

<b>Title</b>	Relationships and Sex Education and Physical Health and Mental Well-being Policy (Secondary Phase)
<b>Year</b>	2021/2022
<b>Policy Reference</b>	Browne Jacobson LLP
<b>Staff Link</b>	Assistant Principal, Adam Cowdell
<b>Governor Link</b>	Safeguarding Governor
<b>Date approved by FGB</b>	19 <sup>th</sup> October 2021
<b>Adopted</b>	19 <sup>th</sup> October 2021
<b>Review Date</b>	October 2022

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## 1 Introduction

- 1.1 Northampton Free School Trust (the “Trust”) believes that in order to create a happy and successful adult life, children and young people need to have the self-confidence to make informed decisions about their wellbeing, health and relationships. Relationships and Sex Education (RSE) is about giving children and young people the information they need to help them develop healthy, nurturing relationships of all kinds, not just intimate relationships. Health Education is giving pupils information to make well-informed, positive choices about their own health and wellbeing. The Trust recognises that physical health and mental wellbeing are interlinked, and it is important that pupils understand that good physical health contributes to good mental wellbeing, and vice versa.
- 1.2 The Trust has a responsibility under the Equality Act 2010 to ensure the best for all its pupils irrespective of disability, educational needs, race, nationality, ethnic or national origin, sex, gender identity, pregnancy, maternity, religion or sexual orientation. As a result, RSE will be sensitive to the different needs of individual pupils and may need to adapt and change over time to reflect the needs of the particular cohort. The Trust may also take positive action, where it can be shown that it is proportionate, to deal with particular disadvantages affecting one group because of a protected characteristic.
- 1.3 The Trust is aware of the need to be mindful of and respectful to a wide variety of faith and cultural beliefs across the school, and will make every attempt to be appropriately sensitive; equally it is essential that children and young people still have access to the learning they need to stay safe, healthy and understand their rights as individuals. The Trust believes that its pupils deserve the right to honest, clear, impartial scientific and factual information to help better form their own beliefs and values, free from bias, judgement or subjective personal beliefs of those who teach them.
- 1.4 This policy has been developed in consultation with parents, pupils and staff to ensure that it meets the needs of the whole school community.
- 1.5 The policy will be reviewed annually and parents will be consulted in advance about significant changes. The policy will be monitored from feedback from learners, staff, parents and classroom observations.

## 2 Aims and Objectives

Through the delivery of high quality, evidence-based and age-appropriate RSE, Relationship and Health Education, the Trust aims to help prepare pupils for the onset of puberty, give them an understanding of sexual development and the importance of health and hygiene, create a positive culture in relation to sexuality and relationships and to ensure pupils know how and when to ask for help and where to access support. By the end of their education the Trust hopes pupils will have developed resilience and feelings of self-respect, confidence and empathy in preparation for the responsibilities and experiences of adult life.

## 3 Definition of Relationships and Sex Education (RSE)

- 3.1 RSE is lifelong learning about physical, sexual, moral and emotional development. It is about teaching sex, sexuality and sexual health in a way that gives pupils the confidence to make sound decisions when facing risks and other challenges. It includes teaching about friendship, the importance of caring, stable and mutually supportive relationships with another person, and how to control and understand feelings that come with being in a relationship.
- 3.2 **RSE does not encourage early sexual experimentation.** It teaches children and young people to understand human sexuality and to respect themselves and others, to build self-esteem and understand the reasons for

delaying sexual activity so that they can develop safe, fulfilling and healthy sexual relationships, at the appropriate time.

- 3.3 RSE will outline that there are different types of committed, stable relationships, the characteristics and legal status of other types of long-term relationships, the importance of marriage as a relationship choice and why it must be freely entered into, how relationships might contribute to human happiness and the their importance for raising children, as well as highlighting the roles and responsibilities of parents with respect to raising children, characteristics of successful parenting and how to judge when relationships have become unsafe as well as how to seek help or advice and report concerns about others.

## **4 Roles and Responsibilities**

All members of the Trust community are expected to follow this policy. Roles, responsibilities and expectations of the school community are set out in detail below.

### **4.1 Board of Trustees**

Trustees will monitor and evaluate the impact of the policy by reviewing pupils' progress in achieving the expected educational outcomes. They will hold the Principal to account for the implementation of the policy. Trustees will scrutinise relevant data, review any issues that might arise and act as a point of challenge for decisions taken by the Principal.

