HIV.

What are the legal requirements for maintained schools?

1.11 Governing bodies of all schools must make, and keep up-to-date, a written statement of their policy with regard to the provision of sex education. The policy must also include a statement about parents’ rights to withdraw their child from sex education.

1.12 Primary schools are not required to provide sex education as part of the basic curriculum. It is for individual schools, in consultation with parents and governors, to determine how best to approach sex education, in accordance with learners’ needs and the character and ethos of the school.

1.13 In secondary schools, and other educational settings that cater for learners of secondary school age, e.g. Pupil Referral Units, the basic curriculum must include provision for sex education for all registered pupils.

1.14 Special schools must also include provision for sex education for all registered pupils who are provided with secondary education at the school.

Further guidance regarding legal requirements is provided in Annex A (see page 28).
Why teach sex and relationships education?

1.15 SRE helps learners to move with confidence from childhood through adolescence into adulthood.

1.16 There are clear opportunities to teach SRE within the curriculum. It is mainly delivered through the *Personal and social education framework for 7 to 19-year-olds in Wales*. Specifically the outcomes of effective SRE are to help learners:

- develop positive attitudes and values which influence the way they behave
- develop the skills needed to make responsible and well-informed decisions about sexual health and well-being
- gain respect for themselves and others
- build successful relationships
- appreciate the importance of stable and loving personal relationships
- understand the physical and emotional aspects of sex, sexuality and sexual health and well-being
- understand the consequences and risks of sexual activity
- recognise the benefits of delaying sexual activity
- understand the laws relating to sexual behaviour
- know how to get appropriate advice on sexual health and well-being.

1.17 SRE programmes should enable learners to understand the importance of a stable, secure and loving environment for family life. When SRE is provided, schools must teach the nature of marriage and its importance to family life and the bringing up of children. In a diverse society, learners will come from a variety of backgrounds and the Welsh Assembly Government recognises that there are committed and mutually supportive stable relationships outside of marriage. Teachers should be sensitive and respect differences, ensuring that there is no stigmatisation of children and young people based on their home circumstances.
Strategic planning for sex and relationships education

This section offers guidance for school leaders, governing bodies and other partners on:

- the requirement for all schools to have a sex education policy and the specific issues that a policy should address
- ensuring inclusion
- developing confidentiality protocols that relate to SRE
- establishing safeguarding and child protection procedures in relation to SRE.

Developing school policy

2.1 All maintained schools must have an up-to-date written sex education policy which is available for inspection, particularly by parents/carers.

2.2 The policy must include a statement about the parents/carers’ right to withdraw their child from sex education.

2.3 The policy should:

- outline the school’s vision of SRE within a clear values framework
- state the aims and expected outcomes of the school’s SRE programme clearly
- describe how the programme is managed and organised, and how it forms part of the school’s personal and social education (PSE) provision
- outline how the programme is delivered, teaching approaches and resources used and who is responsible for providing it
- set out the content of the SRE programme for each year group, summarising when key themes should be introduced and how sensitive issues are to be dealt with
- describe how school policies on confidentiality, safeguarding and child protection relate to SRE
- explain how learners will be given guidance about where they can obtain confidential advice, counselling and, where necessary, treatment
- describe how the school will work with parents/carers and include a statement about parents’ rights to withdraw their child from sex education
- summarise how health professionals and external agencies are involved in the SRE programme
- say how SRE is monitored and evaluated, specifying the means and timescale for regular review.
2.4 Governing bodies have a key role, along with headteachers and relevant staff, in determining a sex education policy and monitoring the effectiveness of the SRE programme. Governing bodies must ensure that the school has an up-to-date written sex education policy that is reviewed regularly.

2.5 Governing bodies should consult with parents/carers and the wider community to ensure that the policy takes account of parental wishes and meets the needs of the community the school serves.

2.6 Learners have the right to contribute in a meaningful way to the development and review of a sex education policy and SRE programme. Pupil participation, such as the school council, enables learners to express their views on their needs at different key stages. Associate pupil governors play an important role in representing the views of learners in governing body discussions about SRE.

2.7 The delivery of the curriculum is rightly delegated to schools. Schools will continue to decide on time given and the strategies for learning adopted. Nevertheless, SRE should not be delivered in isolation. It should be a planned and integrated part of the curriculum, with effective coordination to ensure continuity and progression in learning across key stages.

2.8 The Welsh Assembly Government recommends that the PSE framework is used as a basis for planning SRE provision. The PSE framework has five themes and for each theme key stage learning outcomes are presented under the heading ‘Range’. The ‘Range’ section details the attitudes and values, and knowledge and understanding that should be used as learning contexts to develop PSE-related skills. The theme with particular relevance to SRE is ‘Health and Emotional Well-being’.

Further details about SRE within the school curriculum in Wales can be found at Annex B (see page 32).

2.9 High quality SRE, delivered as an integral component of a well planned whole school PSE programme, contributes positively to learners’ well-being. It should equip them with the skills and knowledge to make safe and responsible choices regarding their sexual behaviour. An integrated approach also enables learners to recognise and understand the links between sexual activity and other risky behaviours such as the misuse of alcohol and other illegal substances.
2.10 The school policy on PSE should therefore be cross-referenced to the sex education policy.

2.11 The school’s sex education policy should describe how resources used in the SRE programme encourage a range of learning methods and are:

- consistent with the school’s agreed values framework for SRE
- appropriate for the needs of learners at each key stage in terms of language, images, maturity and understanding required
- made available to parents/carers.

2.12 The school policy should describe:

- how standards of learning and teaching of SRE will be monitored
- who will have lead responsible for monitoring and evaluating SRE provision
- how the views of learners will be considered
- the role of the governing body.

