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# Relationships Education, Relationships and Sex Education (RSE) and Health Education Policy

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1. Introduction
   1. Cornwall Education Learning Trust (CELT) 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 Education and 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. CELT 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.
   2. CELT has a responsibility under the Equality Act 2010 to ensure the best for all pupils at its academies irrespective of disability, educational needs, race, nationality, ethnic or national origin, sex, gender identity, pregnancy, maternity, religion or sexual orientation. As a result, Relationships Education, RSE and Health Education 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. CELT 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.
   3. CELT is aware of the need to be mindful of and respectful to a wide variety of faith and cultural beliefs across its academies, 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. CELT 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.
   4. All teaching will be sensitive and age appropriate in approach and content. At the point at which CELT considers it appropriate to teach pupils about lesbian, gay, bisexual and transgender (LGBT), CELT will ensure that this content is fully integrated into programmes of study for this area of the curriculum rather than delivered as a stand-alone unit or lesson. CELT will encourage wider pupil awareness of LGBT.
   5. This policy has been developed in consultation with parents, pupils and staff from all academies within CELT to ensure that it meets the needs of the whole Trust community. Through observation, staff and pupil voice and evaluation, the PHSE lead will monitor practice in the classroom.
   6. The policy will be reviewed annually, and parents will be consulted in advance about significant changes.
2. Aims and Objectives
   1. The aim of this policy is to clarify the statutory requirements of relationship education, sex and relationship and health education to all teachers, parents, carers and students.
   2. Through the delivery of high quality, evidence-based and age-appropriate Relationships Education, RSE and Health Education, CELT aims to:
      1. help prepare pupils for the onset of puberty, give them an understanding of sexual development and the importance of health and hygiene,
      2. create a positive culture around issues of sexuality and relationships and to ensure pupils know how and when to ask for help and where to access support.
      3. ensure the curriculum is taught sensitively and inclusively, with respect to the backgrounds and beliefs of students and parents
      4. provide a framework in which sensitive discussions can take place
      5. ensure that students have accurate, objective and appropriate information
      6. develop an understanding, for all students, of healthy relationships, acceptable behaviour and the right of everyone to equal treatment
      7. foster pupil wellbeing and develop resilience and character, kindness, integrity, generosity, and honesty
      8. help young people to become successful and happy adults who make a meaningful contribution to society
   3. This policy is designed to be complementary to, and supportive of, the role of parents/carers in educating their children about sex, relationships and health. It recognises that the prime responsibility for bringing up children rests with parents and carers.

2.2 Relationships Education, RSE and Health Education are intended to help pupils to:

* Build healthy, respectful relationships focusing on family and friends.
* Understand and prepare for the changes that occur to their bodies, minds and emotions because of growth from childhood to adulthood.
* Ensure that pupils have a true understanding of consent and bodily autonomy.
* Understand how to be healthy and be aware of potential risk areas (such as drugs and alcohol).
* Learn about intimate relationships and sex.
* Learn about mental wellbeing.
* Understand impact on their immediate and wider community.
* Develop key personal attributes, such as kindness, integrity, generosity and honesty.