### **4.2 Principal**

The Principal, with support from the Senior Leadership Team, will ensure that staff are supported, receive regular professional development training in how to deliver RSE and are up to date with policy changes. They will ensure that RSE is well led, effectively managed and well planned across various subjects (to avoid unnecessary duplication of topics) and that the quality of provision is subject to regular and effective self-evaluation. The Principal will ensure that teaching is age-appropriate, delivered in ways that are accessible to all pupils with SEND and that the subjects are resourced, staffed and timetabled appropriately. They will ensure that teaching delivered by any external organisation is age-appropriate and accessible for pupils and will liaise with parents regarding any concerns or opinions regarding RSE and Health Education provision and will manage parental requests for withdrawal of pupils from non-statutory, non-science components of RSE.

### **4.3 Staff**

Teachers of RSE, Relationships and Health Education will ensure that they are up to date with school policy and curriculum requirements regarding sex education and will attend and engage in professional development training. Teachers will encourage pupils to communicate concerns regarding their social, personal and emotional development in confidence, listen to their needs and support them seriously. If a pupil comes to a member of staff with an issue that that member of staff feels they are not able to deal with alone, they will take this concern to their line-manager.

### **4.4 Parents**

The Trust hopes to build a positive and supporting relationship with parents through mutual understanding, cooperation and trust. Parents are expected to share the responsibility of sex education and support their children's personal, social and emotional development. The Trust hopes parents will create an open home environment where pupils can engage, discuss and continue to learn about matters that have been raised through school. Parents are also encouraged to seek additional support from the school where they feel it is needed.

#### **4.5 Pupils**

Pupils are expected to take RSE, Relationships and Health Education seriously. Pupils are expected to listen, be considerate of other pupils' feelings and beliefs, comply with class-set confidentiality rules and support one another with issues that arise during class. Pupils who fail to follow these standards of behaviour will be dealt with under the Trust's behaviour policy.

### **5 Delivery of RSE**

5.1 RSE will be delivered in a non-judgmental, factual way allowing scope for pupils to ask questions in a safe environment. Teachers will tailor the delivery of RSE to meet the specific needs of the pupils in that class, and to be responsive to their behaviour and development. Classes will explore different attitudes, values and social labels, and develop skills that will enable pupils to make informed decisions regarding sex and relationships as well as being able to differentiate between fact, opinion and belief and an understanding of the law on various topics. Pupils will be taught the anatomically correct names for body parts, but slang or everyday terms used in certain social circles will be discussed; this will surround discussion about what is and isn't acceptable language to use.

5.2 RSE will be delivered in science, philosophy and ethics, computing and Personal, Social, Health and Economic Education (PSHE), tutor time and will build on the foundation of RSE delivered in primary school.

### **6 RSE: Curriculum and Outcomes**

By the end of their education the Trust expects pupils to know the information set out at Annex 1.

### **7 Health Education: Physical health and mental well-being**

7.1 The Trust wishes to promote pupils' health and well-being by encouraging self-control, their ability to self-regulate and strategies for doing so. This will enable pupils to become confident in their ability to achieve well and persevere even when they encounter setbacks or when their goals are distant, and to respond calmly and rationally to setbacks and challenges. The Trust believes that an integrated, whole-school approach to the teaching and promotion of health and wellbeing will have a positive impact on behaviour and attainment. Health Education will be delivered in science, computing, Physical Education (PE) and Personal, Social, Health and Economic Education (PSHE).

7.2 By the end of their secondary education the Trust expects pupils to know the information set out at Annex 2.

### **8 Pupils with special educational needs and/or disabilities**

8.1 The Trust will endeavour to ensure that RSE and Health Education is accessible for all pupils. We are aware that some pupils are more vulnerable to exploitation, bullying and other issues due to the nature of their SEND and RSE and Health Education may be particularly important for such pupils, for example those with Social, Emotional and Mental Health needs or learning disabilities. Teaching will be sensitive, age-appropriate, developmentally appropriate, differentiated and personalised to meet the specific needs of pupils at different developmental stages.