2.13 Estyn is statutorily required to report on the spiritual, moral, social and cultural development of learners at any school they inspect, and to report on the contribution made by the school to their well-being. Such reports provide useful evidence for the evaluation of a school’s SRE provision.

**Ensuring inclusion**

2.14 Schools should ensure SRE programmes meet the needs of all learners. Teaching should be inclusive, helping all learners to understand their physical and emotional development and enabling them to make positive decisions about their personal relationships, sexual health and well-being.

2.15 Some children and young people may find it difficult to talk to their parents/carers and may rely on schools as their main, or perhaps only, source of SRE. Sex education policies need to be culturally and religiously appropriate, inclusive of all learners and be sensitive to the needs of the local community. Discussions with learners, their families and representatives of faith groups will help to establish and re-confirm what is appropriate and acceptable. For example, there may be a need to consider single sex groups for learners from cultures where it is only acceptable to speak about the body in single gender groups.
2.16 Mainstream schools, special schools and PRUs have a duty to ensure that learners with additional needs are properly included. Learners should not be withdrawn from SRE in order that more time can be devoted to other aspects of the curriculum.

2.17 Looked after children often miss opportunities for learning at school due to disrupted lifestyles, periods of absence, or because they are frequently moving between schools. They may also lack parental guidance. Similarly young carers may also miss opportunities for learning at school. Schools should make particular efforts to ensure that these learners receive SRE.

2.18 SRE programmes should be relevant to learners and sensitive to their needs. Equally it is important that young people recognise diversity and show respect for others regardless of their sexual orientation. Hence teachers should:

- deal with matters of sexual identity or sexual orientation honestly, sensitively and in a non-discriminatory way
- answer appropriate questions and provide factual information.

2.19 Some parents/carers might have concerns about the inclusion of sexual identity and sexual orientation within a SRE programme and how these are taught in schools. Equally some parents/carers may find it difficult to accept their children’s emerging sexuality. Schools should liaise closely with parents/carers when developing their sex education policy to reassure them of the content of the SRE programme and the context in which it will be presented.

2.20 Schools should address bullying in all its forms, including any related to sexual orientation. Guidance in the National Assembly for Wales Circular 47/2006, *Inclusion and Pupil Support* deals with the unacceptability of bullying and emotional distress and harm caused by it. Schools should deal with any suspicion of bullying in accordance with the school’s anti-bullying policy. The National Assembly for Wales Circular 23/2003, *Respecting Others: Anti-Bullying Guidance* offers practical solutions to both prevention of and dealing with incidents of bullying in schools.
Confidentiality

2.21 Schools must be clear about the boundaries of their legal and professional roles and responsibilities. All staff have a duty to protect learners. If a teacher, health professional or other classroom practitioner hears or sees something during SRE lessons that suggests a learner is at risk of serious harm or of causing serious harm to others, they must share that information with another professional. Having an explicit confidentiality policy should ensure practice is consistent throughout the school. Learners, teachers and parents/carers should be made aware of the school’s confidentiality policy and how it works in practice. A policy should include the following:

- ensuring that learners know that teachers cannot offer or guarantee unconditional confidentiality, particularly in relation to personal disclosures
- reassuring learners that their best interests will be maintained
- encouraging learners, where possible, to talk to their parents/carers and giving them support to do so
- making sure that learners are informed of sources of confidential help, for example, the school nurse, school counsellor, GP or young person’s sexual health services
- using ground rules in lessons to establish boundaries
- instigating the school’s safeguarding and child protection procedures if there is any possibility of abuse.

Personal disclosures

2.22 Learners may wish to discuss sexual health matters arising from learning about SRE topics with a trusted member of staff. Schools should clarify with learners what will happen to any personal information they might disclose.

2.23 Personal disclosures from learners may take place at a time or in a place when it is difficult for a teacher to address the issue appropriately with the learner. If this happens, the teacher should:

- talk again individually to the learner before the end of the school day
- follow the school’s confidentiality policy in their discussions with the learner
- make it clear to learners that they cannot guarantee unconditional confidentiality
- ensure that learners understand that if confidentiality has to be broken, they will be informed first.
Primary schools

2.24 On rare occasions, a primary age child who is sexually active or is contemplating sexual activity may directly approach a teacher. This is a child protection issue. In such cases, the teacher should always approach the designated member of staff with responsibility for safeguarding and child protection. The designated member of staff should make sensitive arrangements to address the child protection issues, in line with locally agreed safeguarding and child protection policies, and ensure that help is provided for the child and family.

Secondary schools

2.25 Effective SRE should enable and encourage learners to talk to a trusted adult if they are sexually active or contemplating sexual activity. It is desirable, although not always possible, that the trusted adult should be their parent/carer. Health professionals may see, and in some circumstances treat, young people confidentially. Counselling about talking to parents/carers should be part of this process.

2.26 Where a secondary school teacher is approached by a learner who is sexually active or contemplating sexual activity, the teacher should:

- address any child protection issues with the designated member of staff with responsibility for child protection
- encourage the learner, wherever possible, to talk to the parent/carer
- take steps to ensure that the learner has been counselled adequately and informed about contraception, including precise information about where young people can access sexual health services.

2.27 It is only in occasional circumstances that schools should be in the position of having to handle such information without parental knowledge. Where younger learners are involved, this would be grounds for serious concern. Headteachers and governing bodies should monitor the frequency of these cases.

