

Sutton Community Academy

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| **Policy:** | Relationships and Sex Education |
| **Date of review:** | June 2025 |
| **Date of next review:** | June 2027 |
| **Head of Department:****Line Manager:** | Mrs M DymondMrs L Foulds - Assistant Principal  |
| **Status:** | Statutory |

## Purpose of policy and guiding principles

* 1. The school believes that Relationships, Sex and Health Education is the lifelong learning about moral and emotional development. It is about the understanding of the importance of marriage for family life, stable and loving relationships, respect, love and care. We define ‘relationships, sex and health education’ as learning about the emotional, social and physical aspects of growing up, relationships, sex, human sexuality and sexual health, as well as general health and wellbeing. The aim is to equip children and young people with the information, skills and values to have safe, fulfilling and enjoyable relationships, and to take responsibility for their sexual health and general wellbeing. It is not about the promotion of sexual orientation or sexual activity; this would be inappropriate teaching.
	2. We have a duty under the Equality Act (2010) to ensure that teaching is accessible to all children and young people, including those who are lesbian, gay, bisexual and transgender (LGBT). Our inclusive sex and relationships education fosters good relations between students, tackle all types of prejudice – including homophobia – and promotes understanding and respect.
	3. Sex and Relationships Education is delivered within the aims and philosophy of the trust and the agreed framework for the overall pastoral care of students.

## Links with other policies or legislation

* 1. The content of Sex Education delivered within the school corresponds with National Curriculum Council, Health Education Guidance, and is in line with the DfE Guidance on Relationships, Sex and Health Education (September 2020) and the National Curriculum Science documents.
	2. Some aspects are delivered through Science, PE and the Pastoral Curriculum (delivered through the tutor programme and year meetngs).

## Aims and Objectives of Relationships, Sex and Health Education

* 1. Aim: To develop a healthy lifestyle and keep themselves and others safe. The objective of this aim is to understand:
		+ the physical and emotional changes that take place at puberty
		+ how to keep healthy, and what influences there are on health
		+ that positive relationships and balancing work and leisure affects mental health
		+ human reproduction, contraception, sexually transmitted infections, HIV, and high-risk behaviours
		+ what is a risk, and how to make safer choices through relevant information
		+ some ways of resisting pressure that threatens their own safety
		+ the health risks associated with early sexual activity and pregnancy and about safer practices
		+ how different forms of contraception work and where to seek advice in order to inform future choices
		+ to seek professional advice confidently and find information related to health.
	2. Aim: To develop effective and fulfilling relationships and learn to respect differences. The objective of this aim is to understand or develop:
		+ the changing nature of, and pressure on, relationships with friends and family, and when and how to seek help
		+ the role and feelings of parents and carers and the value of family life
		+ the value of negotiation within relationships and that personal action have consequences and may involve compromise
		+ communication skills with peers and adults
		+ the diversity of different ethnic groups, the power of prejudice and to be aware of exploitation in relationships.
	3. Aim: To develop self-esteem, confidence, independence and responsibility; and make the most of their abilities. The objective of this aim is to be able to:
		+ recognise and manage influences, pressures and sources of help
		+ consider long and short term consequences when making decisions about personal health
		+ use assertiveness skills to counter unhelpful pressure.

## Roles and responsibilities

* 1. The planning and organisation for the PSHCE, Relationships, Sex and Health Education programme, delivered through PSHCE, is the responsibility of the Head of Department for PSHCE, an Assistant Principal (Line Manager for PSHCE) and the Safeguarding Lead (department responds to specific issues as and when they arise.)
	2. Liaison needs to be maintained with other Curriculum Leaders, the Pastoral Team and Safeguarding Leads.
	3. The department consists of 3 “specialisit” teachers (1 full time, 1 part time, 1 full time but teaches other subjects as well. The department also has a part time careers adviser.) The HoD and Department Line Manager are responsible for quality assuring the delivery of the programme.
	4. Pupils will have opportunities to review and reflect on their learning during lessons, as well as pupil voice at varying points in the year. This will help shape the curriculum moving forward.

