

# Stroud Green Primary School



*Believe and achieve*

Stroud Green Primary School, part of a richly diverse community, is a place where all children flourish in a safe, happy and stimulating environment.

## **Sex and Relationships Education (SRE) Policy**

Reviewed at Curriculum Committee: 29.02.16

Date of next review: Spring 2018

## **Purpose of the SRE policy**

The purpose of this policy is to act as a central reference point to inform school staff, parent/carers, health professionals and visiting speakers of the school's approach to SRE within PSHE.

## **Consultation process**

The consultation and development process involved staff, governors, pupils and parent/ carers in the following ways:

**Pupils:** School council; classroom discussion.

**Parent/Carers:** meetings; focus groups; letter home;

**Staff and Governors:** The policy was discussed with staff and with governors at Curriculum Committee and Full Governing Body meeting following an audit of present SRE and policy.

## **Definition of SRE**

Sex and relationships education is part of lifelong learning about the emotional, social and physical aspects of growing up, relationships, sex, human sexuality and sexual health. SRE, within PSHE aims to give children and young people essential skills for building positive, enjoyable, respectful and non-exploitive relationships and skills to stay safe both on and offline. It enables pupils to explore their own and others attitudes and values and aims to help build their self-esteem and confidence to positively view their own sexuality.

## **Roles and responsibilities in school**

The member of staff responsible for the co-ordination, development, monitoring and evaluation of SRE is Denise Sewell, Headteacher. The Curriculum Committee have oversight of SRE.

## **Staff continuing professional development**

Professional development in SRE within PSHE is provided for staff. Staff are made aware of our PSHE policy and our policy on SRE on induction and the requirement that they teach SRE within the context of the confidentiality policy.

## **SRE and safeguarding children**

At Stroud Green Primary school we believe that our pupils should be kept safe from harm through safeguarding procedures and educating every pupil about how to care for their bodies and protect themselves from physical and emotional harm. We have lessons in sex and relationships education as part of our PSHE programme. This enables pupils to:

- know their rights to be protected and kept safe
- understand potential dangers they could face
- be encouraged to adopt safe and responsible practices and deal sensibly with risk
- develop personal skills to protect themselves and others from unsafe influences and physical and emotional harm
- know when and who to ask for help when needed

The curriculum can include a range of potential issues such as:

- bullying, including cyber bullying (by text message, on social networking sites, and so on) and prejudice-based bullying
- racist, disability, and homophobic and transphobic abuse
- radicalisation and extremist behaviour
- child sexual exploitation
- sexting
- substance misuse
- issues that may be specific to local area or population, e.g. gang activity & youth violence
- particular issues affecting children including domestic violence, sexual exploitation, female genital mutilation (FGM) and forced marriages.

We have a duty to report concerns about pupils who we feel are at risk of harm or when we suspect that FGM has already been performed.

## **Confidentiality**

Staff working with pupils cannot offer unconditional or absolute confidentiality. Staff have an obligation to pass information on to the school's **Designated Safeguarding Lead, Jo Bartlett**, if what is disclosed indicates that a pupil is at risk of harm. Staff in the classroom establish boundaries where pupils feel safe and respected whilst protecting privacy. During lessons, pupils are reminded that if they divulge anything that indicates that they may be at risk from harm then this information has to be passed on.

Activities use 'distancing techniques' to enable pupils to explore issues without talking about personal experiences, for example, by using case studies and scenarios. In 1:1 situations, staff will remind the pupil that they may not be able to keep some information confidential (for example, if they thought that the pupil was at risk of harm or abuse.) Visiting speakers when working in the classroom are bound by the same conditions and must pass on any information they feel needs responding to via the member of staff present.

