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# Relationships & Sex Education Policy

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Chew Valley School

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# Relationships and Sex Education Policy

## 1. Rationale

Chew Valley School is committed to providing education that supports the spiritual, moral, cultural and physical development of young people, preparing them for the opportunities, responsibilities and experiences of life. Sex and relationships education is about the understanding of the importance of stable and loving relationships, respect, love and care for family relationships. It is about the teaching of sex, sexuality and sexual health. The Relationship and Sex Education (RSE) provided by the school through the PSHRE curriculum, aims to ensure that irrespective of disability, gender, sexual orientation, pregnancy, maternity, religion, cultural background or race that our pupils are well prepared for their futures. The RSE programme makes a contribution to protecting children and young people by addressing specific national and local health priorities.

## 2. Purposes

The PSHRE programme, informed by DfE Sex and Relationships Education SRE Guidelines 2000, aims to:

- Enable young people to respect themselves and others and to move with confidence from childhood to adolescence into adulthood;
- Provide accurate and up-to-date information on HIV, AIDS and other sexually transmitted infections;
- Promote the value of family life and caring relationships;
- Understand the significance of marriage and stable relationships as the key building blocks of communities and societies;
- Prepare young people for the responsibilities and experiences of adult life.

## 3. Guidelines

1. Parents are the key people in teaching their children about sex, relationships and the transition from childhood to adult life, however, parents may find it difficult to talk to their children about sex and relationships and should be supported by the school and health workers in their role as sex educators.
2. Parents have the right to withdraw their children from all or part of the RSE provided except for those topics included in the statutory guidance.
3. RSE is co-ordinated by the Head of PSHRE. The scheme of work is delivered by PSHRE teachers in KS3 and PSHE teachers in KS4 and KS5. The Head of PSHRE will support these teachers along with health professionals.
4. PSHE Lessons are the equivalent of one lesson per fortnight per year group. Teaching groups are mixed ability at KS3 and matched against English groups in KS4.
5. A variety of teaching methods are used. Before any lesson begins, the teacher will discuss and establish agreed "ground rules" which will enable everybody to discuss openly and honestly without fear or embarrassment or judgement.
6. Resources will be selected following advice from the Health Promotion team at BANES, and specialist inputs will be provided from a range of appropriate agencies. Pupils will be asked their views on the programme throughout the course. Their views are taken into account as the programme is reviewed and rewritten every year.
7. Some aspects of sex education and HIV/AIDS will be delivered within the Science curriculum.

8. A spiral model of the PSHE curriculum is followed. A topic like RSE is revisited every year, in each year, in order to meet the changing needs of the pupils and their different maturity levels.
9. RSE lessons, while providing accurate information, will use appropriate resources and teaching methods to develop the skills required for decision making, personal reflection and assertiveness.
10. The following topics will be addressed within RSE: puberty changes; personal hygiene; body image; stereotypes; relationship skills; self-image and identity; body language; platonic and sexual relationships; morality in relationships; coping with abuse; human sexuality; sexual awareness and the expression of sex within a relationship; the right not to be sexually active; peer group and media pressure; the importance of safe sex; HIV and AIDS; STIs; abortion and its moral and ethical questions; population growth and change; the choice of parenthood and contraceptive methods; the nature of families; preparation for pregnancy; changing attitudes to gender roles; sexism and dual standards; equal opportunities.
11. The programme of study for PSHRE is outlined in Appendix 1.
12. Learning objectives are set and routinely checked by staff to assess the acquisition of knowledge and skills. Pupils are also asked to self-assess their own development.
13. Teachers should be able to deal honestly and sensitively with sexual orientation, answer appropriate questions and offer support without bias.
14. Trained staff in school are able to give students full information about different types of contraception, including emergency contraception and their effectiveness. Guidance on where to obtain confidential advice may be given.
15. Teachers cannot offer or guarantee pupils unconditional confidentiality. Should any issues of a sensitive nature arise, the school, whilst providing maximum support for the pupil, may involve parents and/or relevant support agencies.
16. The school will provide opportunities for pupils to speak to the school nurse who, while respecting the confidence of the pupils, will encourage them to work with their parents in addressing any issues of a personal or sensitive nature.
17. The school's response to confidentiality is in the first instance to maintain the safety of the pupil.
18. At risk and vulnerable pupils are supported to engage with the programme on an individual basis. For example, pupils have been taught in small groups led by the School Nurse; Learning Support Assistants (LSAs) have been trained to support the delivery of materials to pupils with Autism Spectrum Disorder (ASD).
19. Monitoring of PSHRE will occur with a curriculum review yearly, in which the needs of pupils and government guidelines will be considered, as well as local data and trends. Reference will be made to the National Health School Standard (SRE) and to RSE guidance from the DfE.

#### **4. Conclusions**

A robust, relevant and enjoyable PSHRE curriculum will deliver to our young people the knowledge and skills required to play a full part in our future society. Their growth will help to ensure their leading healthy, safe and fulfilled lives.

Related policies and documents: PSHE policy; Anti-Bullying policy; Equalities policy.

Committee: Curriculum and Pupils

Approved July 14

Review date July 15

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#### Appendix 1:

#### PSHRE Curriculum Map

7	Emotional Health and wellbeing.  Dealing with negative emotions	Puberty and life changes	Smoking	Alcohol	Bullying	Mental Health awareness
8	Smoking and alcohol	First Aid	Resolving conflict	Self-esteem and identity	Respectful relationships	Bullying
9	Human Rights	Self-esteem and body image	Relationships and sex	Alcohol	Drug Education	Personal identity
10	Living positively	Relationships and sex	Drugs education	Mental Health awareness	Diversity	Self esteem and body image
11	Alcohol	Drugs education	Relationships and sex	Futures		
12	Transition to Sixth-Form	Body image  Alcohol	Self-esteem;  Revision	Growth mindset;  Futures	Drugs education	Relationships and sex