1. Definition of Relationships Education and Relationships and Sex Education (RSE)
   1. Relationships Education at primary phase is about teaching the fundamental building blocks and characteristics of positive relationships, with particular reference to friendships, family relationships, and relationships with other children and with adults and who can support them. It includes how to take turns, how to treat each other with kindness, consideration and respect, the importance of honesty and truthfulness, permission seeking and giving, and the concept of personal privacy, establishing personal space and boundaries.
   2. RSE at secondary phase 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. RSE does not encourage early sexual experimentation. It teaches pupils 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.
   4. 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.
2. Safeguarding
   1. At the heart of these subjects there is a focus on keeping children safe, and schools can play an important role in preventative education. Keeping Children Safe in Education (KCSIE) sets out that all schools and colleges should ensure pupils are taught about safeguarding, including how to stay safe online, as part of providing a broad and balanced curriculum.
   2. Good practice allows pupils an open forum to discuss potentially sensitive issues. Such discussions can lead to increased safeguarding reports. Pupils should be made aware of how to raise their concerns or make a report and how any report will be handled. This should include processes when they have a concern about a friend or peer.
   3. CELT aims 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 CELT’s Child Protection and Safeguarding procedures.
   4. 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 academy 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.
   1. 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 Leadto decide what is in the best interest of the child.
3. Statutory Requirements
   1. As a multi-academy trust we must provide relationships education to all pupils as per section 34 of the Children and Social work act 2017.
   2. In teaching RSE, we are required by our funding agreements to have regard to guidance issued by the secretary of state as outlined in section 403 of the Education Act 1996.
   3. Academies must follow the guidance outlined in the document: <https://www.gov.uk/government/publications/relationships-education-relationshipsand-sex-education-rse-and-health-education>
   4. The Equality Act 2010 details some key equality provisions for the delivery of education and a duty for public bodies, such as OCL, to have due regard to the need to eliminate discrimination, advance equality of opportunity and foster good relationships between different groups (Public sector Equality Duty). There are three key elements:
   * Eliminate discrimination and other conduct that is prohibited by the Act
   * Advance equality of opportunity between people who share a protected characteristic (age, sex, race, disability, religion or belief, gender reassignment, pregnancy or maternity, marriage or civil partnership, or sexual orientation) and people who do not share it
   * Foster good relations across all characteristics - between people who share a protected characteristic and people who do not share it
   1. Academies must also be mindful of the SEND Code of Practice when planning for these subjects
4. Delivery of Relationships Education, RSE and Health Education and outcomes
   1. Relationships Education, RSE and Health Education 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 Relationships Education, RSE and Health Education 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 our 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.
   2. Staff will ensure that all resources used in the delivery of Relationships Education, RSE and Health Education are appropriate for the age and needs of their pupils.
   3. Teaching will reflect the law (including the Equality Act 2010) as it applies to relationships, so that pupils clearly understand what the law allows and does not allow, and the wider legal implications of decisions they may make.
   4. Teachers will use a variety of teaching methods and resources including discussion, scenario- based learning and debate.
   5. Teachers will also use other teaching methods to enable pupils to learn about RSE, which are age appropriate, taking into account the developmental needs of individual pupils. Parents are welcome to discuss with teachers their approach to RSE and the methods of teaching and learning used.
   6. **Primary schools:**
      1. In our primary academies Relationships Education will be delivered as part of Personal, Social, Health and Economic Education (PSHE) which is taught in Primary through the Jigsaw scheme. Overview will be found in appendix a.
      2. Jigsaw is a whole-school approach and embodies a positive philosophy and creative teaching and learning activities to nurture children’s development as compassionate and well-rounded human beings as well as building their capacity to learn.
      3. Jigsaw brings together PSHE Education, compulsory Relationships and Health Education, emotional literacy, mindfulness, social skills and spiritual development. It is designed as a whole school approach, with all year groups working on the same theme (Puzzle) at the same time at their own level. There are six Puzzles (half-term units of work) and each year group is taught one lesson per week. All lessons are delivered in an age- and stage-appropriate way so that they meet children’s needs
      4. Cross curricular learning also takes place in science and computing. Children of the same age may be developmentally at different stages, leading to differing types of questions or behaviours. Staff will use teaching methods that take account of these differences and the potential for discussion on a one-to-one basis or in small groups.
      5. By the end of their primary education CELT expects pupils to know the information set out at in appendix b. CELT recognises that primary-age pupils may ask their teachers or other adults questions pertaining to sex or sexuality which go beyond the designed curriculum for Relationships Education. Teaching methods will take account of the potential different types of questions and behaviours likely to arise and staff will assess which types of teaching methods would be most appropriate (for example, a full class setting, one-to-one discussions or in small groups).

Secondary schools:

* + 1. In our secondary academies RSE will be delivered as part of Personal, Social, Health and Economic Education (PSHE) and may take place in other areas of the curriculum. Learning will build on the foundation of Relationships Education delivered in primary school.
    2. A number of local and national organisations will also deliver sessions to students via assemblies and other activities.
    3. By the end of their secondary education CELT expects pupils to know the information set out in appendix b.
  1. **Dealing with sensitive issues** 
     1. Teachers need to be sure that they are aware of issues that may arise out of teaching and learning about RSE. The following are protocols for discussion-based lessons with pupils.
        1. no one (teacher or pupil) will have to answer a personal question;
        2. no one will be forced to take part in a discussion;
        3. only the correct names for body parts will be used;
        4. meanings of words will be explained in a sensible and factual way; and
        5. teachers may use their discretion in responding to questions and may say that the appropriate person to answer that question is the parent
  2. **Visitors contributing to RSE** 
     1. From time to time as part of a planned module of work the school will invite in local experts on issues relating to RSE as well as using health and other professionals associated with the school. All associate health and other professional and visitors will be asked to conform to the following:
        1. visitors contributing to RSE will do so at the invitation of the College and will be qualified to make an appropriate contribution.
        2. visitors must agree with the aims of the school in delivering its policy on RSE;
        3. when in class visitors will be supervised by a teacher, who will be present at all times;
        4. visitors will follow CELT’s child protection procedures if a disclosure occurs within the classroom setting;
        5. visitors will know and understand where their contribution fits into the school’s programme for RSE and PSHE.