*Under the Sexual Offences Act 2003, a child aged 12 or under is not capable of consenting to sexual activity and penetrative sex is classified as rape. If a child under the age of 13 discloses penetrative sex or other intimate sexual activity, the member of staff should always talk to the designated child protection lead. The legal age for sexual consent is 16. Staff may believe that under 16 is too early but the law does not wish to criminalise young people who are in a mutual sexual relationship. If a young person discloses that they are in an underage sexual relationship it may be appropriate although not a legal requirement, to assess whether there are any serious consequences. Any cases of concern should be discussed with the child protection lead of the school.* **Confidentiality: protecting young people's sexual health and well-being in secondary schools**  
**Sex Education Forum**

## **Working with parents and carers**

This policy is developed following consultation and the school informs and works with parents in the following ways:

- Parents are invited to speak to staff and view films & resources used to teach the subject.
- Parents can be advised on how to confidently talk to children about sex & relationships.
- Family Support Workers also hold workshops for community groups.
- Before SRE lessons in Y5 & Y6 a letter to parents is sent describing the SRE their children will cover. In this way, parent/carers can be prepared to answer questions at home.
- Information in newsletters and on the school website about our SRE policy and practice.

Section 405 of the Education Act 1996 enables parents to withdraw their children from sex education other than the sex education that is in the National Curriculum (such as the biological aspects of human growth and reproduction and the spread of viruses.)

If parents approach the school to withdraw their child from SRE they will be shown the SRE policy and informed what the National Curriculum content is and what curriculum content their child can be withdrawn from. (See appendix 2: Science national curriculum sex and relationships education) If the parents still decide to withdraw their child then other arrangements will be agreed and made for them during this time. Parents should be made aware that there may be impromptu discussion in the classroom at other times.

## **Sex and relationships education within PSHE**

SRE within PSHE is developmental and appropriate to the age and needs of every pupil. It is part of a well-planned programme, delivered in a supportive atmosphere, where we aim for all pupils to feel comfortable to engage in open discussion and feel confident to ask for help if necessary.

## **Establishing a safe and supportive environment**

Teachers establish a safe and supportive environment in a range of ways:

- Boundaries for discussion and issues of confidentiality are discussed before SRE lessons begin.
- Each class/group works together to establish its own ground rules about how they would like everyone to behave in order to learn.
- Distancing techniques such as role play, third person case studies and an anonymous question box are employed when teaching sensitive issues.

## **Good practice in teaching and learning**

Teachers use various strategies to promote good practice in teaching and learning:

- Using the correct terminology makes clear that everybody understands and avoids prejudiced or offensive language.
- Lessons contain a variety of teaching methods and strategies that encourages interaction, involvement and questioning: working individually, in pairs and groups; discussions; role play; prioritising; quizzes; research; case studies; games; circle time; visiting speakers.

### **Inclusion**

All children and young people whatever their experience, background or identity are entitled to good quality SRE that help them build a positive sense of self. Respect for themselves and each other is central to all teaching. The SRE programme and approach is inclusive of difference: gender identity, sexual orientation, ability, disability, ethnicity, culture, age, faith or belief or any other life experience.

SRE lessons help pupils to explore discrimination, prejudice, bullying; aggressive behaviour and other unhealthy relationships.

Teachers of SRE agree to work within the school's framework for SRE as described in this policy. Their personal beliefs, values and attitudes will not affect their teaching of SRE.

Things to consider:

- Staff approach SRE sensitively, knowing that their pupils are all different and have different family groupings.
- Staff encourage boys and girls to explore topics from different gender viewpoints and never assume that intimate relationships are between opposite sexes.
- SRE caters for all pupils and the teachers and teaching materials are respectful of the rights of pupils with disabilities and how pupils choose to identify themselves.
- Links with the school's inclusion policy.

