

# Policy Statements and Procedures RELATIONSHIPS, SEX AND HEALTH EDUCATION POLICY

# Introduction

This Relationship, Sex and Health Education Policy is based on DfE guidance June 2019 'Relationships Education, Relationships and Sex Education (RSE) and Health Education', which is statutory guidance from the Department for Education (DfE) issued under Section 80A of the Education Act 2002.

The Rosedale Hewens Academy Trust is committed to providing an excellent educational experience for all its students. Relationship and Health Education is lifelong learning about physical, moral and emotional development.

### Principles

The Rosedale Hewens Academy Trust:

- Expects all students to develop a healthier, safer lifestyle;
- Expects all students to respect and care for their bodies.

### **Consultation with Parents, Guardians and Carers**

A consultation took place between March 23<sup>rd</sup> and May 22<sup>nd</sup> 2020. Parents, guardians and carers were informed of the draft policy and given access to a copy, as well as a copy of the DfE guidance, and invited to submit their responses via email. The consultation received two responses from parents, guardians and carers in the secondary phase. If you missed this consultation window and would like to ask any questions about this policy, please contact your child's Principal.

### Relationships Education and Health Education in the Secondary Phase

This policy is supported by the following statutory guidance documents **or** is underpinned by statutory guidance:

- DfE guidance June 2019 'Relationships Education, Relationships and Sex Education (RSE) and Health Education', which is statutory guidance from the Department for Education (DfE) issued under Section 80A of the Education Act 2002.
- The Relationships Education, Relationships and Sex Education, and Health Education (England) Regulations 2019 are made under sections 34 and 35 of the Children and Social Work Act 2017.
- Keeping Children Safe in Education (September 2018)
- Working Together to Safeguard Children (July 2018)
- Children Act 1989 and 2004
- Children and Families Act 2014
- Special Educational Needs and Disability (SEND) Code of Practice (January 2015)
- Safeguarding Vulnerable Adults Groups Act 2006
- Equality Act 2010

### Introduction

### Secretary of State Foreword

Today's children and young people are growing up in an increasingly complex world and living their lives seamlessly on and offline. This presents many positive and exciting opportunities, but also challenges and risks. In this environment, children and young people need to know how to be safe and healthy, and how to manage their academic, personal and social lives in a positive way.

This is why we have made Relationships Education compulsory in all primary schools in England and Relationships and Sex Education compulsory in all secondary schools, as well as making Health Education compulsory in all state-funded schools. The key decisions on these subjects have been informed by a thorough engagement process, including a public call for evidence that received over 23,000 responses from parents, young people, schools and experts and a public consultation where over 40,000 people contacted the Department for Education.

The depth and breadth of views is clear, and there are understandable and legitimate areas of contention. Our guiding principles have been that all of the compulsory subject content must be age appropriate and developmentally appropriate. It must be taught sensitively and inclusively, with respect to the backgrounds and beliefs of students and parents while always with the aim of providing students with the knowledge they need of the law.

We are clear that parents and carers are the prime educators for children on many of these matters. Schools complement and reinforce this role and have told us that they see building on what students learn at home as an important part of delivering a good education. We agree with this principle and congratulate the many schools delivering outstanding provision to support the personal development and pastoral needs of their students. We are determined that the subjects must be deliverable and give schools flexibility to shape their curriculum according to the needs of their students and communities.

In primary schools, we want the subjects to put in place the key building blocks of healthy, respectful relationships, focusing on family and friendships, in all contexts, including online. This will sit alongside the essential understanding of how to be healthy. At secondary, teaching will build on the knowledge acquired at primary and develop further students' understanding of health, with an increased focus on risk areas such as drugs and alcohol, as well as introducing knowledge about intimate relationships and sex.

Teaching about mental wellbeing is central to these subjects, especially as a priority for parents is their children's happiness. We know that children and young people are increasingly experiencing challenges, and that young people are at particular risk of feeling lonely. The new subject content will give them the knowledge and capability to take care of themselves and receive support if problems arise.

All of this content should support the wider work of schools in helping to foster student wellbeing and develop resilience and character that we know are fundamental to students being happy, successful and productive members of society. Central to this is students' ability to believe that they can achieve goals, both academic and personal; to stick to tasks that will help them achieve those goals, even when the reward may be distant or uncertain; and to recover from knocks and challenging periods in their lives.