1. Health Education: Physical health and mental well-being
   1. CELT wishes to promote pupils’ health and well-being by encouraging self-control, their ability to self-regulate and strategies for doing so. They will also learn basic first aid. 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. CELT 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.
   2. By the end of their education CELT expects pupils to know the information set out at appendix b.
2. Pupils with special educational needs and/or disabilities
   1. CELT will endeavour to ensure that Relationships Education, RSE, and Health Education is accessible for all pupils through high quality teaching.
   2. Relationships Education, RSE and Health Education may be particularly important for such pupils, for example those with Social, Emotional and Mental Health needs or learning disabilities.
   3. 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 school’s SEND Policy when planning for these subjects.
   4. Staff will use a variety of different strategies to ensure that all pupils have access to the same information, which include pre-teaching, small group adult led learning, interactive games, paired work, flashbacks to key learning, specific vocabulary teaching.
   5. For some SEND students there may be a need to tailor content and teaching to meet the specific needs of students at different developmental stages. As with all teaching for these subjects, academies should ensure that their teaching is sensitive, age-appropriate, developmentally appropriate and delivered with reference to the law.
3. Right to request withdrawal from sex education
   1. The role of parents/carers in the development of their children’s understanding about relationships is vital. Parents and carers are the first teachers of their children. They have the most significant influence in enabling their children to grow and mature and to form healthy relationships.
   2. CELT hopes that parents will feel comfortable with, and understand the importance of, the education provided to their children as described in this policy. Sex education is classed by the DFE as ‘contraception, developing intimate relations and resisting pressure to having sex’.
   3. All schools should work closely with parents and carers when planning and delivering these subjects. Schools should ensure that parents know what will be taught and when, and clearly communicate the fact that parents/carers have the right to request that their child be withdrawn from some or all of sex education delivered as part of statutory RSE.
   4. Parents/Carers should be given every opportunity to understand the purpose and content of Relationships Education and RSE. Good communication and opportunities for parents/carers to understand and ask questions about the school’s approach help increase confidence in the curriculum.
   5. Parents/Carers have the right to request that their child be withdrawn from some or all of the non-science curriculum sex education delivered as part of statutory RSE.
   6. Before withdrawing or making a request, CELT strongly urges parents/carers to carefully consider their decision as sex education is a vital part of the school curriculum and supports child development.
   7. Any parent/carer wishing to withdraw their child from sex education must complete the form in appendix F. where the appropriate member of staff will arrange a meeting to discuss the request with parents/carers and, as appropriate, with the child to ensure that their wishes are understood and to clarify the nature and purpose of the curriculum. Also to explain the detrimental effects that withdrawal might have on the child.
   8. 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. Parents/Carers cannot withdraw their child from Relationships Education or Health Education or the elements on human growth and reproduction which fall under the science curriculum
   10. This process is the same for pupils with SEND. However there may be exceptional circumstances where the head teacher may want to take a pupil’s specific needs arising from their SEND into account when making this decision.
   11. If a pupil is excused from sex education the receptive school will ensure that the pupil receives appropriate, purposeful education during the period of withdrawal.
4. Equal opportunities
   1. Relationships Education, RSE, and Health Education will be delivered equally to both genders, normally in mixed classes. Though this is CELT’s preferred model, teaching and groups can be adapted following discussion with parents.
   2. CELT has a commitment to ensure that Relationships Education, 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 CELT’s behaviour policy.
5. Roles and Responsibilities

All members of CELT community are expected to follow this policy. Roles, responsibilities and expectations of each section of CELT and academy community are set out in detail below.

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 CELT Lead and Heads to account for the implementation of the policy.