### **The SRE curriculum**

SRE is taught in the context of the school's aims and values framework. Whilst it is mainly taught as part of our Personal, Social and Health Education curriculum, it is also taught through aspects of Science and through PE and Health Education for example. While SRE means we give children information about sexual behaviour, we do this with an awareness of the moral code and values which underpin all our work in school. We specifically teach children using language and explanations appropriate for their age and maturity, thus avoiding confusion, embarrassment and shame. **See Appendix 1**

### **Visiting Speakers**

SRE is best taught by confident teachers as part of an ongoing PSHE curriculum. Visiting speakers can offer a different perspective and reinforce the teaching within the classroom so we encourage other valued members of the community to work with us to provide advice to the children with regard to health education. In particular, members of the Primary care Trust, such as the school nurse and other health professionals. Other people we may call upon in addition to the school nurse include social workers and youth workers. Teachers are always present when classes have visitors

Visiting speakers are briefed by the appropriate member of staff about the level of pupil awareness; ground rules of the class; the context/purpose of the visit and what pupils know and what they need to know. Visiting speakers are given a copy of the school SRE policy, together with the SRE curriculum which they are expected to follow.

### **Assessment**

Lessons are planned starting with establishing what pupils already know. In this way, teachers can also address any misconceptions that pupils may have.

Teachers do this in a range of ways:

- brainstorms and discussions
- draw and write activities to find out what pupils already know
- activities to find out what pupils feel is important to them

Assessment is the process where an individual pupil's learning and achievement are measured against the lesson objectives. In SRE progress is measured in a range of ways:

- pupil reflective assessment sheets at the end of each topic
- written or oral assignments
- quizzes

- pupil self-evaluation
- reflective logbooks
- one to one discussion

### **Monitoring and evaluation**

Monitoring is to ensure teaching is in line with school policy and that pupils are taught what is planned for different year groups. Evaluation helps to plan future lessons and enables teachers to review the programme to improve the teaching and learning. The Headteacher is responsible for the monitoring and evaluation of SRE. A range of methods are used including:

- lesson observations
- what individual teachers added to or deleted from the lesson content
- pupils completing end of topic evaluations
- teachers completing end of topic evaluations
- annual PSHE review .

### **Resources**

*We liaise with the Local Education Authority and the Local Health Authority about suitable teaching materials to use with our children .The resources for SRE that we use are informed by the following guidance documents:*

- [2014 SRE for the 21<sup>st</sup> Century supplementary advice to the SRE Guidance DfE \(0116/2000\)](#)

## Appendix 1: SRE in the curriculum: Learning intentions in Primary SRE Scheme of Work within PSHE

EYFS	
<ul style="list-style-type: none"> <li>• Respect through listening and sharing</li> <li>• Friendships and relationships</li> <li>• The uniqueness and similarities between themselves and others</li> <li>• The names of external body parts</li> </ul>	<ul style="list-style-type: none"> <li>• Private areas of the body</li> <li>• Who to talk to if they are worried</li> <li>• Caring for babies</li> <li>• Animal families</li> </ul>
Key Stage 1	
SRE, Boys and girls and families	Other Areas of PSHE
<ul style="list-style-type: none"> <li>• understand and respect the differences and similarities between people</li> <li>• about the biological differences between male and female animals and their role in the life cycle</li> <li>• biological differences between male &amp; female children</li> <li>• about growing from young to old and that they are growing and changing</li> <li>• that everybody needs to be cared for and ways in which they care for others</li> <li>• about different types of family and how their home-life is special</li> </ul>	<p><b>Drug, alcohol and tobacco education</b></p> <ul style="list-style-type: none"> <li>• about what goes onto our bodies and how it can make people feel</li> </ul> <p><b>Mental health and emotional well-being</b></p> <ul style="list-style-type: none"> <li>• about being co-operative with others</li> </ul> <p><b>Keeping safe and managing behaviour and risk</b></p> <ul style="list-style-type: none"> <li>• about personal safety and who they can talk to</li> </ul> <p><b>Identity, society and equality</b></p> <ul style="list-style-type: none"> <li>• about people that are special to them and what they do</li> </ul>
Lower Key Stage 2	
SRE, Growing up and changing	Other Areas of PSHE
<ul style="list-style-type: none"> <li>• about the way we grow and change throughout the human lifecycle</li> <li>• about the impact of puberty in physical hygiene and strategies for managing this</li> <li>• about the physical changes associated with puberty</li> <li>• about menstruation and wet dreams</li> <li>• how puberty affects emotions &amp; behaviour and strategies for dealing with changes associated with puberty</li> <li>• strategies to deal with feelings in the context of relationships</li> <li>• to answer each other's questions about puberty with confidence, to seek support &amp; advice when needed</li> </ul>	<p><b>Mental health and emotional well being</b></p> <ul style="list-style-type: none"> <li>• about similarities and differences between themselves and others</li> <li>• about what makes a good friend</li> <li>• about dealing with issues that might arise in friendship</li> <li>• about different emotions and how to manage these</li> </ul>
Upper Key Stage 2	
SRE, Healthy relationships How a baby is made	Other Areas of PSHE
<ul style="list-style-type: none"> <li>• about the changes that occur during puberty</li> <li>• consider different attitudes and values around gender, stereotyping and sexuality; their origin and impact</li> <li>• what values are important in relationships and to appreciate importance of friendship in intimate friendships</li> <li>• human reproduction in context of the human life cycle</li> <li>• how a baby is made &amp; grows (conception &amp; pregnancy)</li> <li>• about roles and responsibilities of carers and parents</li> <li>• to answer each other's questions about sex and relationships with confidence, where to find support and advice when they need it</li> <li>• <b>Year 6, HIV and contraception</b></li> <li>• some myths and misconceptions about HIV, who it affects and how it can and cannot be transmitted</li> <li>• about how the risk of HIV can be reduced</li> <li>• that contraception can be used to stop a baby from being conceived</li> </ul>	<p><b>Mental health and emotional well being</b></p> <ul style="list-style-type: none"> <li>• about stereotyping including gender stereotyping</li> <li>• about prejudice and discrimination (in relation to homophobia) and how this can make people feel</li> </ul>