2.28 If such incidences are frequent, this may also indicate learners’ lack of awareness of, or confidence in, sources of confidential medical advice. This should be addressed in the school’s SRE programme.
Health professionals

2.29 Health professionals are bound by their professional codes of conduct. Nevertheless, health professionals working in schools should be familiar with the school's confidentiality and sex education policies and be mindful of the importance of working within them. Health professionals should also seek to protect privacy and prevent inappropriate personal disclosures in a classroom setting.

2.30 Outside the teaching situation, health professionals can:

- give one-to-one advice or information to a learner on a health-related matter including contraception
- exercise their own professional judgement as to whether a young person has the maturity to consent to medical treatment, including contraceptive treatment. (The criteria for making such a decision are based on the ‘Fraser and Axon Guidelines’)

Safeguarding and child protection

2.31 Schools should ensure they are familiar with the procedures set out in Welsh Assembly Government Circular 005/2008, Safeguarding Children in Education – The role of local authorities and governing bodies under the Education Act 2002. This guidance forms part of the Welsh Assembly Government's broader framework for safeguarding and promoting the welfare of children. The National Assembly for Wales Safeguarding Children: Working Together Under the Children Act 2004 (March 2007) sets out the overarching system for safeguarding children and the roles that different agencies play. These guidance documents should also be read in conjunction with the All Wales Child Protection Procedures (April 2008).

2.32 Learners cannot learn effectively if they are concerned or frightened about being sexually abused in the home or elsewhere. They have a right to expect schools to provide a safe and secure environment. Any fears or worries they bring into school should not go unnoticed by staff.

2.33 All staff members who become aware of or have concerns about the welfare or safety of a learner, or learners, should know:

- when and how to make a referral to local authority children's social services
- what services are available locally

1 ‘Fraser Guidelines’ for doctors on giving contraception advice or treatment to young people under 16 – see Annex A (page 30)
• how to gain access to them
• what sources of further advice and expertise are available
• who to contact in what circumstances, and how to follow procedures.

2.34 The purpose of Circular 005/2008 is to help schools to have effective arrangements in place to safeguard and promote the welfare of their learners ensuring that:

• a child protection policy and procedures are in place in accordance with local authority guidance and locally agreed inter-agency procedures
• a senior member of staff is designated to take lead responsibility for dealing with child protection issues, providing advice and support to other staff, liaising with the local authority, and working with other agencies
• all staff, whether teaching or non-teaching, undertake appropriate training to equip them to carry out their responsibilities for safeguarding effectively.

2.35 Staff in schools should always be given the opportunity to discuss child welfare concerns with, and seek advice from colleagues, managers, a designated or named professional, or other agencies. This would include when and how to make a referral to the local authority social services department.
Developing effective sex and relationships education

This section is primarily for practitioners with responsibility for the coordination and delivery of SRE. It offers:

- specific guidance for primary, secondary and special schools
- effective learning and teaching strategies
- advice on potentially sensitive issues that teachers may have to deal with when teaching SRE.

SRE in primary schools

3.1 Primary schools in Wales must have an up-to-date policy on sex education. It is for the governing body in consultation with the headteacher to ensure that the policy takes all learners’ needs into account.

3.2 Primary schools must provide sex education as contained within the national curriculum in Wales, for example in the science subject order. Primary schools can provide a broader SRE programme but whether they do so is at the discretion of the school.

3.3 The Welsh Assembly Government recommends that all primary schools have a graduated, age-appropriate SRE programme emphasising the social and emotional aspects of relationships. This will assist schools in providing effective support for the ongoing emotional and physical development of learners.

3.4 Education about relationships for 3 to 7-year-olds should focus on the building of self-esteem by encouraging learners to:

- value themselves
- recognise and communicate their feelings
- form friendships and relationships.

3.5 SRE should help 7 to 11-year-olds to understand:

- the reasons for the physical and emotional changes which take place at puberty
- the range of their own and others’ feelings and emotions
- the importance of personal safety and what to do or to whom to go when feeling unsafe.

3.6 Primary schools should:

- discuss the content of SRE with parents/carers
- offer parents/carers support in talking to their children about sex and relationships and how to link this with what is being taught at school.
• have clear parameters on what learners should be taught before moving to secondary school
• communicate with associated secondary schools to ensure that there is consistency of approach and appropriate progression in SRE between schools.

SRE in secondary schools (and other educational settings that cater for learners of secondary school age, e.g. Pupil Referral Units)

3.7 Secondary schools in Wales must:
• have an up-to-date policy on sex education
• include, as part of the basic curriculum, sex education for all registered pupils.

3.8 Secondary schools should:
• provide a SRE programme as part of their PSE provision
• ensure that the needs of all learners are taken into account
• address equally the emotional, physical and social aspects of SRE
• acknowledge and address the changes and uncertainties that young people experience regarding adolescence and their developing sexual identity
• provide meaningful opportunities for discussion about feelings, relationships and values
• set SRE within a broader context of developing self-esteem and responsibility for the consequences of one’s actions.

3.9 Learners should be helped to:
• develop a responsible attitude to sexual relationships
• understand the laws relating to sexual behaviour
• acknowledge the consequences and risks of sexual activity
• understand the links with other risk-taking behaviours, including online social networking
• recognise cultural and social influences and resist unwanted pressure
• know about the methods and availability of contraception and the prevention of sexually transmitted infections
• understand the importance of stable, secure and loving relationships (within this context, learners must be taught about the nature of marriage and its importance to family life and the bringing up of children)
• understand the responsibilities of parents
• know how to get consistent, appropriate information on sexual health and well-being from a range of agencies.
3.10 High quality teaching is a significant factor in ensuring that SRE programmes meet the needs of learners. In the most effective practice, secondary schools have dedicated PSE curricular time, where SRE is delivered through a modular approach by specialist teams of confident trained teachers, enhanced by the involvement of community health professionals.