CELT Lead

CELT Lead will ensure that Relationships Education, RSE and Health Education is taught consistently across the academies within CELT and will report back to the Board of Trustees on educational outcomes. They will ensure that senior staff receive regular professional development training in how to deliver Relationships Education, RSE and Health Education.

Local Governing Body

Local governors in each academy willreview and monitor the application and implementation of this policy by receiving regular reports from the academy Principal on educational outcomes. Local governors will scrutinise relevant data, review any issues that might arise and act as a point of challenge for decisions taken by the Headteacher.

Headteacher

Each Headteacher, with support from their respective Senior Leadership Team, will ensure that staff are supported and up to date with policy changes. They will ensure that Relationships Education, RSE and Health Education 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 headteacher 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. The named RSE lead 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 Relationships Education, RSE and Health Education provision and will manage parental requests for withdrawal of pupils from non-statutory, non-science components of Relationships Education, RSE and Health Education.

Staff

Teachers of Relationships Education, RSE and Health Education will deliver lessons in a sensitive way, modelling positive attitudes to RSE. Teachers 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, monitoring progress and responding to the needs of individual students. Pupils will be informed of safeguarding procedures in advance. 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 the designated safeguarding lead (DSL).

Parents

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

Pupils

Pupilsare expected to take Relationships Education, RSE 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 CELT’s behaviour policy.

1. How subject is monitored and evaluated
   1. The delivery of RSE is monitored by the Curriculum Leader through monitoring activities including:
      1. Learning walks and lesson observations
      2. Conducting student voice activities
      3. Book and Work Scrutiny

These activities will be conducted with other staff, including members of the Senior Leadership Team. Pupils’ development in RSE is monitored by class teachers as part of our internal assessment systems.

1. 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 CELT’s complaints policy.

Appendix A: PSHE Curriculum Map

RSE lessons happen in the summer term

|  |  |
| --- | --- |
| Year | Learning Intention |
| 1 | Start to understand the life cycles of animals and humans understand that changes happen as we grow and that this is OK |
| 1 | Know how my body has changed since I was a baby understand that growing up is natural and that everybody grows at different rates |
| 1 | Identify the parts of the body that make boys different to girls and use the correct names for these: penis, testicles, vagina respect my body and understand which parts are private |
| 2 | Recognise cycles of life in nature understand there are some changes that are outside my control and to recognise how I feel about this |
| 2 | tell you about the natural process of growing from young to old and understand that this is not in my control identify people I respect who are older than me |
| 2 | Recognise how my body has changed since I was a baby and where I am on the continuum from young to old feel proud about becoming more independent |
| 2 | Recognise the physical differences between boys and girls, use the correct names for parts of the body (penis, testicles, vagina) and appreciate that some parts of my body are private tell you what I like/don’t like about being a boy/girl |
| 2 | Understand there are different types of touch and tell you which ones I like and don’t like be confident to say what I like and don’t like and ask for help |
| 3 | Understand that in animals and humans lots of changes happen between conception and growing up, and that usually it is the female who has the baby express how I feel when I see babies or baby animals |
| 3 | Understand how babies grow and develop in the mother’s uterus and understand what a baby needs to live and grow express how I might feel if I had a new baby in my family |
| 3 | understand that boys’ and girls’ bodies need to change so that when they grow up their bodies can make babies identify how boys’ and girls’ bodies change on the outside during this growing up process recognise how I feel about these changes happening to me and know how to cope with those feelings |
| 3 | identify how boys’ and girls’ bodies change on the inside during the growing up process and why these changes are necessary so that their bodies can make babies when they grow up recognise how I feel about these changes happening to me and how to cope with these feelings |
| 3 | start to recognise stereotypical ideas I might have about parenting and family roles express how I feel when my ideas are challenged and be willing to change my ideas sometimes |
| 4 | I understand that some of my personal characteristics have come from my birth parents and that this happens because I am made from the joining of their egg and sperm I appreciate that I am a truly unique human being |
| 4 | correctly label the internal and external parts of male and female bodies that are necessary for making a baby understand that having a baby is a personal choice and express how I feel about having children when I am an adult |
| 4 | describe how a girl’s body changes in order for her to be able to have babies when she is an adult, and that menstruation (having periods) is a natural part of this know that I have strategies to help me cope with the physical and emotional changes I will experience during puberty |
| 5 | be aware of my own self-image and how my body image fits into that know how to develop my own self esteem |
| 5 | explain how a girl’s body changes during puberty and understand the importance of looking after myself physically and emotionally understand that puberty is a natural process that happens to everybody and that it will be OK for me |
| 5 | describe how boys’ and girls’ bodies change during puberty express how I feel about the changes that will happen to me during puberty |
| 5 | understand that sexual intercourse can lead to conception and that is how babies are usually made understand that sometimes people need IVF to help them have a baby appreciate how amazing it is that human bodies can reproduce in these ways |
| 6 | aware of my own self-image and how my body image fits into that know how to develop my own self-esteem |
| 6 | explain how girls’ and boys’ bodies change during puberty and understand the importance of looking after myself physically and emotionally express how I feel about the changes that will happen to me during puberty |
| 6 | ask the questions I need answered about changes during puberty reflect on how I feel about asking the questions and about the answers I receive |
| 6 | describe how a baby develops from conception through the nine months of pregnancy, and how it is born recognise how I feel when I reflect on the development and birth of a baby |
| 6 | understand how being physically attracted to someone changes the nature of the relationship express how I feel about the growing independence of becoming a teenager and am confident that I can cope with this |

