

SHERRARDSWOOD SCHOOL

POLICY ON SEX AND RELATIONSHIP EDUCATION

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- 1.1 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.
- 1.2 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 as 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;
 - sexual abuse, and what they should do if they are worried about any sexual matters.

2 Context

- 2.1 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. We teach sex education on the understanding that:
- it is taught in the context of marriage and family life;
 - it 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.

3 Organisation of Curriculum:

- 3.1 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 deliver some sex education through other subject areas (e.g. 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.
- 3.2 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.
- 3.3 In science lessons, in both Key Stage 2 and 3, 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.

- 3.4 In Year 6, we place a particular emphasis on health education, as many children experience puberty at this age. Teachers do their best to answer 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 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.
- 3.5 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 enable them to see the materials the school uses in its teaching.

4 The role of parents

- 4.1 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:
- 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;
 - 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.

- 4.2 Parents have the right to withdraw their child from all or part of the sex education programme that we teach in our school. If parents wish their child to be withdrawn from sex education lessons they should discuss this with the headmistress, 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.

5 The role of other members of the community

- 5.1 We encourage other valued members of the community to work with us to provide advice and support to the children with regard to health education for example Local Health Authority, local clergy, social workers and youth workers.

6 Confidentiality

- 6.1 Teachers conduct sex education lessons in a sensitive manner, and 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 headmistress will then deal with the matter in consultation with safeguarding and health care professionals (see also our policy on Child Protection).