3.11 Secondary schools should:

- communicate with associated primary schools to ensure that there is an exchange of information, consistency of approach and appropriate progression in SRE between schools
- consult with parents/carers about the content of SRE and the resources used to deliver the programme
- offer parents/carers support in talking to their children about sex and relationships and how to link this with what is being taught at school.

SRE in special schools

3.12 Schools providing education for learners with moderate and severe, profound and multiple learning needs should consider how best to meet the needs of all learners whose understanding of sexual health and well-being issues may not match their physical development.

3.13 Special schools in Wales must:

- have an up-to-date policy on sex education
- include, as part of the basic curriculum, sex education for all secondary age registered pupils.

3.14 All staff, including ancillary staff, physiotherapists, nurses and carers should be aware of the school’s sex education policy when working with learners with additional learning needs.

3.15 Special schools should:

- provide a SRE programme as part of their PSE provision
- ensure that the needs of all learners are taken into account
- address equally the emotional, physical and social aspects of SRE
- acknowledge and address the changes and uncertainties that young people experience regarding adolescence and their developing sexual identity
- provide meaningful opportunities for discussion about feelings, relationships and values
• set SRE within a broader context of developing self-esteem and responsibility for the consequences of one’s actions
• describe how they will work closely with and involve parents/carers.

3.16 SRE provision should be a planned and integrated part of the curriculum, coordinated effectively to ensure continuity and progression in learning across key stages. Special schools should decide the precise content of the SRE programme and the strategies for learning adopted to meet the differing needs of learners. For example, for learners who use alternative methods of communication, such as signing, symbols and/or communication switches and aids, schools will need to ensure that all staff are familiar with key SRE terms in Makaton, Braille and British Sign Language.

3.17 High quality teaching is a significant factor in ensuring that SRE programmes meet the needs of all learners. In the most effective practice in special schools, SRE is delivered by confident trained teachers, enhanced by the involvement of community health professionals.

3.18 Teachers should plan appropriate SRE approaches in order to meet the individual needs of learners with profound and multiple learning needs. Learners may also require extra support in small groups and one to one sessions to reinforce SRE learning.

Learning and teaching strategies for SRE

3.19 Schools should help learners develop confidence in talking, listening and thinking about sex and relationships. They should provide supportive learning environments in which open and non-judgemental discussions about relationships, sex, sexual health and well-being, and sexuality can occur. Features of effective SRE programmes include:

• an emphasis on skills development with participatory teaching methods which promote communication and inter-personal skills
• delivery within a clear and explicit values framework of mutual respect, rights, responsibilities, gender equality and acceptance of diversity
• age-appropriate activities which engage both boys and girls, build on previous learning and experience, and address social, peer and media influences
• partnership between learners, school, and parents/carers.
Teachers need training and support to deliver SRE sensitively and with confidence. Effective SRE learning and teaching should include the following strategies.

**Ground rules**

3.20 Developing ground rules as part of the school’s sex education policy, or individually with each class or year group, establishes clear parameters regarding what is appropriate and inappropriate in a whole class setting. In turn this helps to create a balance between learners feeling respected and safe, and protecting individual privacy. Examples may include:

- everyone will be treated with respect
- any questions must be appropriate to the learning environment
- we (teacher or learner) will avoid sharing personal information
- we will all challenge prejudice consistently and we will all respect diversity
- we will encourage the use of the agreed terminology for body parts.

3.21 Having a set of agreed ground rules creates clear boundaries. It should reduce the chances of unexpected disclosures or inappropriate comments happening in a whole class setting. However, teachers need training and ongoing support to be prepared for the unexpected. For example:

- If a question is too personal or explicit, the teacher should remind the learner of the ground rules. If the learner needs further support, the teacher can refer the learner to an appropriate person such as a school counsellor, school nurse, parent/carer or an outside agency or service.
- If a teacher does not know the answer to a question, they should acknowledge this and could suggest that the learner, or teacher, research the question later.
- If a question feels ‘too old’ for a learner, is inappropriate for the whole class or raises concerns about sexual abuse, the teacher should acknowledge the question and promise to attend to it after the lesson on an individual basis. In this way, the learner will feel they have been treated with respect but inappropriate personal information will not be shared with the rest of the class. This guidance contains further information on confidentiality, safeguarding and child protection procedures.
- Use of a question box provides anonymity and may help learners ask questions that they would otherwise feel inhibited about.
Distancing techniques

3.22 Teachers should protect learners’ privacy by always depersonalising discussions. It is not good practice for teachers to illustrate learning activities with personal experiences. Distancing techniques help learners discuss sensitive issues and develop their decision-making skills in a ‘safe’ environment. For example:

- role play, which can help learners practise skills and behaviours
- use of trigger materials such as photographs, advertisements, newspaper articles
- case studies with fictitious characters which learners can relate to
- appropriate DVD materials
- visits from educational theatre groups.

Discussion

3.23 Well planned small/large group and whole class discussions allow all learners to explore personal opinions, clarify values and express feelings. Activities, such as circle time, values continuums, reporting back and structured debates, enable learners to articulate and share their views with others.

Peer education

3.24 Peer education is recognised as having a positive effect on the attitudes and behaviours of learners. Secondary schools should consider training and using learners as peer educators in the delivery of the SRE programme.

Reflection

3.25 Open-ended questioning and Assessment for Learning techniques encourage reflection, helping learners to think about what they have learned and the skills they have developed.