## Delivery and continuity

* 1. All topics delivered form part of a carefully planned, spiraling, programme. PSHCE is delivered to students in their year groups to ensure age-appropriate content. There is progression and continuity from Year 7 onwards.
	2. Experienced staff deliver work on Relationships, Sex and Health Education through a series of well-resourced lessons.
	3. The teaching of the importance of healthy and caring relationships is delivered to all students within PSHCE lessons, tutor periods, and Year Meetings.
	4. Teachers will try to build on knowledge students have obtained from Key Stages One and Two in partner primary schools. The school will attempt to maintain an up to date knowledge of the Relationships, Sex and Health Education programmes delivered in partner primary schools through close transition links.

## Values and framework

* 1. All sessions in Relationships, Sex and Health Education are delivered within a framework which clearly outlines what is appropriate behaviour for these sessions based on good communication and interpersonal skills within a broader base of self-esteem and respect. The delivery aims to be supportive, inclusive of all students’ needs, honest and open whilst demonstrating respect for staff and others.
	2. The aim is to provide an understanding that positive, caring environments are essential for the development of a good self-image and that individuals are in charge of, and responsible for, their own body and actions.
		+ Balanced factual information will be given within a framework in which students can examine their own attitudes and have opportunities to consider other views.
		+ Materials, information and teaching strategies used will be selected to be appropriate for the students' age, intellectual development and maturity.
		+ Teachers will assume that they may be covering areas that some parents will already have covered with their children; therefore attitudes may have been formed and should be respected.
		+ It is recognised that it is important for the moral dimensions of sexual relationships to be considered responsibly, taking account of religious principles and parental guidance.
		+ The content will be presented to students in such a way so as to encourage them to have due regard for moral considerations and the value of family life.
		+ All work delivered will be sensitive to the needs of all students and will take account of gender, religions and sexual orientation.
	3. The materials in use will be reviewed regularly by the HoD. The students will play a full and active part in the reviewing their effectiveness through student voice.

## Information to Parents

* 1. Parents are able to access this policy at any time via our website. We want to work closely with parents to ensure that they are fully aware of what is being taught and the rationale for its importance.
	2. Information on the content of the programme can be sought by contacting the HOD for PSHCE.
	3. Parents/Carers do have the right to withdraw their children from sex education lessons (Appendix 1). The Academy asks that any parent(s)/carer(s) who wishes to withdraw their child from the sex education element of Relationships, Sex and Health Education (that which is not part of the Science national curriculum) completes the ‘opt-out’ form (Appendix 2) and then makes an appointment to speak to a member of the Senior Leadership Team (SLT) to discuss how this topic(s) will be delivered by parents at home. Requests for withdrawal from lessons should be addressed to the Principal who will make suitable arrangements within 21 days.
	4. Under the government statutory guidance (2020) students have the right to opt-in to sex education, even if this goes against the stated wish of their parents, when they are within 3 school terms of their 16th birthday. If this is the case, the Academy is obliged to provide a ‘catch- up’ programme on the sex education topics that may have been missed.
	5. Please be aware that a parent’s choice to withdraw a child from sex education does not affect the child’s right to use confidential health services provided at the school or elsewhere.

## Support for staff and students

* 1. The following measures are in place to support students and staff in relation to Relationships, Sex and Health Education:
		+ The HoD and Line Manager for PSHCE will attend training and meetings as appropriate, to ensure that the school is kept informed and up-to-date.
		+ Teachers responsible for delivering Relationships, Sex and Health Education should feel confident and will be given appropriate support and training, if required.
		+ Experts who are not teachers may be involved in Relationships, Sex and Health Education. and their involvement will be in accordance with this policy. The input by any outside agency may be observed, or supported, by academy professionals.
		+ Priority will be given to staff new to the teaching of Relationships, Sex and Health Education when training opportunities are available.
		+ Guidelines based on DfE guidance (issued under Section 80A of the Education Act 2002 and section 403 of the Education Act 1996) are available for all teachers of Relationships, Sex and Health Education (via Department of Education website). Staff are reminded of these guidelines and the need to develop appropriate teaching strategies.
		+ Staff are also reminded of their responsibilities towards Child Protection and how effective Relationships, Sex and Health Education can bring an understanding of acceptable behaviour, which can lead to a disclosure of a child protection issue.
		+ No member of staff will be instructed against their wishes to deliver Relationships, Sex and Health Education.
		+ Provision for students to discuss issues or concerns, on an individual basis is made available through the school pastoral team. The student will be met by the pastoral team and could be signposted to another support team within the school.