## **Appendix 2: Sex and relationships education in the National Curriculum Science programme of study**

### **KS 1**

#### **Y1**

##### **Animals, including humans**

- Identify, name, draw and label the basic parts of the human body and say which part of the body is associated with each sense

#### **Y2**

##### **Animals, including humans**

- Notice that animals, including humans, have offspring which grow into adults.

### **Upper KS2**

#### **Y5**

##### **Living things and their habitats**

- Describe the life process of reproduction in some plants and animals  
(Pupils should find out about different types of reproduction, including sexual and asexual reproduction in plants, and sexual reproduction in animals.)
- Describe the changes as humans develop to old age  
(Pupils should draw a timeline to indicate stages in the growth and development of humans. They should learn about the changes experienced in puberty.)

*See appendix 4 Joint briefing by the Association of Science Education and PSHE Education*

## **Appendix 3: Teaching about puberty**

### **Joint briefing by the Association of Science Education and the PSHE Association**

This briefing is focused on the content of the Science National Curriculum for maintained schools although we hope that it will be of value to all schools which teach science. The briefing provides guidance to schools about their statutory duties to ensure that all children learn about puberty.

Teaching about puberty before children experience it is essential to ensure that pupils' physical, emotional and learning needs are met and that they have the correct information about how to take care of their bodies and keep themselves safe. Teaching about puberty is also considered a key safeguarding issue by OFSTED. As Janet Palmer HMI (OFSTED's PSHE lead) has said:

*"If pupils are kept ignorant of their human, physical and sexual rights... they are not being adequately safeguarded. When inspecting schools ... inspectors are guided to check that the sex education in national curriculum science at Key Stages 1-3 is being adequately taught; and that primary schools have regard to the Department for Education statutory guidance on teaching pupils about puberty before they experience the onset of physical changes."*

*"Inspectors leading Section 5 inspections have been guided to grade behaviour and safety separately and to take whichever is the lowest grade as the overall grade for the Behaviour and Safety strand of the Section 5 inspection framework; and if Behaviour and Safety are judged to require improvement this is likely to affect the grade for overall effectiveness."*

In order to keep pupils safe, it is vital that they learn about puberty before it happens. NHS advice states that puberty can begin as early as 8 for girls and 9 for boys. Year 5 is therefore the latest time in the school curriculum when this should be addressed. Schools that choose to teach about puberty earlier, for example in Year 4, have the flexibility to do so, as the National Curriculum clearly states that subjects can be taught earlier than the recommended school years set out in the framework.