This should be complemented by development of personal attributes including kindness, integrity, generosity, and honesty. We have endeavoured to ensure the content is proportionate and deliverable. Whilst we are not mandating content on financial education or careers, we want to support the high quality teaching of these areas in all schools as part of a comprehensive programme, which complements the national curriculum where appropriate and meets the ambitions of the Careers Strategy. We know that many schools will choose to teach the compulsory content within a wider programme of Personal, Social, Health and Economic Education or similar. Schools are encouraged to continue to do so, if this is right for them, and build on established, high quality programmes.

These subjects represent a huge opportunity to help our children and young people develop. The knowledge and attributes gained will support their own, and others', wellbeing and attainment and help young people to become successful and happy adults who make a meaningful contribution to society.

### Curriculum content for Relationships and Sex Education

A good understanding of students' faith backgrounds and positive relationships between the college and local faith communities help to create a constructive context for the teaching of these subjects, and we are always keen to engage with any parents, guardians or carers who have questions or concerns.

In accordance with the DfE statutory guidance, and the national curriculum, the college must provide relationships and sex education and health education. In all colleges, teaching should reflect the law, including the Equality Act 2010, as it applies to relationships, so that young people clearly understand what the law allows and does not allow, and the wider legal implications of decisions they may make.

An understanding for all students of healthy relationships, acceptable behaviour and the right of everyone to equal treatment will help ensure that students treat each other well and go on to be respectful and kind adults.

The aim of RSE is to give young people the information they need to help them develop healthy, nurturing relationships of all kinds, not just intimate relationships. It should enable them to know what a healthy relationship looks like and what makes a good friend, a good colleague and a successful marriage or other type of committed relationship. It should also cover contraception, developing intimate relationships and resisting pressure to have sex (and not applying pressure). It should teach what is acceptable and unacceptable behaviour in relationships.

This will help students understand the positive effects that good relationships have on their mental wellbeing, identify when relationships are not right and understand how such situations can be managed.

Effective RSE does not encourage early sexual experimentation. It should teach young people to understand human sexuality and to respect themselves and others. It enables young people to mature, build their confidence and self-esteem and understand the reasons for delaying sexual activity. Effective RSE also supports people, throughout life, to develop safe, fulfilling and healthy sexual relationships, at the appropriate time.

Knowledge about safer sex and sexual health remains important to ensure that young people are equipped to make safe, informed and healthy choices as they progress through adult life. This should be delivered in a non-judgemental, factual way and allow scope for young people to ask questions in a safe environment. Many teachers use approaches such as distancing techniques, setting ground rules with the class to help manage sensitive discussion and using question boxes to allow students to raise issues anonymously.

RSE should provide clear progression from what is taught in primary school in Relationships Education. Teachers should build on the foundation of Relationships Education and, as students grow up, at the appropriate time extend teaching to include intimate relationships. Alongside being taught about intimate relationships, students should also be taught about family relationships, friendships and other kinds of relationships that are an equally important part of becoming a successful and happy adult. This teaching should enable students to distinguish between content and experiences that exemplify healthy relationships and those that are distorted or harmful.

Students should understand the benefits of healthy relationships to their mental wellbeing and self-respect. Through gaining the knowledge of what a healthy relationship is like, they can be empowered to identify when relationships are unhealthy. They should be taught that unhealthy relationships can have a lasting, negative impact on mental wellbeing.

As in primary, secondary Relationships Education can be underpinned by a wider, deliberate cultivation and practice of resilience and character in the individual. These should include character traits such as belief in achieving goals and persevering with tasks, as well as personal attributes such as honesty, integrity, courage, humility, kindness, generosity, trustworthiness and a sense of justice, underpinned by an understanding of the importance of self-respect and self-worth. There are many ways in which secondary schools should support the development of these attributes, for example by providing planned opportunities for young people to undertake social action, active citizenship and voluntary service to others locally or more widely.

Students should be taught the facts and the law about sex, sexuality, sexual health and gender identity in an age-appropriate and inclusive way. All students should feel that the content is relevant to them and their

developing sexuality. Sexual orientation and gender identity should be explored at a timely point and in a clear, sensitive and respectful manner. When teaching about these topics, it must be recognised that young people may be discovering or understanding their sexual orientation or gender identity. There should be an equal opportunity to explore the features of stable and healthy same-sex relationships. This should be integrated appropriately into the RSE programme, rather than addressed separately or in only one lesson.

It is recognised that there will be a range of opinions regarding RSE. The starting principle when teaching each of these must be that the applicable law should be taught in a factual way so that students are clear on their rights and responsibilities as citizens.

Colleges may choose to explore faith, or other perspectives, on some of these issues in other subjects such as Religious Education.