## Organisational aspects of the Relationships, Sex and Health Education programme

* 1. Student groupings: Topics will normally be delivered in mixed gender and mixed ability groups. Occasionally single gender groups may be organised at the discretion of the staff delivering the programme in consultation with the HoD and any outside agencies involved in the topic.

## Health Professionals

* 1. The involvement of health professionals is encouraged within the Relationships, Sex and Health Education Programme, to support the work of the teaching staff and to present a community view on the various topics.
	2. Aspects and approaches to the delivery of Relationships, Sex and Health Education by Health professionals will be in line with the academy’s Relationships, Sex and Health Education Curriculum Plan.

## Parental Requests

* 1. Parental requests to view materials will be met within 21 days. Parents will be invited to the academy at a mutually convenient time in order to look at materials used, alongside a member of SLT.
	2. Parental requests for their child(ren) to be withdrawn from sessions on Sex Education will result in a discussion between the academy (usually an Assistant Principal and theHoD for PSHCE ) and the parent. If removal from certain or all sessions is decided then the child(ren) will work in an agreed quiet space for the agreed sessions and will be set an equal amount of work to that being covered in the sessions.

## Monitoring and Evaluation of the Relationships, Sex and Health Education Policy

* 1. This will take place through:
		+ end of topic review of the materials and delivery by students and staff
		+ regular meetings of those involved in the delivery of the programme
		+ meetings between those responsible for planning and organising and the relevant member of the senior management team
		+ annual review of the policy on Relationships, Sex and Health Education
		+ meetings between the HoD and others as necessary to discuss changing DofE Guidelines, Legislation, Student Needs, Academy Needs as perceived by the academy or the Governors
		+ reports will be made as required to the Staff/Student/Governors.

# Appendix 1: Categorisation of topics within the PSHCE curriculum.

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| **Key Content from Statutory Guidance** | **Relation- ships Education** | **The science of sex education (science lessons)** | **Sex Education (non- science /****PSHCE lessons)** | **Health Education** | **The Law** |
| Families: different types of relationships | Y |  |  |  |  |
| Families: relationships contributing to happiness and bringing up children | Y |  |  |  |  |
| Families: marriage (the law, cohabitation) | Y |  |  |  |  |
| Families: marriage as a relationship choice | Y |  |  |  |  |
| Families: other long term relationshipoptions | Y |  |  |  |  |
| Families: roles and responsibilities of parents | Y |  |  |  |  |
| Families: deciding on which people aretrustworthy | Y |  |  |  |  |
| Relationships: positive and healthy friendships | Y |  |  |  |  |
| Relationships: practical steps to improve or support respectful relationships | Y |  |  |  |  |
| Relationships: stereotypes | Y |  |  |  |  |
| Relationships: treating people with respect | Y |  |  |  | Y |
| Relationships: bullying | Y |  |  |  |  |
| Relationships: criminal behaviour in relationships | Y |  |  |  | Y |
| Relationships: sexual harassment and sexual violence | Y |  |  | Y |  |
| Relationships: legal rights and responsibilities around equality | Y |  |  |  |  |
| Online: rights and responsibilities online |  Y |  |  |  | Y |
| Online: online risks (including sharinginfo or potentially compromising material) | Y |  |  | Y |  |
| Online: not providing info with othersthat you wouldn’t want sharing | Y |  |  | Y |  |
| Online: where to report material or manage issues online |  |  |  | Y |  |
| Online: impact of viewing harmfulcontent |  |  |  | Y |  |
| Online: pornography presenting a distorted picture of sexual behaviours |  Y |  | Y |  |  |
| Online: sharing and viewing indecent images of children is a criminal offence | Y |  |  |  | Y |
| Online: storing and sharing of info anddata | Y |  |  |  |  Y |
| Safety: sexual consent, exploitation, abuse, grooming, coercion, harassment, rape, domestic abuse, forced marriage,honour based violence, FGM | Y |  |   | Y |  |
| Safety: how to recognise consent in others | Y |  |   | Y | Y |