Appendix B: Curriculum detail taken from the DfE document: “Relationships Education, Relationships and Sex Education (RSE) and Health Education”

[Link to guidance.](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1090195/Relationships_Education_RSE_and_Health_Education.pdf)

|  |  |
| --- | --- |
| **Families and people who care for me** | * that families are important for children growing up because they can give love, security and stability * the characteristics of healthy family life, commitment to each other, including in times of difficulty, protection and care for children and other family members, the importance of spending time together and sharing each other’s lives * that others’ families, either in school or in the wider world, sometimes look different from their family, but that they should respect those differences and know that other children’s families are also characterised by love and care * that stable, caring relationships, which may be of different types, are at the heart of happy families, and are important for children’s security as they grow up * that marriage represents a formal and legally recognised commitment of two people to each other which is intended to be lifelong * how to recognise if family relationships are making them feel unhappy or unsafe, and how to seek help or advice from others if needed |
| **Caring friendships** | * how important friendships are in making us feel happy and secure, and how people choose and make friends * the characteristics of friendships, including mutual respect, truthfulness, trustworthiness, loyalty, kindness, generosity, trust, sharing interests and experiences and support with problems and difficulties * that healthy friendships are positive and welcoming towards others, and do not make others feel lonely or excluded * that most friendships have ups and downs, and that these can often be worked through so that the friendship is repaired or even strengthened, and that resorting to violence is never right * how to recognise who to trust and who not to trust, how to judge when a friendship is making them feel unhappy or uncomfortable, managing conflict, how to manage these situations and how to seek help or advice from others, if needed |
| **Respectful relationships** | * the importance of respecting others, even when they are very different from them (for example, physically, in character, personality or backgrounds), or make different choices or have different preferences or beliefs * practical steps they can take in a range of different contexts to improve or support respectful relationships * the conventions of courtesy and manners * the importance of self-respect and how this links to their own happiness * 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 those in positions of authority * about different types of bullying (including cyberbullying), the impact of bullying, responsibilities of bystanders (primarily reporting bullying to an adult) and how to get help * what a stereotype is, and how stereotypes can be unfair, negative or destructive * the importance of permission-seeking and giving in relationships with friends, peers and adults |
| **Online relationships** | * that people sometimes behave differently online, including by pretending to be someone they are not * that the same principles apply to online relationships as to face-to-face relationships, including the importance of respect for others online including when we are anonymous * the rules and principles for keeping safe online, how to recognise risks, harmful content and contact, and how to report them * how to critically consider their online friendships and sources of information including awareness of the risks associated with people they have never met * how information and data is shared and used online |
| **Being safe** | * what sorts of boundaries are appropriate in friendships with peers and others (including in a digital context) * about the concept of privacy and the implications of it for both children and adults; including that it is not always right to keep secrets if they relate to being safe * that each person’s body belongs to them, and the differences between appropriate and inappropriate or unsafe physical, and other, contact * how to respond safely and appropriately to adults they may encounter (in all contexts, including online) whom they do not know * how to recognise and report feelings of being unsafe or feeling bad about any adult * how to ask for advice or help for themselves or others, and to keep trying until they are heard * how to report concerns or abuse, and the vocabulary and confidence needed to do so |

