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Sex and Relationship Education Policy

This Policy was adopted by Board of Directors on conversion
to Academy September 2015





Sex and Relationship Education Policy

1 Introduction

Our school's policy on sex and relationships is based on the DCSF document Sex and Relationship Education Guidance (DCSF 0116/2000) and supports both National and local strategies to reduce the number of teenage pregnancies.

- DCSF The Teenage Pregnancy Strategy 1999 - To reduce by 50% the 1998 England Under 18 conception rate by 2010.
- Coventry Health Authority 2000 - A 55% reduction by the year 2010.

We recognise Sex and Relationship Education as the policy's full title but for brevity's sake we will refer in the rest of this policy simply to 'sex education'.

In the DCSF document, sex education is defined as 'learning about physical, moral and emotional development'. The guidance states, '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'.

Sex education is part of the personal, social and health education (PSHE) curriculum in our school. When we inform our pupils through sex education about sexual issues, we do this with regard to 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.

Our PSHE curriculum develops relationship education from Foundation stage to Year 6 and teaches life skills and strategies for making, sustaining and repairing relationships. Developing children's ability to be emotionally literate forms a significant part of the school's PSHE programme.

2 Aims and Objectives

We teach children about:

- the physical development of their bodies as they grow into adults;
- the way humans reproduce;
- respect for their own bodies and the importance of sexual activity being part of a committed, long-term, and loving relationship;

- the importance of family life;
- moral questions;
- relationship issues;
- respect for the views of other people;
- sex abuse, and what they should do if they are worried about any sexual matters.
- Who and when it is appropriate to discuss matters relating to sexual development and relationships.

3 Context

We teach about sex in the context of the school's aims and values. 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 of the values which underpin all our work in school. In particular, we teach about sex in the belief that:

- sex should be taught about in the context of marriage, loving relationships, and family life;
- sex education 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;
- it is important to build positive relationships with others, involving trust and respect;
- children need to learn the importance of self-control.

4 The National Healthy School Standard

We now participate in the National Healthy School Standard scheme, which promotes health education. As participants in this scheme we:

- consult with parents on all matters of health education policy;
- train the designated teachers to teach about sex;
- listen to the views of the children in our school regarding sex education;
- look positively at any local initiatives that support us in providing the best sex education programme that we can devise.
- Jointly plan and deliver Sex and Relationship Education with school Nurses.

5 Organisation

We teach about sex through different aspects of the curriculum. While we carry out the main sex education in our personal, social and health education (PSHE) curriculum, we also do some sex education through other subject areas (for example, science and PE) which we believe contribute significantly to children's knowledge and understanding of their own bodies, and how they are changing and developing.

In PSHE 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 the children

what will happen to their bodies during puberty. For example, we teach the children that boys' voices will change during puberty, and we explain menstruation to both boys and girls. We encourage the children to ask for help if they need it.

In science lessons, in both key stages, teachers inform children about puberty and how a baby is born. For this aspect of our 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 fact that people are not all the same, and that we need to respect each other. In Key Stage 2 we teach about life processes, and the main stages of the human life cycle, in greater depth.

In Years 5 and 6 we place a particular emphasis on health 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 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 children's 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.

We arrange a meeting for all parents and carers of children in Year 6 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.

6 The Role of Parents

The school is well aware that the primary role in children's sex 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 sex education policy and practice;
- 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 about the arrangements for sex 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 sex education, so that the teaching in school supports the key messages that parents and carers give to children at home.

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.

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

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, give us valuable support with our sex education programme. Other people that we call on include local clergy and social workers.

8 Confidentiality

Teachers conduct sex education lessons in a sensitive manner establishing ground rules that are mutually beneficial and protective to staff and children within the first session. The sessions will be safe and secure environments held 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 take the reference seriously, and deal with it as a matter of 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 headteacher will then deal with the matter in consultation with health care professionals (see also our policy on Child Protection).

9 The Role of the Head Teacher

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 about sex effectively, and handle any difficult issues with sensitivity.

The Headteacher liaises with external agencies regarding the school sex education programme, and ensures that all adults who work with our children on these issues are aware of the school policy, and work within its framework.

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

The Quality and Standards Committee of the governing body monitors the impact of our sex education policy on a bi-annual basis. This committee reports its findings and recommendations to the full governing body, as necessary, if the policy needs modification. The Curriculum Committee gives serious consideration to any comments from parents about the sex education programme, and makes a record of all such comments. Governors require the headteacher to

keep a written record, giving details of the content and delivery of our sex education programme.

This policy will be reviewed in two years, or earlier if necessary.