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| **Key Content from Statutory Guidance** | **Relation- ships Education** | **The science of sex education (science lessons)** | **Sex Education (non- science / PSHCE****lessons)** | **Health Education** | **The Law** |
| Sexual relationships: healthy intimate relationships | Y |  | Y | Y |  |
| Sexual relationships: health affected by choices made in sexual relationships |  |  |  Y | Y |  |
| Sexual relationships: reproductivehealth, fertility, menopause |  | Y  |  Y |  Y |  |
| Sexual relationships: identifying and managing sexual pressure | Y |  |  |  |  |
| Sexual relationships: delaying sex / intimacy without sex |  |  | Y |  |  |
| Sexual relationships: contraceptivechoices |  | Y  |  Y |  Y |  |
| Sexual relationships: pregnancy and miscarriage |  |  Y  |  Y |  Y |  |
| Sexual relationships: options in relationto pregnancy | Y |  |  Y | Y | Y |
| Sexual relationships: STIs |  | Y  |  Y |  Y |  |
| Sexual relationships: alcohol and drugs leading to risky sexual behaviour | Y |  |  |  Y  |  |
| Sexual relationships: accessing confidential and reproductive healthadvice and treatment |  |  |  | Y | Y |
| Mental wellbeing: talking about emotions |  |  |  | Y |  |
| Mental wellbeing: happiness linked toothers |  |  |  | Y |  |
| Mental wellbeing: recognising early signs of wellbeing concerns |  |  |  | Y |  |
| Mental wellbeing: common types of mental ill health |  |  |  | Y |  |
| Mental wellbeing: analysing positive andnegative effects of actions on mental health |  |  |  | Y |  |
| Mental wellbeing: benefits and importance of physical exercise |  |  |  | Y |  |
| Internet safety: similarities anddifferences between the online world and physical world |  |  |  | Y |  |
| Internet safety: identifying harmfulbehaviours online |  |  |  | Y |  |
| Physical health: links between physical activity and mental wellbeing |  |  |  | Y |  |
| Physical health: a healthy lifestyle |  |  |  | Y |  |
| Physical health: science relating toblood, organ and stem cell donation |  |  |  | Y |  |
| Healthy eating: link between poor dietand health risks (inc tooth decay and cancer) |  |  |  | Y |  |
| Drugs: legal and illegal drugs and theirassociated risks |  |  |  | Y |  |
| Drugs: law relating to the supply and possession of illegal substances |  |  |  | Y |  |

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| **Key Content from Statutory Guidance** | **Relation- ships Education** | **The science of sex education** | **Sex Education (non- science / life****lessons)** | **Health Education** | **The Law** |
| Drugs: physical and psychological risks linked with alcohol |  |  |  | Y |  |
| Drugs: consequences of addiction including alcohol dependency |  |  |  | Y |  |
| Drugs: dangers of prescription drugs |  |  |  | Y |  |
| Drugs: facts about the harms from smoking tobacco |  |  |  | Y |  |
| Health: personal hygiene |  |  |  | Y |  |
| Health: dental health |  |  |  | Y |  |
| Health: benefits of regular self- examination and screening |  |  |  | Y |  |
| Health: immunisations and vaccinations |  |  |  | Y |  |
| Health: importance of sleep |  |  |  | Y |  |
| First aid: treatment for common injuries |  |  |  | Y |  |
| First aid: life saving skills including CPD |  |  |  | Y |  |
| First aid: purpose of defibrillators |  |  |  | Y |  |
| Changing bodies: facts about puberty |  |  |  | Y |  |
| Changing bodies: changes that take place in males and females (impact onemotional and physical health) |  |  |  | Y |  |

**Appendix 2: Sex Education ‘opt-out’ form**

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| Name of student: |  |
| Year / Tutor group: |  |

Please answer the following questions if you wish to withdraw your child from the sex education elements of our whole school Relationships, Sex and Health Education provision:

1. Which sex education topics do you wish to withdraw your child from?
2. Why do you wish to withdraw your child from these topics?
3. How do you intend to provide information and guidance on this topic(s) at home?

Once we have received this form, you will be invited into the Academy to discuss these questions further with a member of our Senior Leadership Team and HoD for PSHCE. We can only confirm that your child will not take part in any lessons covering a topic classified as ‘sex education’ once this meeting has taken place.

Please be aware that your child has a right to opt back in to learning about topics classified as ‘sex education’ when they are within 3 terms of their 16th birthday. If this is the case, the Academy will provide a ‘catch-up’ programme to inform them of topics they have missed. This is part of the Department for Education statutory guidance (2020).

For further information, please see the Academy Relationships, Sex and Health Education policy.

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| Date of meeting: |  |
| Meeting with: |  |

Following this meeting I do / do not want to withdraw my child from sex education.

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| Printed name: |  | Relationship with child: |  |
| Signed: |  | Date: |  |