Signposting

3.26 SRE programmes should provide learners with age-appropriate information about services that they can access, including helplines, websites and local advice and sexual health services.
Teaching about specific sexual health and well-being issues

3.27 Learners and parents/carers may need to be reassured that the personal beliefs and attitudes of teachers will not influence the teaching of SRE. Teachers, and all those contributing to SRE, should work within an agreed values framework as described in the sex education policy. This should also include how sensitive issues and differences of opinion are to be dealt with.

3.28 If an issue arises that is considered to be sensitive by society, teachers should discuss why this is the case. By exploring different perspectives, within the parameters specified in the school’s sex education policy, learners are enabled to determine their own views. Specific issues that may be addressed in SRE include the following.

Names for parts of the body

3.29 As primary-aged learners are expected to learn the names and uses of the main parts of the human body, it is helpful to clarify the appropriate language that is used in the delivery of the SRE programme. All staff need to be consistent about the key terms they use with learners. Involving parents/carers will ensure consistency at home.

Puberty

3.30 All learners, including those who develop earlier than average, need to know about puberty before they experience the onset of physical changes. Schools need to plan the appropriate age to do so, in consultation with parents/carers.

3.31 The PSE framework suggests that, during Key Stage 2, learners should be given opportunities to understand the reasons for the physical and emotional changes which take place at puberty, to include conception, pregnancy and birth.

Menstruation

3.32 Girls should be prepared for the onset of menstruation and SRE programmes in primary schools should include this. Boys should also learn about menstruation.
3.33 Primary schools should set clear parameters as to what will be taught in a whole class setting and what will be discussed on an individual basis. For example, schools should make adequate and sensitive arrangements to help girls cope with menstruation and with requests for sanitary protection. Suitable disposal facilities should also be easily available in an appropriate location.

Appropriate/inappropriate touching

3.34 An important aspect of SRE is learning about what is acceptable behaviour in different situations. The PSE framework suggests that, during Key Stage 2, learners should be given opportunities to understand how to distinguish between appropriate and inappropriate touching. The reasons for this are to reduce children’s vulnerability to abuse and to ensure that they themselves do not act in an abusive way.

3.35 Learners should be made aware of situations in which they must not hide their feelings. For example, when it is necessary to protect themselves from harm, or when another person is touching them in a way that makes them feel uncomfortable. Schools should ensure that learners:

- know to talk to a trusted adult about any feelings that trouble them
- have access to a range of relevant helpline numbers, websites and organisations.

Contraception and prevention of sexually transmitted infections (STIs)

3.36 Knowledge of the different types of contraception, access to and availability of contraception is a major part of the Welsh Assembly Government’s strategy to reduce unintended teenage pregnancy. The PSE framework suggests that, during Key Stage 3, learners should be given opportunities to understand about contraception within the context of relationships. The focus should be on the benefits of delaying sexual activity.

3.37 STIs are major causes of ill health which can have long-term physical and psychological health consequences. Teaching about safer sex is one of the Welsh Assembly Government’s key strategies for reducing the incidence of STIs including HIV/AIDS.
3.38 Teaching about STIs, including HIV/AIDS, should help learners to:

- develop assertiveness skills to enable them to avoid being pressured into unwanted or unprotected sex
- clarify their knowledge of STIs including HIV/AIDS, condom use, safer sex and preventing infection
- understand related risk-taking behaviours such as alcohol and substance misuse
- access local sexual health services that help prevent/treat STIs and HIV/AIDS.

3.39 Secondary school teaching staff involved in the delivery of the SRE programme should have access to training and up-to-date resources in order to give learners appropriate information about different types of contraception, including emergency contraception, and their effectiveness.

Abortion

3.40 There are strongly held views and beliefs about abortion and some schools may apply a particular religious ethos to this issue through their sex education policy. The religious convictions of learners and their parents/carers should be respected.

3.41 When abortion is covered, the challenge for teachers is to facilitate classroom debate which is sensitive to the personal experiences of individual learners and helps all learners to:

- understand abortion
- explore the moral considerations
- appreciate the validity of opposing views in such a way that learners’ opinions do not become polarised
- develop their communication skills and confidence to discuss abortion with peers, parents/carers and health professionals.

Sexual exploitation

3.42 The United Nations Convention on the Rights of the Child enshrines children and young people’s rights to be protected from sexual exploitation. All children and young people are potentially at risk of being sexually exploited. Schools have a central role to play in reducing this risk. By exploring the features of safe and healthy relationships, schools can help learners to develop the skills to identify potential risks, stay safe and seek help if needed.
3.43 The PSE framework provides clear contexts for schools to teach about all aspects of relationships. Specifically learners should be given opportunities to understand the features of safe and potentially abusive relationships and to develop their interpersonal skills including negotiating behaviour in personal relationships.

3.44 In secondary schools, discussion of topics, such as domestic abuse, forced marriage, media pressures and representations of sexuality, power and gender stereotypes, increases young people’s ability to make informed choices. Learners should also be helped to develop positive attitudes and behaviours including strategies for managing anger, frustration and aggressive feelings effectively, and for resolving conflict.

3.45 Some learners are more vulnerable to abuse and exploitation than their peers. Others may be confused about what is acceptable public behaviour. All learners need to:

- develop the skills to reduce the risk of being abused and exploited
- learn what types of behaviour are, and are not, appropriate in public and in private.

Online safety

3.46 The PSE framework stresses the importance of learners understanding all aspects of personal safety. The internet is an integral part of the lives of many learners. As online social networking opportunities increase, children and young people need to know how to use the internet and mobile technology safely and responsibly. Specifically learners need to be aware of:

- the potential risks of the online environment
- what to do and to whom to go when feeling unsafe.