Staff will make reasonable adjustments to alleviate disadvantage faced by pupils with disabilities and will be mindful of the SEND Code of Practice and the Trust's SEND Policy when planning for these subjects. Staff will use a variety of different strategies to ensure that all pupils have access to the same information, which

include e.g. contraceptive card game, use of expert guest speakers, practical activities, using DVDs or video, group and paired activities, drama and role play.

## **9 Right to request withdrawal from sex education**

- 9.1 The Trust hopes that parents will feel comfortable with, and understand the importance of, the education provided to their children as described in this policy. Parents have the right to request that their child be withdrawn from some or all of the sex education aspects of RSE.
- 9.2 Before withdrawing or making a request, the Trust strongly urges parents to carefully consider their decision as sex education is a vital part of the school curriculum and supports child development. Parents cannot withdraw their child from Relationships or Health Education or the elements on human growth and reproduction which fall under the science curriculum.
- 9.3 Any parent wishing to withdraw their child from sex education should put their request in writing and send it to Curriculum Lead of PSHE for secondary who will arrange a meeting to discuss their concerns. Once those discussions have taken place, except in exceptional circumstances, the school will respect the parents' request to withdraw the child, up to and until three terms before the child turns 16. After that point, if the child wishes to receive sex education rather than be withdrawn, the school will make arrangements to provide the child with sex education during one of those terms.
- 9.4 If a pupil is excused from sex education the school will ensure that the pupil receives appropriate, purposeful education during the period of withdrawal.

## **10 Confidentiality and Child Protection**

- 10.1 The Trust hopes to provide a safe and supportive school community where pupils feel comfortable seeking help and guidance on anything that may be concerning them about life either at school or at home. All teachers will receive training around confidentiality and should ensure that pupils understand that they cannot offer unconditional confidentiality. If a child protection issue is disclosed to a member of staff, that member of staff should follow the Trust's Child Protection and Safeguarding procedures.
- 10.2 If a staff member is approached by a pupil under 16 who is having, or is contemplating having sexual intercourse, the teacher should:
- ensure that the pupil is accessing all the contraceptive and sexual health advice available and understands the risks of being sexually active;
  - encourage the pupil to talk to their parent or carer. Pupils may feel that they are more comfortable bringing these issues to a teacher they trust, but it is important that children and their parents have open and trusting relationships when it comes to sexual health and the school will encourage this as much as possible;
  - decide whether there is a child protection issue. This may be the case if the teacher is concerned that there is coercion or abuse involved. If a member of staff is informed that a pupil under 13 is having, or is contemplating having sexual intercourse, this will be dealt with under child protection procedures.
- 10.3 Pupils with special educational needs may be more vulnerable to exploitation and less able to protect themselves from harmful influences. If staff are concerned that this is the case, they should seek support from the Designated Safeguarding Lead to decide what is in the best interest of the child.

## **11 Equal opportunities**

- 11.1 RSE and Health Education will be delivered equally to both genders, normally in mixed classes. There are, however, certain topics that may be delivered in single sex groupings e.g. menstruation and personal hygiene.
- 11.2 The Trust has a commitment to ensure that RSE and Health Education is relevant to all pupils and is taught in a way that is age and stage appropriate. Pupils are encouraged to openly and freely discuss diversity of personal, social and sexual preferences. Prejudiced views will be challenged, and equality promoted. Any bullying that relates to sexual behaviour or perceived sexual orientation will be dealt with swiftly and seriously in accordance with the Trust's behaviour policy.

## **12 Complaints**

If parents have any concerns or complaints over the application or implementation of this policy they should raise their concerns with a staff member or the Principal in accordance with the Trust's complaints policy.