Physical health and mental wellbeing outcomes in Primary

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| **Mental wellbeing** | * that mental wellbeing is a normal part of daily life, in the same way as physical health * that there is a normal range of emotions (e.g. happiness, sadness, anger, fear, surprise, nervousness) and scale of emotions that all humans experience in relation to different experiences and situations * how to recognise and talk about their emotions, including having a varied vocabulary of words to use when talking about their own and others’ feelings * how to judge whether what they are feeling and how they are behaving is appropriate and proportionate * the benefits of physical exercise, time outdoors, community participation, voluntary and service-based activity on mental wellbeing and happiness * simple self-care techniques, including the importance of rest, time spent with friends and family and the benefits of hobbies and interests * isolation and loneliness can affect children and that it is very important for children to discuss their feelings with an adult and seek support * that bullying (including cyberbullying) has a negative and often lasting impact on mental wellbeing * where and how to seek support (including recognising the triggers for seeking support), including whom in school they should speak to if they are worried about their own or someone else’s mental wellbeing or ability to control their emotions (including issues arising online) * it is common for people to experience mental ill health. For many people who do, the problems can be resolved if the right support is made available, especially if accessed early enough |
| **Internet safety and harms** | * that for most people the internet is an integral part of life and has many benefits * about the benefits of rationing time spent online, the risks of excessive time spent on electronic devices and the impact of positive and negative content online on their own and others’ mental and physical wellbeing * how to consider the effect of their online actions on others and know how to recognise and display respectful behaviour online and the importance of keeping personal information private * why social media, some computer games and online gaming, for example, are age restricted * that the internet can also be a negative place where online abuse, trolling, bullying and harassment can take place, which can have a negative impact on mental health * how to be a discerning consumer of information online including understanding that information, including that from search engines, is ranked, selected and targeted * where and how to report concerns and get support with issues online |
| **Physical health and fitness** | * the characteristics and mental and physical benefits of an active lifestyle * the importance of building regular exercise into daily and weekly routines and how to achieve this; for example walking or cycling to school, a daily active mile or other forms of regular, vigorous exercise * the risks associated with an inactive lifestyle (including obesity) * how and when to seek support including which adults to speak to in school if they are worried about their health |
| **Healthy eating** | * what constitutes a healthy diet (including understanding calories and other nutritional content) * the principles of planning and preparing a range of healthy meals * the characteristics of a poor diet and risks associated with unhealthy eating (including, for example, obesity and tooth decay) and other behaviours (e.g. the impact of alcohol on diet or health) |
| **Drugs, alcohol and tobacco** | * the facts about legal and illegal harmful substances and associated risks, including smoking, alcohol use and drug-taking |
| **Health and prevention** | * how to recognise early signs of physical illness, such as weight loss, or unexplained changes to the body * about safe and unsafe exposure to the sun, and how to reduce the risk of sun damage, including skin cancer * the importance of sufficient good quality sleep for good health and that a lack of sleep can affect weight, mood and ability to learn * about dental health and the benefits of good oral hygiene and dental flossing, including regular check-ups at the dentist * about personal hygiene and germs including bacteria, viruses, how they are spread and treated, and the importance of handwashing * the facts and science relating to allergies, immunisation and vaccination |
| **Basic first aid** | * how to make a clear and efficient call to emergency services if necessary * concepts of basic first-aid, for example dealing with common injuries, including head injuries |
| **Changing adolescent body** | * key facts about puberty and the changing adolescent body, particularly from age 9 through to age 11, including physical and emotional changes * about menstrual wellbeing including the key facts about the menstrual cycle |

Relationship Education – expectations of what pupils should know by the end of secondary school.