Schools should ensure that learners have access to a range of relevant helpline numbers, websites and organisations.

Further information is available on the PSE Guidance website (at www.wales.gov.uk/personalandsocialeducation) about:

- collaborative active learning methodologies
- the teaching of sensitive issues.
Working in partnership

This section offers guidance for practitioners responsible for the coordination of SRE about:

- working with parents and carers
- working in partnership with the wider community when planning and delivering SRE.

Working with parents/carers

4.1 Parents/carers have a central role to play in terms of delivering positive messages to their children about sex and relationships. For instance, by answering questions and providing an opportunity for discussion, parents/carers can reinforce the message that sexual health matters are to be treated openly.

4.2 Parents/carers need to know that they can become actively involved in the determination of the school’s sex education policy and that the school’s SRE programme will complement and support their role.

4.3 The teaching of some aspects of SRE might be of particular concern to some parents/carers. Schools should always work in partnership with parents/carers, consulting them regularly on the content of SRE programmes.

4.4 Parents/carers have a right to withdraw their children from all or part of SRE provided at school, other than sex education contained within the national curriculum. Regular discussion and good partnerships with parents/carers form the best arrangements for those who have concerns and are considering withdrawing their children from sex education.

4.5 Schools should make alternative arrangements for learners whose parents/carers have chosen to withdraw them from SRE.

4.6 Schools and parents/carers should also address how learners, who miss SRE lessons for reasons other than parental withdrawal, can catch-up on another occasion.

4.7 Parents/carers should also be made aware of any involvement of the wider community in the delivery of the SRE programme.
Working with the wider community

4.8 SRE is not the sole responsibility of schools. The most effective SRE programmes are found in those schools who work cooperatively with external agencies.

4.9 Elements of SRE may also be provided by a wide range of people including health professionals, social workers, youth workers, peer educators and visitors. Community partners bring a new perspective and offer specialised knowledge, experience and resources. For example, school nurses are a valuable source of professional advice and support for learners and can arrange for access to sexual health services.

4.10 However, it is the school’s responsibility to manage the SRE programme and to plan carefully the involvement of community partners in the delivery of lessons.

4.11 People entering the school to help deliver SRE should only be invited as part of a planned programme. They should be made aware of and should abide by the school’s sex education policy.

Health professionals

4.12 Many schools work closely with health professionals in the development and implementation of their SRE programmes as they can:

- complement the role of the teacher in delivering SRE
- provide specific and up-to-date knowledge about sexual health and well-being
- help schools work in partnership with parents/carers
- make links between the school and other relevant professionals, such as local GPs and sexual health services
- inform learners about local sexual health services and help them to develop the confidence and skills to make good use of them
- offer learners individual support and advice.

4.13 Any input by a health professional should be in keeping with the school’s agreed sex education policy. However, when in their professional role, such as a school nurse in a consultation with an individual learner, they must follow their own professional codes of conduct. This is the case irrespective of who is employing them. A school’s sex education policy should make this clear to parents/carers.
Social workers

4.14 Social workers and residential social workers have a key role to play in improving outcomes for looked after children (LAC). It is essential that they work in partnership with foster carers, LAC nurses, LAC education coordinators and parents/carers, as well as teachers and health professionals, to improve the health and sex and relationships education of children and young people who are looked after.

Youth workers

4.15 Youth workers working in school settings should have regard for this guidance when working with young people of compulsory school age. Input by youth workers to the SRE programme should be in keeping with the school’s sex education policy.

Peer educators

4.16 Peer education involves young people who are trained to support and deliver SRE. This approach is most effective when it is used in secondary schools to complement teacher delivered programmes.

4.17 Young people with particular life experiences can add a fresh perspective to SRE programmes. Examples include young people:

- from different cultural backgrounds talking about their experience of learning about sex and relationships at home and from the wider community, including school
- talking about their experience of living with HIV
- who have a disability talking to other young people with a disability.

Other visitors

4.18 Visitors representing external agencies working in school settings should have regard for this guidance when working with learners of compulsory school age. Any inputs by visitors to the SRE programme should be in keeping with the school’s sex education policy. Visitors should complement but never substitute or replace planned provision.
4.19 Learners need an appreciation of the responsibilities and demands of parenthood. Some schools use parents effectively to provide a realistic view of parenthood. This may include teenage parents talking of their experiences of having a child and offering advice and support to their peers.

Further guidance about working with the wider community is available at www.wales.gov.uk/personalandsocialeducation
Annex A: The legal framework

Definition of sex education

A.1 Section 579 (1) of the Education Act 1996 gives a definition of ‘sex education’ as including education about:

(a) Acquired Immune Deficiency Syndrome and Human Immuno-deficiency Virus,

and

(b) any other sexually transmitted disease.

Sex education policy

A.2 Governing bodies of all maintained schools are required to by section 404 of the Education Act 1996:

(a) make, and keep up to date, a separate written statement of their policy with regard to the provision of sex education, and

(b) make copies of the statement available for inspection (at all reasonable times) by parents of registered pupils at the school and provide a copy of the statement free of charge to any parent who asks for one.

A.3 The policy statement must also include a statement about parents’ rights under section 405 of the Education Act 1996 to exempt/withdraw their child from sex education.

Secondary schools

A.4 All maintained secondary schools are required under section 101(1)(c) of the Education Act 2002 to include, as part of the ‘basic curriculum’ of the school, sex education for all registered pupils.