Students should be well informed about the full range of perspectives and, within the law, should be well equipped to make decisions for themselves about how to live their own lives, whilst respecting the right of others to make their own decisions and hold their own beliefs. Key aspects of the law relating to sex which should be taught include the age of consent, what consent is and is not, the definitions and recognition of rape, sexual assault and harassment, and choices permitted by the law around pregnancy.

Grooming, sexual exploitation and domestic abuse, including coercive and controlling behaviour, should also be addressed sensitively and clearly. Colleges should address the physical and emotional damage caused by female genital mutilation (FGM). They should also be taught where to find support and that it is a criminal offence to perform or assist in the performance of FGM or fail to protect a person for whom you are responsible from FGM. As well as addressing this in the context of the law, students may also need support to recognise when relationships (including family relationships) are unhealthy or abusive (including the unacceptability of neglect, emotional, sexual and physical abuse and violence, including honour-based violence and forced marriage) and strategies to manage this or access support for oneself or others at risk. Colleges should also be mindful that for students who are or have experienced unhealthy or unsafe relationships at home or socially, the college may have a particularly important role in being a place of consistency and safety where they can easily speak to trusted adults, report problems and find support.

Internet safety should also be addressed. Students should be taught the rules and principles for keeping safe online. This will include how to recognise risks, harmful content and contact, and how and to whom to report issues. Students should have a strong understanding of how data is generated, collected, shared and used online, for example, how personal data is captured on social media or understanding the way that businesses may exploit the data available to them.

Some students are also exposed to harmful behaviours online, and via other forms of media, which may normalise violent sexual behaviours. A focus on healthy relationships and broader Relationships Education can help young people understand acceptable behaviours in relationships.

The Relationships Education curriculum is designed on the following guidance from the DfE:

# By the end of secondary school:

Students should know

Families and people who	•	that there are different types of committed, stable relationships.
	-	that there are different types of committed, stable relationships.
care for me	•	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.

enline, such as:         • trust, respect, honesty, kindness, generosity, boundaries, privacy, consent and the management of conflict           Respectful relationships including friendships         • trust, respect, honesty, kindness, generosity, boundaries, privacy, consent and the management of conflict           • 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 college 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 behaviour within relationships are criminal, including violent behaviour and coercive control         • what constitutes sexual harassment and sexual violence and why these are always unacceptable           • their rights, responsibilities and opportunities online, including that the same expectations of behaviour apply in all contexts, including online         • their rights, responsibilities and opportunites online, including that the same expectations of behaviour apply in all contexts, including online           • their rights, responsibilities and opportunities online, including that the same expectation of behaviour apply in all contexts, including online           • their rights, responsibilities and poportunities online, including that the same expectation to there shared online and the difficuity oremoving potentially compromising		• the characteristics of positive and healthy friendships, in all contexts including
Respectful relationships, including friendships       and the management of conflict         Respectful relationships, including friendships       reconciliation and ending relationships, this includes different (non-sexual) types of relationships         Including friendships       practical steps they can take in a range of different contexts to improve or support respectful relationships         In 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)         It hat in college and in wider society they can expect 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, including violent behaviour and coercive control         It hat constitutes sexual harassment and sexual violence and why these are always unacceptable       It here repits, 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       It her rights, responsibilities and poptrunities online, including online         about different solut on ther shared online and the difficulty of removing potentially compromising material blaced online         It her 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 t		
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<ul> <li>how to recognise the characteristics and positive aspects of healthy one-one intimate relationships, which include mutual respect, consent, loyalt 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, including sexual health</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, m sexual and reproductive health and wellbeing</li> <li>the facts about reproductive health, including fertility and the potential is 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 r 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 optio available</li> <li>the facts around pregnancy including miscarriage</li> </ul>	y, d nental, mpact
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<ul> <li>sexual health</li> <li>the facts about reproductive health, including fertility and the potential is 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 r 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 optio available</li> <li>the facts around pregnancy including miscarriage</li> </ul>	·
<ul> <li>pressure, including understanding peer pressure, resisting pressure and r 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 optio available</li> <li>the facts around pregnancy including miscarriage</li> </ul>	not
<ul> <li>the facts about the full range of contraceptive choices, efficacy and optio available</li> <li>the facts around pregnancy including miscarriage</li> </ul>	
<ul><li>available</li><li>the facts around pregnancy including miscarriage</li></ul>	
	ns
<ul> <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> </ul>	
<ul> <li>how the different sexually transmitted infections (STIs), including HIV and AIDs, are transmitted, how risk can be reduced through safer sex (includi through condom use) and the importance of and facts about testing</li> </ul>	
<ul> <li>about the prevalence of some STIs, the impact they can have on those w contract them and key facts about treatment</li> </ul>	ho
<ul> <li>how the use of alcohol and drugs can lead to risky sexual behaviour</li> </ul>	
<ul> <li>how to get further advice, including how and where to access confidentia sexual and reproductive health advice and treatment.</li> </ul>	эl
It is important to know what the law says about sex, relationships and young people, as well as broader safeguarding issues. This includes a range of impo facts and the rules regarding sharing personal information, pictures, videos a other material using technology. This will help young people to know what is and wrong in law, but it can also provide a good foundation of knowledge for deeper discussion about all types of relationships. There are also many differ legal provisions whose purpose is to protect young people and which ensure young people take responsibility for their actions.	ortant and s right r rent
Students should be made aware of the relevant legal provisions when releva topics are being taught, including for example:	nt
marriage	
<ul> <li>consent, including the age of consent</li> </ul>	
<ul> <li>violence against women and girls</li> </ul>	
<ul> <li>online behaviours including image and information sharing (including 'ser youth-produced sexual imagery, nudes, etc.)</li> </ul>	xting',
<ul> <li>pornography</li> </ul>	
abortion	
• sexuality	
gender identity	

