



St White's Primary School

Sex, Health and Relationship Education Policy
(With Reference to Drug Education as part of Health Education)

Date of Review: September 2016

Date of Next Review: September 2018

Signed, Chair of Governors:

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1. Introduction – St White’s School Sex, Health and Relationship Education Policy

This policy is to be read in conjunction with the Safeguarding Policy.

- 1.1 We have based our school’s sex education policy on the DfE (DCSF) guidance document Sex and Relationship Education Guidance (ref DfES 0116/2000). In this document, sex education is defined as ‘learning about physical, moral and emotional development. It is about understanding the importance of marriage for family life, stable and loving relationships, respect, love and care. It is also about the teaching of sex, sexuality, and sexual health’.
- 1.2 Sex education is part of the personal, social and health education curriculum in our school. While we use sex education to inform children about sexual issues, we do this with regard to matters of morality and individual responsibility, and in a way that allows children to ask and explore moral questions. We do not use sex education as a means of promoting any form of sexual orientation.
- 1.3 Drugs education is part of the planned PSHE curriculum and is also delivered through the teaching of Science and through circle time. The PSHE framework outlines the areas to be covered each year.

2. Aims and objectives

- 2.1 The Sex, Health and Relationship Education Policy aims to equip children with the information, skills and values required to keep themselves safe and able to make informed and educated choices in life. The foundation of our programme is to develop pupil’s knowledge, skills and attitudes so that they make informed choices about their behaviour, feel confident and competent about acting on these choices, and move with confidence from childhood through to adolescence. This is underpinned by our aims and objectives, which are to:
 - promote a concern for relationships with other people, respecting the rights and feelings of others; developing loving, caring relationships as friends, parents, members of a family and community, and ultimately sexual partners.
 - provide knowledge of how the human body functions, how it grows and how we change physically and emotionally.
 - emphasise the importance of self-esteem in encouraging all members of the school community to respect and care for their body and mind.
 - develop positive values and a moral framework which will guide pupil’s choices, judgements and behaviour into adolescence and adult life.
 - present the facts about lifestyle choices in order for all pupils to then make informed judgements and to be prepared for the demands of life in the 21st century
 - create an ethos of positive relationships between all members of the school community, and for pupils to be given appropriate, accurate answers as naturally and honestly as possible to their questions on personal relationships and sex.

- work closely with parents, carers and governors in the dissemination of information on Sex, Health and Relationships and develop a partnership approach thus ensuring that all pupils receive the best advice and support.
- give regard to the age, emotional and physical maturities of pupils within all age groups taught, including those pupils with special educational needs, and ensure equality of opportunity and experience.
- have questions answered and ensure that pupils know enough to keep themselves safe.
- age appropriate from the off set to use scientific names for body parts – use the Science Curriculum to your advantage.
- Protect against the Sexual Offences Act 2003:-
 - Protecting a child from pregnancy
 - Protecting the physical safety of a child
 - Promoting a child’s emotional well-being by giving advice
- help children deal with the effect of media coverage of issues relating to drugs
- support staff in dealing with issues and incidents relating to drugs and drugs use

By the end of KS2 children will be well informed and all issues will have been covered – ensuring that any questions that do arise, pupils will be able to answer in an educated and informed manner.

- 2.2** All of these objectives contribute significantly to the universal element of young people to learning that will enable them to live safe, fulfilled and healthy lives (Department for Education Statutory guidance on sex and relationship education (<https://www.gov.uk/government/publications/sex-and-relationship-education>)).

3. Context

3.1 Sex Education

While sex education in our school means that we give children information about sexual behaviour, we do this with an awareness of the moral code and values which underpin all our work in school. In particular, we teach sex education in the belief that:

- sex education should be taught in the context of marriage or other stable relationships and family life.
- sex education is part of a wider social, personal, spiritual and moral education process.
- 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.
- it is important to build positive relationships with others, involving trust and respect.

- children need to learn the importance of self-control.
- Drug Education
- Research has shown that by the age of 11 many primary school children have extensive knowledge of the world of drugs. For some, this knowledge may be inaccurate and incomplete, for others it will develop through personal experience.
- Together research shows that up to 50% of children have tried an illegal drug by the age of 16. The figures also suggest that the first age of experimentation is decreasing and that children of primary age are exposed to opportunities to try both illegal and illegal drugs. The 1995 white paper 'Tackling Drugs Together' stated that schools had an important role both in reducing the misuse of drugs and minimising their health risks.
- The school's drugs education programme will contribute to:
 - increasing the safety of communities from drug related crime
 - reducing the acceptability and availability of drugs to young people
 - reducing the health risks and other damage related to drug misuse

4. The National Healthy School Standard

4.1 We take cognisance of the National Healthy School Standard scheme, which promotes health education. We:

- consult with parents on matters of health and sex education policy;
- give guidance to all teachers who teach sex education;
- listen to the views of the children in our school regarding sex education;
- answer children's questions factually and honestly;
- look positively at any local initiatives that support us in providing the best sex education teaching programme that we can devise.