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

## Annex 1 Curriculum and outcomes

<p><b>Families</b></p>	<ul style="list-style-type: none"> <li>• that there are different types of committed, stable relationships</li> <li>• how these relationships might contribute to human happiness and their importance for bringing up children</li> <li>• what marriage is, including their legal status – for example, that marriage carries legal rights and protections not available to couples who are cohabiting or who have married, for example, in an unregistered religious ceremony</li> <li>• why marriage is an important relationship choice for many couples and why it must be freely entered into</li> <li>• the characteristics and legal status of other types of long-term relationships</li> <li>• the roles and responsibilities of parents with respect to raising of children, including the characteristics of successful parenting</li> <li>• how to determine whether other children, adults or sources of information are trustworthy, judge when a family, friend, intimate or other relationship is unsafe (and to recognise this in others’ relationships), how to seek help or advice, including reporting concerns about others, if needed</li> </ul>
<p><b>Respectful relationships, including friendships</b></p>	<ul style="list-style-type: none"> <li>• the characteristics of positive and healthy friendships, in all contexts including online, such as:             <ul style="list-style-type: none"> <li>– trust, respect, honesty, kindness, generosity, boundaries, privacy, consent and the management of conflict</li> <li>– reconciliation and ending relationships, this includes different (non-sexual) types of relationship</li> </ul> </li> <li>• practical steps they can take in a range of different contexts to improve or support respectful relationships</li> <li>• how stereotypes, in particular stereotypes based on sex, gender, race, religion, sexual orientation or disability, can cause damage (for example, how they might normalise non-consensual behaviour or encourage prejudice)</li> <li>• that in school and in wider society they can expect to be treated with respect by others, and that in turn they should show due respect to others, including people in positions of authority and due tolerance of other people’s beliefs</li> <li>• about different types of bullying (including cyberbullying), the impact of bullying, responsibilities of bystanders to report bullying and how and where to get help</li> <li>• that some types of behaviour within relationships are criminal, including violent behaviour and coercive control</li> <li>• what constitutes sexual harassment and sexual violence and why these are always unacceptable</li> <li>• the legal rights and responsibilities regarding equality (particularly with reference to the protected characteristics as defined in the Equality Act 2010) and that everyone is unique and equal</li> </ul>
<p><b>Online and media</b></p>	<ul style="list-style-type: none"> <li>• their rights, responsibilities and opportunities online, including that the same expectations of behaviour apply in all contexts, including online</li> <li>• about online risks, including that any material someone provides to another has the potential to be shared online and the difficulty of removing potentially compromising material placed online</li> <li>• not to provide material to others that they would not want shared further and not to share personal material which is sent to them</li> <li>• what to do and where to get support to report material or manage issues online</li> <li>• the impact of viewing harmful content</li> </ul>

	<ul style="list-style-type: none"> <li>• that specifically sexually explicit material, for example pornography, presents a distorted picture of sexual behaviours, can damage the way people see themselves in relation to others and negatively affect how they behave towards sexual partners</li> <li>• that sharing and viewing indecent images of children (including those created by children) is a criminal offence which carries severe penalties including jail</li> <li>• how information and data is generated, collected, shared and used online</li> </ul>
<b>Being safe</b>	<ul style="list-style-type: none"> <li>• the concepts of, and laws relating to, sexual consent, sexual exploitation, abuse, grooming, coercion, harassment, rape, domestic abuse, forced marriage, honour-based violence and FGM, and how these can affect current and future relationships</li> <li>• how people can actively communicate and recognise consent from others, including sexual consent, and how and when consent can be withdrawn, in all contexts, including online</li> </ul>
<b>Intimate and sexual relationships, including sexual health</b>	<ul style="list-style-type: none"> <li>• how to recognise the characteristics and positive aspects of healthy one-to-one intimate relationships, which include mutual respect, consent, loyalty, trust, shared interests and outlook, sex and friendship</li> <li>• that all aspects of health can be affected by choices they make in sex and relationships, positively or negatively, for example physical, emotional, mental, sexual and reproductive health and wellbeing</li> <li>• the facts about reproductive health, including fertility and the potential impact of lifestyle on fertility for men and women and menopause</li> <li>• that there are a range of strategies for identifying and managing sexual pressure, including understanding peer pressure, resisting pressure and not pressurising others</li> <li>• that they have a choice to delay sex or to enjoy intimacy without sex</li> <li>• the facts about the full range of contraceptive choices, efficacy and options available</li> <li>• the facts around pregnancy including miscarriage</li> <li>• that there are choices in relation to pregnancy (with medically and legally accurate, impartial information on all options, including keeping the baby, adoption, abortion and where to get further help)</li> <li>• how the different sexually transmitted infections (STIs), including HIV and AIDs, are transmitted, how risk can be reduced through safer sex (including through condom use) and the importance of and facts about testing</li> <li>• about the prevalence of some STIs, the impact they can have on those who contract them and key facts about treatment</li> <li>• how the use of alcohol and drugs can lead to risky sexual behaviour</li> <li>• how to get further advice, including how and where to access confidential sexual and reproductive health advice and treatment</li> </ul>

**The Curriculum for Science covers:**

**Key Stage 3**

- Reproduction in humans (as an example of a mammal), including the structure and function of the male and female reproductive systems, menstrual cycle (without details of hormones), gametes, fertilisation, gestation and birth, to include the effect of maternal lifestyle on the foetus through the placenta, and
- Reproduction in plants, including flower structure, wind and insect pollination, fertilisation, seed and fruit formation and dispersal, including quantitative investigation of some dispersal mechanisms.