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| **Families** | * that there are different types of committed, stable relationships * how these relationships might contribute to human happiness and their importance for bringing up children * 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 * why marriage is an important relationship choice for many couples and why it must be freely entered into * the characteristics and legal status of other types of long-term relationships * the roles and responsibilities of parents with respect to raising of children, including the characteristics of successful parenting * 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 |
| **Respectful relationships, including friendships** | * the characteristics of positive and healthy friendships, in all contexts including online, such as:   + trust, respect, honesty, kindness, generosity, boundaries, privacy, consent and the management of conflict   + reconciliation and ending relationships, this includes different (non-sexual) types of relationship * practical steps they can take in a range of different contexts to improve or support respectful relationships * 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) * 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 * about different types of bullying (including cyberbullying), the impact of bullying, responsibilities of bystanders to report bullying and how and where to get help * that some types of behaviour within relationships are criminal, including violent behaviour and coercive control * what constitutes sexual harassment and sexual violence and why these are always unacceptable * 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 |
| **Online and media** | * their rights, responsibilities and opportunities online, including that the same expectations of behaviour apply in all contexts, including online * about online risks, including that any material someone provides to another has the potential to be shared online, “sexting”, and the difficulty of removing potentially compromising material placed online * not to provide material to others that they would not want shared further and not to share personal material which is sent to them * what to do and where to get support to report material or manage issues online * the impact of viewing harmful content * 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 * that sharing and viewing indecent images of children (including those created by children) is a criminal offence which carries severe penalties including jail * how information and data is generated, collected, shared and used online |
| **Being safe** | * 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 * 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 |
| **Intimate and sexual relationships, including sexual health** | * 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 * 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 * the facts about reproductive health, including fertility and the potential impact of lifestyle on fertility for men and women and menopause * that there are a range of strategies for identifying and managing sexual pressure, including understanding peer pressure, resisting pressure and not pressurising others * that they have a choice to delay sex or to enjoy intimacy without sex * the facts about the full range of contraceptive choices, efficacy and options available * the facts around pregnancy including miscarriage * 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) * 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 * about the prevalence of some STIs, the impact they can have on those who contract them and key facts about treatment * how the use of alcohol and drugs can lead to risky sexual behaviour * how to get further advice, including how and where to access confidential sexual and reproductive health advice and treatment |

Physical health and mental wellbeing outcomes in Secondary

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| **Mental wellbeing** | * how to talk about their emotions accurately and sensitively, using appropriate vocabulary * that happiness is linked to being connected to others * how to recognise the early signs of mental wellbeing concerns * common types of mental ill health (e.g. anxiety and depression) * 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 * the benefits and importance of physical exercise, time outdoors, community participation and voluntary and service-based activities on mental wellbeing and happiness |
| **Internet safety and harms** | * 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 * 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 |
| **Physical health and fitness** | * the positive associations between physical activity and promotion of mental wellbeing, including as an approach to combat stress * 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 * about the science relating to blood, organ and stem cell donation |
| **Healthy eating** | * how to maintain healthy eating and the links between a poor diet and health risks, including tooth decay and cancer |
| **Drugs, alcohol and tobacco** | * 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 * the law relating to the supply and possession of illegal substances * the physical and psychological risks associated with alcohol consumption and what constitutes low risk alcohol consumption in adulthood * the physical and psychological consequences of addiction, including alcohol dependency * awareness of the dangers of drugs which are prescribed but still present serious health risks * 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 |
| **Health and prevention** | * about personal hygiene, germs including bacteria, viruses, how they are spread, treatment and prevention of infection, and about antibiotics * about dental health and the benefits of good oral hygiene and dental flossing, including healthy eating and regular check-ups at the dentist * (late secondary) the benefits of regular self-examination and screening * the facts and science relating to immunisation and vaccination * the importance of sufficient good quality sleep for good health and how a lack of sleep can affect weight, mood and ability to learn |
| **Basic first aid** | * basic treatment for common injuries * life-saving skills, including how to administer CPR * the purpose of defibrillators and when one might be needed |
| **Changing adolescent body** | * key facts about puberty, the changing adolescent body and menstrual wellbeing * the main changes which take place in males and females, and the implications for emotional and physical health |

Appendix C: Science curriculum that links to sex education:

**The National Curriculum for Science covers:**

**Primary content:**

* naming the main external parts of the human body,
* the human body as it grows from birth to old age (including puberty),
* processes of reproduction and growth in animals and
* reproduction in some plants.

## Key Stage 3 (Year 7-9)

* 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 (Year 10-11)

* 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.

Appendix D: Sex Education in Primary

Health and Relationship Education is statutory in all primary schools, and it is recommended that all primary schools have a Sex Education programme that is tailored to the age of the pupils.

The Health and Relationship curriculum content is woven throughout the entire programme of Jigsaw, with a specific focus within the ‘Healthy Me’ and ‘Relationships’ Puzzles.