•	violence and exploitation by gangs
•	extremism and radicalisation
•	criminal exploitation (for example, through gang involvement or 'county lines' drugs operations)
•	hate crime
•	female genital mutilation (FGM)

### **Physical Health and Wellbeing Education**

It is important that the starting point for health and wellbeing education should be a focus on enabling students to make well-informed, positive choices for themselves. In secondary school, teaching should build on primary content and should introduce new content to older students at appropriate points. This should enable students to understand how their bodies are changing, how they are feeling and why, to further develop the language that they use to talk about their bodies, health and emotions and to understand why terms associated with mental and physical health difficulties should not be used pejoratively. This knowledge should enable students to understand where normal variations in emotions and physical complaints end and health and wellbeing issues begin.

Teaching about the impact of puberty, which will have started in primary school, should continue in secondary school, so that students are able to understand the physical and emotional changes, which take place at this time and their impact on their wider health and wellbeing.

Emphasis should continue to be given to steps students can take to protect and support their own health and wellbeing. They should know that there is a relationship between good physical health and good mental wellbeing and that this can also influence their ability to learn. Teachers should cover self-care, the benefits of physical activity and time spent outdoors. This should be linked to information on the benefits of sufficient sleep, good nutrition and strategies for building resilience.

Students should know the contribution that hobbies, interests and participation in their own communities can make to overall wellbeing. They should understand that humans are social beings and that outward-facing activity, especially that with a service focus (for example, work, volunteering and participation in organisations such as the scouts or the girl guiding movements, the National Citizen Service or the Duke of Edinburgh Award) are beneficial for wellbeing. This can also contribute to the development of the attributes for a happy and successful adult life. Students should be supported to recognise what makes them feel lonely. Self-focused or isolating lifestyle choices can lead to unhappiness and being disconnected from society for those who have greater need for companionship and relationships.

Students should also be taught about problems and challenges. This should include factual information about the prevalence and characteristics of more serious mental and physical health conditions, drugs, alcohol and information about effective interventions. Colleges may also choose to teach about issues such as eating disorders <sup>1</sup>.

Teachers should be aware of common 'adverse childhood experiences' (such as family breakdown, bereavement and exposure to domestic violence) and when and how these may be affecting any of their students and so may be influencing how they experience these subjects. The impact of time spent online, the positive aspects of online support and negotiating social media, including online forums and gaming, should also be included. Teachers should understand that students who have experienced problems at home may depend more on colleges for support.

Students should be taught how to judge when they, or someone they know, needs support and where they can seek help if they have concerns. This should include details on which adults in college (e.g. college nurses), and externally can help.

The aim of teaching students about physical health and mental wellbeing is to give them the information that they need to make good decisions about their own health and wellbeing. It should enable them to recognise what is normal and what is an issue in themselves and others and, when issues arise, know how to seek support as early as possible from appropriate sources.

Physical health and mental wellbeing are interlinked, and it is important that students understand that good physical health contributes to good mental wellbeing, and vice versa.

It is important for colleges to promote students' self-control and ability to self-regulate, and strategies for doing so. This will enable them 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. This integrated, whole-college approach to the teaching and promotion of health and wellbeing has a potential positive impact on behaviour and attainment.

Effective teaching should aim to reduce stigma attached to health issues, in particular those to do with mental wellbeing. Colleges should engender an atmosphere that encourages openness. This will mean that students feel they can check their understanding and seek any necessary help and advice as they gain knowledge about how to promote good health and wellbeing.