5. Organisation

5.1 The Headteacher, Deputy Headteacher and Curriculum Leaders ensure that we teach sex and drug education through different aspects of the curriculum. While we carry out the main sex and drug education teaching in our personal, social and health education (PSHCE) curriculum, we also teach some sex education through other subject areas (for example, science and PE), where we feel that they contribute significantly to a child's knowledge and understanding of his or her own body, and how it is changing and developing.

5.2 In PSHCE we teach children about relationships, and we encourage children to discuss issues. We teach about the parts of the body and how these work, and we explain to them what will happen to their bodies during puberty. For example, we tell the boys that their voices will change during puberty and we explain to the girls about menstruation. We encourage the children to ask for help if they need it.

- 5.3** In science lessons in both key stages, teachers inform children about puberty and how a baby is born. For this aspect of the school's teaching, we follow the guidance material in the national scheme of work for science. In Key Stage 1 we teach children about how animals, including humans, move, feed, grow and reproduce, and we also teach them about the main parts of the body. Children learn to appreciate the differences between people and how to show respect for each other. In Key Stage 2 we teach about life processes and the main stages of the human life cycle in greater depth.
- 5.4** In Year 5 we place a particular emphasis on health and sex education, as many children experience puberty at this age. We liaise with the Local Health Authority about suitable teaching materials to use with our children in these lessons. Teachers do their best to answer honestly and appropriately all questions with sensitivity and care. By the end of Key Stage 2, we ensure that both boys and girls know how babies are born, how their bodies change during puberty, what menstruation is, and how it affects women. We always teach this with due regard for the emotional development of the children (as stated earlier in this policy).

The NC guidelines for science require that children are taught:-

- At KS1 about the role of drugs and medicines
- At KS2 that tobacco, alcohol and other drugs can have harmful effects

- 5.5** We contact parents and carers of children in year 5 and offer to discuss this particular programme of lessons, to explain what the issues are and how they are taught, and to see the materials the school uses in its teaching.
- 5.6** Ground rules will be put in place – the School Council will take suggestions for this from pupils through the school community. The final set of rules will be included in this Policy.

6. The role of parents

- 6.1** The school is well aware that the primary role in children's sex health & relationship education lies with parents and carers. We wish to build a positive and supporting relationship with the parents of children at our school through mutual understanding, trust and co-operation. In promoting this objective we:
- inform parents about the school's sex education policy and practice; this will include drop in sessions for parents and will include IT safety.
 - answer any questions that parents may have about the sex education of their child;
 - take seriously any issue that parents raise with teachers or governors about this policy or the arrangements for sex education in the school;

- encourage parent governors to be involved in reviewing the school policy and making modifications to it as necessary;
- believe that through the delivery of best practice in sex education that the children will benefit from being given consistent messages about their changing body and their increasing responsibilities.

6.2 Parents have the right to withdraw their child from all or part of the sex education programme that we teach in our school. If a parent wishes their child to be withdrawn from sex education lessons, they should discuss this with the headteacher, and make it clear which aspects of the programme they do not wish their child to participate in. The school always complies with the wishes of parents in this regard.

7. The role of other members of the community

7.1 We encourage other valued members of the community to work with us to provide advice and support to the children with regard to health and sex education. We use material provided by 'Health Promotion' based in Gloucester.

8. Confidentiality

Teachers conduct sex education lessons in a sensitive manner and in confidence. However, if a child makes a reference to being involved in sexual activity, then the teacher will take the matter seriously and deal with it as set down in the procedures within The Safeguarding Policy. Teachers will respond in a similar way if a child indicates that they may have been a victim of abuse.

9. The role of the headteacher

- 9.1** It is the responsibility of the headteacher to ensure that both staff and parents are informed about our sex education policy, and that the policy is implemented effectively. It is also the headteacher's responsibility to ensure that members of staff are given sufficient training, so that they can teach effectively and handle any difficult issues with sensitivity.
- 9.2** The headteacher liaises with external agencies regarding the school sex education programme, and ensures that all adults who work with children on these issues are aware of the school policy, and that they work within this framework.
- 9.3** The headteacher monitors this policy on a regular basis and reports to governors, when requested, on the effectiveness of the policy.

10. Monitoring and review

- 10.1** The governing body monitors our sex education policy to an agreed timetable and revises the policy as necessary. The governing body gives serious consideration to any comments from parents about the sex education programme, and makes a record of all such comments.

11. Consistency of Policies

This Policy should be read in conjunction with the School's Safeguarding Policy.