The dividing line between teaching about the growth and development of humans as part of the National Curriculum for Science, and Sex and Relationships Education (SRE) as part of a PSHE programme, is sometimes misinterpreted. For clarity, teaching about the changes experienced during puberty is part of the National Science Curriculum and all pupils in maintained schools must therefore be able to access this learning; this learning can then be built upon in SRE. Section 405 of the Education Act 1996 sets out the right of parents to withdraw their children from SRE but explicitly states that this right only applies to those topics which fall outside the National Curriculum.

The 2014 National Curriculum is clear that teaching about puberty is an integral part of the Programmes of Study for Science at Key Stage 2, with the Year 5 Programme of Study stipulating that it is a statutory requirement that:

*"Pupils should be taught to describe the changes as humans develop to old age"*

This must include teaching about puberty, which is a principle change for humans as they develop and grow older. This is supported by the statutory guidance referred to by Janet Palmer and the non-statutory National Curriculum guidance for the Year 5 Programme of Study for Science which states:

*"Pupils should draw a timeline to indicate the stages in the growth and development of humans. They should learn about the changes experienced in puberty."*

It is clear, therefore, that schools should teach about puberty in either Year 4 or Year 5 depending on the needs of their pupils. A high-quality science curriculum including learning about puberty will ensure that pupils get the learning they need. Parental right to withdraw children from this part of the school curriculum does not fall within this remit.



## **Appendix 4: Female Genital Mutilation - FGM**

### **Definition of FGM**

“Female Genital mutilation (FGM) comprises of all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs whether for cultural or therapeutic reasons.” World Health Organisation 1997

“Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM. There is a range of potential indicators that a child or young person may be at risk of FGM, which individually may not indicate risk but if there are two or more indicators present this could signal a risk to the child or young person. Victims of FGM are likely to come from a community that is known to practise FGM. Professionals should note that girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the subject. “Department for Education: Keeping Children Safe in Education April 2014.

FGM is considered child abuse in the UK and a grave violation of the human rights of girls and women. It is a violation of the child’s right to life and their bodily integrity as well as their right to health. It is illegal in the UK to allow girls to undergo female genital mutilation either in this country or abroad. People guilty of allowing FGM to take place can be punished by fines or up to 14 years in prison. Female Genital Mutilation occurs mainly in Africa and to a lesser extent in the Middle East and Asia. It is not a religious requirement and there are no health benefits. It is a cultural practice. Communities particularly affected in the UK include girls from: Somalia, Kenya, Ethiopia, Sierra Leone, Egypt, Nigeria, Eritrea, Yemen, Pakistan, Indonesia and Afghanistan; particularly first generation immigrants, refugees and asylum seekers. This procedure often takes place in the summer, using the school holidays to recover (recovery takes 6 – 9 weeks.) It is important to be alert when a girl from a high risk group is absent from school for a long period or when a family request an ‘authorised absence’ just before a school holiday. Children might also be talking about a special ceremony or a special holiday abroad.

Signs that FGM may have taken place include:

- difficulty walking, standing or sitting
- spending much longer times in the toilets
- usual behaviour after a long absence
- not wanting to participate in PE or other physical play/activities
- acutely painful menstrual cycles
- asking for help or being anxious but not able to be explicit due to embarrassment or fear

All schools should keep their pupils safe from harm through safeguarding procedures and educating every pupil about their responsibility to care for their bodies and protect themselves from physical and emotional harm. They have a duty to report concerns about girls at risk from FGM or when they know that FGM might already have been performed.

Lessons in PSHE and sex and relationships education can give pupils information, learn personal and life skills and explore attitudes and values around protecting themselves and others from abuse, including FGM.

NSPCC FGM helpline: 0800 028 3550 [help@nspcc.org.uk](mailto:help@nspcc.org.uk)