#### **Key stage 4**

- Hormones in human reproduction, hormonal and non-hormonal methods of contraception,
- Communicable diseases including sexually transmitted infections in humans (including HIV/AIDs), and
- Genes and sex determination in humans.

## Annex 2 Health Education curriculum and outcomes

<b>Mental wellbeing</b>	<ul style="list-style-type: none"> <li>• how to talk about their emotions accurately and sensitively, using appropriate vocabulary</li> <li>• that happiness is linked to being connected to others</li> <li>• how to recognise the early signs of mental wellbeing concerns</li> <li>• common types of mental ill health (e.g. anxiety and depression)</li> <li>• how to critically evaluate when something they do or are involved in has a positive or negative effect on their own or others' mental health</li> <li>• the benefits and importance of physical exercise, time outdoors, community participation and voluntary and service-based activities on mental wellbeing and happiness</li> </ul>
<b>Internet safety and harms</b>	<ul style="list-style-type: none"> <li>• the similarities and differences between the online world and the physical world, including: the impact of unhealthy or obsessive comparison with others online (including through setting unrealistic expectations for body image), how people may curate a specific image of their life online, over-reliance on online relationships including social media, the risks related to online gambling including the accumulation of debt, how advertising and information is targeted at them and how to be a discerning consumer of information online</li> <li>• how to identify harmful behaviours online (including bullying, abuse or harassment) and how to report, or find support, if they have been affected by those behaviours</li> </ul>
<b>Physical health and fitness</b>	<ul style="list-style-type: none"> <li>• the positive associations between physical activity and promotion of mental wellbeing, including as an approach to combat stress</li> <li>• the characteristics and evidence of what constitutes a healthy lifestyle, maintaining a healthy weight, including the links between an inactive lifestyle and ill health, including cancer and cardio-vascular ill-health</li> <li>• about the science relating to blood, organ and stem cell donation</li> </ul>
<b>Healthy eating</b>	<ul style="list-style-type: none"> <li>• how to maintain healthy eating and the links between a poor diet and health risks, including tooth decay and cancer</li> </ul>
<b>Drugs, alcohol and tobacco</b>	<ul style="list-style-type: none"> <li>• the facts about legal and illegal drugs and their associated risks, including the link between drug use, and the associated risks, including the link to serious mental health conditions</li> <li>• the law relating to the supply and possession of illegal substances</li> <li>• the physical and psychological risks associated with alcohol consumption and what constitutes low risk alcohol consumption in adulthood</li> <li>• the physical and psychological consequences of addiction, including alcohol dependency</li> <li>• awareness of the dangers of drugs which are prescribed but still present serious health risks</li> <li>• the facts about the harms from smoking tobacco (particularly the link to lung cancer), the benefits of quitting and how to access support to do so</li> </ul>

<p><b>Health and prevention</b></p>	<ul style="list-style-type: none"> <li>• about personal hygiene, germs including bacteria, viruses, how they are spread, treatment and prevention of infection, and about antibiotics</li> <li>• about dental health and the benefits of good oral hygiene and dental flossing, including healthy eating and regular check-ups at the dentist</li> <li>• (late secondary) the benefits of regular self-examination and screening</li> <li>• the facts and science relating to immunisation and vaccination</li> <li>• the importance of sufficient good quality sleep for good health and how a lack of sleep can affect weight, mood and ability to learn</li> </ul>
<p><b>Basic first aid</b></p>	<ul style="list-style-type: none"> <li>• basic treatment for common injuries</li> <li>• life-saving skills, including how to administer CPR</li> <li>• the purpose of defibrillators and when one might be needed</li> </ul>
<p><b>Changing adolescent body</b></p>	<ul style="list-style-type: none"> <li>• key facts about puberty, the changing adolescent body and menstrual wellbeing</li> <li>• the main changes which take place in males and females, and the implications for emotional and physical health</li> </ul>