In the Early Years and Key Stage 1, the focus is on life cycles, valuing our own bodies and learning some vocabulary for the external body parts, that we might use if we needed to talk to an adult such as a nurse or a doctor.

In Key Stage 2, there is a particular focus on the Health Education element of puberty in (including menstruation) and the changes that happen inside and outside the body. This is taught in a way that helps pupils feel prepared for the main changes that happen before puberty starts, and to encourage them to talk to an adult at home or at school if they have any questions.

Sex Education is part of our PSHE/RSE curriculum, and we teach it through the Jigsaw ‘Changing Me’ topic. Please note that animal reproduction is a statutory element of the Year 5 Science curriculum and at CELT, we deliver this including human reproduction in our lessons.

The Jigsaw unit ‘Changing Me’ is taught in the Summer Term and contains 6 pieces (lessons). Each year group will be taught appropriate to their age and developmental stage. This content will be taught by the class teachers. We will not teach beyond the remit of the year group. If questions are asked that the teacher feels are inappropriate or are beyond the content for that year group, the teacher may ask the child to ask their parent/carer, or the teacher may acknowledge the question and explain that we will learn about that aspect at another time.

Please review the curriculum overview in appendix a to see where these lessons fit, however, the lessons (pieces) that parents are able to withdraw their children from are outlined below:

**Year 4 – Lesson 2:** Having a baby. Parents have the right to withdraw children from this session as it is classed as human reproduction:

* I can correctly label the internal and external parts of male and female bodies that are necessary for making a baby and explain in simple terms how this happens
* I understand that having a baby is a personal choice and express how they feel about having children when they are adults

Note: This is a simple introduction to sexual intercourse with the teacher using a script which includes ‘an especially close and loving embrace which allows the sperm to be released through the penis into the vagina.’.

**Year 5 – Lesson 4**: Conception: Parents have the right to withdraw children from this session as it is classed as human reproduction

* I understand that sexual intercourse can lead to conception and that is how babies are usually made. I also understand that sometimes people need IVF to help them have a baby
* I appreciate how amazing it is that human bodies can reproduce in these ways

**Year 6 – Lesson 3**: Babies – conception to birth

* I can describe how a baby develops from conception through the nine months of pregnancy, and how it is born
* I recognise how I feel when I reflect on the development and birth of a baby

Appendix E: Sex Education in Secondary

The content of the RSE lessons are based on the National Curriculum Science and the non-statutory guidance for PSHE/RSE contained in the National Curriculum Handbook for Teachers.

Parents/Carers are the most important educators of our pupils in personal issues and may welcome the support that school can offer to supplement their home teaching. We are committed to working in partnership with parents/carers and if you would like to find out more, discuss and browse materials used or have any concerns then please do not hesitate to contact the school.

At CELT we believe that the presentation of sexual images in social and other media makes it important that all pupils have a place to discuss pressures, check facts and dispel myths. Even if a pupil is withdrawn, many pupils will discuss such issues with each other outside the classroom, so rather than hear about content second hand, we hope all pupils will have the opportunity to take part in our carefully planned lessons.

At secondary level, sex and relationship education should prepare young people for an adult life. Please review the curriculum overview in appendix a to see where these lessons fit, however, the lessons that parents/carers are able to withdraw their children from are outlined below:

* that there are a range of strategies for identifying and managing sexual pressure, including understanding peer pressure, resisting pressure and not pressurising others
* that they have a choice to delay sex or to enjoy intimacy without sex
* the facts around pregnancy including miscarriage
* 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)
* how the use of alcohol and drugs can lead to risky sexual behaviour
* how to get further advice, including how and where to access confidential sexual and reproductive health advice and treatment

CELT would encourage Parents to contact Curriculum Leads for PSHE with concerns before removing young people from these lessons.

Appendix F: Parent form: withdrawal from sex education within RSE.

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| To be completed by parents | | | |
| Name of child |  | Year Group |  |
| Name of parent/carer |  | Date |  |
| Reason for withdrawing from sex education within relationships and sex education | | | |
|  | | | |
| Any other information you would like the school to consider | | | |
|  | | | |
| Parent Signature |  | | |
| To be completed by the school | | | |
| Date of Meeting |  | Year Group |  |
| Discussion points | | | |
|  | | | |
| Agreed actions from discussion with parents | | | |
|  | | | |
| Staff signature |  | | |