Primary schools

A.5 Section 101(1) of the Education Act 2002 does not require primary schools to provide sex education as part of the ‘basic curriculum’. Primary schools can provide sex education but whether they do so is at the discretion of the school.
Special schools and Pupil Referral Units (PRUs)

A.6 Under Section 101 of the Education Act 2002, maintained special schools and PRUs can provide sex education for primary age pupils and must provide it for secondary age pupils. There is no requirement for special schools in hospitals to provide sex education, but if they provide secondary education, they must have a policy on sex education, and if they do provide sex education they must have regard to this guidance.

Guidance

A.7 Where sex education is given, Section 403 (1B) of the Education Act 1996 (as amended) requires headteachers and governing bodies to have regard to the National Assembly for Wales’ guidance.

A.8 Section 403 (1C) requires the Assembly’s guidance to ‘include guidance about any material which may be produced by NHS bodies for use for the purposes of sex education in schools.’

Marriage, family life and inappropriate materials

A.9 Section 403 of the Education Act 1996 requires that the governing body and the headteacher:

shall take such steps as are reasonably practicable to secure that where sex education is given to any registered pupils at a maintained school, it is given in such a manner as to encourage those pupils to have due regard to moral considerations and the value of family life.

A.10 In addition, section (1A) of Section 403 of the Education Act 1996 places a duty on the Welsh Ministers to issue guidance designed to secure that when sex education is given to registered pupils at maintained schools –

(a) they learn the nature of marriage and its importance for family life and the bringing up of children, and

(b) they are protected from teaching and materials which are inappropriate having regard to the age and religious and cultural background of the pupils concerned.
Parent/parental responsibility

A.11 Section 576 of the Education Act 1996 defines a ‘parent’ as follows:

(1) In this Act, unless the context otherwise requires, ‘parent’, in relation to a child or young person, includes any person –

(a) who is not a parent of his but who has parental responsibility for a child, or

(b) who has care of the child.

Section 3 (1) of the Children Act 1989 defines ‘parental responsibility’ as follows:

(1) In this Act “parental responsibility” means all the rights, duties, powers, responsibilities and authority which by law a parent of a child has in relation to the child and his property.

References to parents/carers in this guidance should therefore be taken to include those with parental responsibility or care of a child.

Exemption/withdrawal from sex education

A.12 Section 405 of the Education Act 1996 enables parents to prevent their children, either wholly or partly, from receiving sex education in school other than sex education contained within the national curriculum.

If the parent of any pupil in attendance at a maintained school requests that he may be wholly or partly excused from receiving sex education at the school, the pupil shall, except so far as such as education is comprised in the National Curriculum, be so excused accordingly until the request is withdrawn.

The ‘Fraser Guidelines’

A.13 The following guidelines for doctors on giving contraception advice or treatment to young people under 16 were drawn up by Lord Fraser in 1985, following the House of Lords ruling in the case of Victoria Gillick v West Norfolk and Wisbech Health Authority. They are known as the Fraser Guidelines and apply to doctors in England and Wales.
The doctor must be satisfied that all the following requirements are fulfilled:

- The young person understands the doctor’s advice.
- The doctor cannot persuade the young person to inform his or her parents, or allow the doctor to inform the parents that he or she is seeking contraceptive advice.
- The young person is very likely to begin or continue having intercourse with or without contraceptive treatment.
- Unless he or she receives contraceptive treatment, the young person’s physical or mental health or both are likely to suffer.
- The young person’s best interests require the doctor to give contraceptive advice and/or treatment without parental consent.

The ‘Axon Guidelines’

A.14 In R (on the application of Axon) v Secretary of State for Health [2006] considered the Fraser Guidelines and adapted those to the situation where persons under the age of 16 were seeking advice and treatment on sexual matters, without the parent’s knowledge or consent. A medical health professional was entitled to provide that so long as the following requirements are met. The reference to sexual matters is wider than contraception and could encompass advice and treatment in respect of abortion for example. The requirements are as follows that:

- the young person understood all aspects of the advice
- the medical professional could not persuade the young person to inform his or her parents or to allow the doctor to inform the parents that their child was seeking advice and/or treatment on sexual matters
- the young person was very likely to begin or to continue having sexual intercourse with or without contraceptive treatment or treatment for a sexually transmissible illness
- unless the young person received advice and treatment on the relevant sexual matters, his or her physical or mental health or both were likely to suffer
- the best interests of the young person required him or her to receive advice and treatment on sexual matters without parental consent or notification.
Annex B: Sex and relationships education within the school curriculum

Framework for Children’s Learning for 3 to 7-year-olds in Wales

Education about relationships for 3 to 7 year-olds should focus on the building of self-esteem by encouraging learners to:

- value themselves
- recognise and communicate their feelings
- form friendships and relationships.

The Foundation Phase curriculum:

- puts the holistic development of the child and their skills at its centre
- fosters positive partnerships with the home
- acknowledges the role of the parent/carer as the child’s first educator
- is planned as a progressive framework for 3 to 7-year-olds
- consists of Seven Areas of Learning which complement each other.

Area of Learning: Personal and Social Development, Well-Being and Cultural Diversity

Personal and Social Development, Well-Being and Cultural Diversity is at the heart of the Foundation Phase. This Area of Learning enables children to learn about themselves, their relationships with other children and adults both within and beyond the family. They are encouraged to develop their self-esteem, their personal beliefs and moral values. They develop an understanding that others have differing needs, abilities, beliefs and views. As their self-identity develops, children begin to express their feelings and to empathise with others. Children begin to understand their own potential and capabilities and they are supported to become confident, competent and independent learners.

Personal development

Children should be given opportunities to:

- become independent in their personal hygiene needs and to be more aware of personal safety
- express and communicate different feelings and emotions – their own and those of others.
Social development

Children should be given opportunities to:

• be aware of and respect the needs of others
• take responsibility for their own actions
• consider the consequences of words and actions for themselves and others
• develop an understanding of what is fair and unfair and to be willing to compromise
• form relationships and feel confident to play and work cooperatively
• value friends and families and show care and consideration
• appreciate what makes a good friend.

Well-being

Children should be given opportunities to:

• value and contribute to their own well-being and to the well-being of others
• be aware of their own feelings and develop the ability to express them in an appropriate way
• understand the relationship between feelings and actions and that other people have feelings
• demonstrate care, respect and affection for other children, adults and their environment
• ask for assistance when needed
• develop an understanding about dangers in the home and outside environment.

Area of Learning: Knowledge and Understanding of the World

Myself and other living things

Children should be given opportunities to:

• learn the names and uses of the main external parts of the human body
• identify the similarities and differences between themselves and other children.

Area of Learning: Physical development

A developing sense of identity should be linked closely to their own self-image, self-esteem and confidence. Children should be introduced to the concepts of health, hygiene and safety, and the importance of diet, rest, sleep and exercise.
Health, fitness and safety

Children should be given opportunities to:

- become aware of dangers and safety issues in their environment.

Area of Learning: Creative development

Creative movement activities should enable children to make progress in their ability to:

- explore and express a range of moods and feelings through a variety of movements.

Science in the National Curriculum for Wales

Key Stage 2

Interdependence of organisms

Pupils should be given opportunities to study:

1. the names, positions, functions and relative sizes of a human’s main organs.

Key Stage 3

Interdependence of organisms

Pupils should be given opportunities to study:

1. The basic structure and function of some cells, tissues, organs and organ systems and how they support vital life processes.

Personal and social education framework for 7 to 19-year-olds in Wales

Health and emotional well-being

As children and young people develop sexually they need to understand bodily changes, manage sexual feelings and enjoy safe, healthy and happy personal relationships. Learners can also be enabled to explore their feelings, develop self-awareness and self-respect and develop their self-esteem.

Sex and relationships education should be placed within a clear framework of values and an awareness of the law on sexual behaviour. Features such as family life in all its different forms, including marriage, sexual behaviours, parenthood and sensitive
issues such as abortion need to be presented in a balanced way and ethical issues discussed objectively. However, it is equally important to equip learners to take responsibility for their behaviour in their personal relationships and how to recognise inappropriate behaviour. Learners should also know where and how to access personal information and support.

Key Stage 2

Learners should be given opportunities to:

- take increasing responsibility for keeping the mind and body safe and healthy
- feel positive about themselves and be sensitive towards the feelings of others

and to understand:

- the reasons for the physical and emotional changes which take place at puberty, to include conception, pregnancy and birth
- the range of their own and others’ feelings and emotions
- the importance of personal safety
- how to distinguish between appropriate and inappropriate touching
- what to do or to whom to go when feeling unsafe.

Key Stage 3

Learners should be given opportunities to:

- display a responsible attitude towards keeping the mind and body safe and healthy
- develop positive attitudes towards themselves and others

and to understand:

- the law relating to aspects of sexual behaviour
- about contraception, sexually transmitted infections and HIV within the context of relationships
- the features of safe and potentially abusive relationships
- the role of marriage, the importance of stable family relationships and the responsibilities of parents
- the range of emotions they experience and how to develop strategies for coping with negative feelings
- the benefits of accessing different sources of information, support and advice.
Key Stage 4

Learners should be given opportunities to:

• accept personal responsibility for keeping the mind and body safe and healthy
• develop a responsible attitude towards personal relationships

and to understand:

• the range of sexual attitudes, relationships and behaviours in society
• the importance of sexual health and the risks involved in sexual activity including potential sexual exploitation
• the features of effective parenthood and the effect of loss and change in relationships
• the factors that affect mental health and the ways in which emotional well-being can be fostered
• the statutory and voluntary organisations which support health and emotional well-being
• how to access professional health advice and personal support with confidence.

Post-16

Learners should be given opportunities to:

• accept responsibility for all aspects of personal and social development and well-being
• act as positive role models for younger students

and to understand:

• how to critically evaluate personal lifestyle choices in the context of physical health and emotional well-being, considering the short and long term consequences of such decisions
• the need to exercise responsibility for personal and group safety in social settings
• the potential consequences of sexual activity for themselves and personal relationships
• the life experiences which enhance or damage self-esteem and explore how best to cope with the demands of such situations
• the role of the state in promoting public health and emotional well-being.
Annex C

The following sources provide further information about SRE:

• The PSE framework and supplementary SRE exemplification materials such as case studies, FAQs, exemplar policy templates and checklists will be available online at the PSE Guidance website at www.wales.gov.uk/personalandsocialeducation

• Support is available through Local Authority School Improvement Officers with responsibility for PSE and Welsh Network of Healthy Schools Scheme Coordinators, and local Public Health Promotion Services

• Up-to-date statistics relating to teenage sexual health can be found at www.wales.gov.uk/topics/statistics/theme/health/conceptions/?lang=en
  www.wales.nhs.uk/sites3/page.cfm?orgid=457&pid=27846

• The All Wales Sexual Health Network provides a portal for sexual health information
  www.shnwales.org.uk

• National statutory bodies and voluntary organisations, such as the Family Planning Association Cymru, the Sex Education Forum and Stonewall Cymru.

  www.wales.gov.uk/consultations/healthsocialcare/sexualhealth/?lang=en&status=closed

• Sexual Health Wales telephone helpline for information and advice about sexual health and location of nearest services: 0800 567123.