Colleges have flexibility to design and plan age-appropriate subject content, but the DfE guidance sets out core areas for health and wellbeing that are appropriate for primary and secondary aged students.

Puberty including menstruation should be covered in Health Education and should, as far as possible, be addressed before onset. This should ensure male and female students are prepared for changes they and their peers will experience.

# Menstruation

The onset of menstruation can be confusing or even alarming for girls if they are not prepared. Students should be taught key facts about the menstrual cycle including what is an average period, range of menstrual products and the implications for emotional and physical health. In addition to curriculum content, colleges should also make adequate and sensitive arrangements to help girls prepare for and manage menstruation including with requests for menstrual products.

### By the end of secondary school, students should know:

Mental wellbeing	<ul> <li>how to talk about their emotions accurately and sensitively, using appropriate vocabulary</li> </ul>
	that happiness is linked to being connected to others
	how to recognise the early signs of mental wellbeing concerns
	<ul> <li>common types of mental ill health (e.g. anxiety and depression)</li> </ul>
	<ul> <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> </ul>
	• 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	<ul> <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> </ul>

	<ul> <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>
Physical health and fitness	• the positive associations between physical activity and promotion of mental wellbeing, including as an approach to combat stress
	<ul> <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> </ul>
	• about the science relating to blood, organ and stem cell donation.
Healthy eating	<ul> <li>how to maintain healthy eating and the links between a poor diet and health risks, including tooth decay and cancer</li> </ul>
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
	<ul> <li>awareness of the dangers of drugs which are prescribed but still present serious health risks</li> </ul>
	• 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	<ul> <li>about personal hygiene, germs including bacteria, viruses, how they are spread, treatment and prevention of infection, and about antibiotics</li> </ul>
	<ul> <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> </ul>
	• (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	<ul> <li>key facts about puberty, the changing adolescent body and menstrual wellbeing</li> </ul>
	• the main changes which take place in males and females, and the implications for emotional and physical health.

# **Students with Special Educational Needs**

Relationships Education and Health Education must be accessible for all students. This is particularly important when planning teaching for students with special educational needs and disabilities who represent a large minority of students. High quality teaching that is differentiated and personalised will be the starting point to

ensure accessibility. Colleges should also be mindful of the preparing for adulthood outcomes<sup>,</sup> as set out in the SEND code of practice, when teaching these subjects to those with SEND.

Colleges should be aware that some students are more vulnerable to exploitation, bullying and other issues due to the nature of their SEND. Relationships Education and RSE can also be particularly important subjects for some students; for example those with Social, Emotional and Mental Health needs or learning disabilities. Such factors should be taken into consideration in designing and teaching these subjects.

In special schools and for some SEND students in mainstream schools 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, colleges should ensure that their teaching is sensitive, age-appropriate, developmentally appropriate and delivered with reference to the law.

### Right to be excused from sex education (commonly referred to as the right to withdraw)

Parents have the right to request that their child be withdrawn from some or all of sex education delivered as part of statutory RSE. Before granting any such request it would be good practice for the Principal to discuss the request with parents and, as appropriate, with the child to ensure that their wishes are understood and to clarify the nature and purpose of the curriculum. Colleges will want to document this process to ensure a record is kept.

Good practice is also likely to include the Principal discussing with parents the benefits of receiving this important education and any detrimental effects that withdrawal might have on the child. This could include any social and emotional effects of being excluded, as well as the likelihood of the child hearing their peers' version of what was said in the classes, rather than what was directly said by the teacher (although the detrimental effects may be mitigated if the parents propose to deliver sex education to their child at home instead).

Once those discussions have taken place, except in exceptional circumstances, the college should 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 college should make arrangements to provide the child with sex education during one of those terms.

This process is the same for students with SEND. However there may be exceptional circumstances where the head teacher may want to take a student's specific needs arising from their SEND into account when making this decision. The approach outlined above should be reflected in the college's policy on RSE.

If a student is excused from sex education, it is the college's responsibility to ensure that the student receives appropriate, purposeful education during the period of withdrawal. There is no right to withdraw from Relationships Education or Health Education.

### Procedure

Every student is entitled to receive Relationship and Health Education regardless of ethnicity, gender, religion, age, culture, disability, sexuality, language specials needs, disadvantaged and looked after children.

It is our intention all students have the opportunity to experience a programme of relationship and health education at a level which is appropriate for their age and physical development with differentiated provision if required.

The PHSE Coordinator is the designated teacher with responsibility for Relationship and Health Education, which is delivered through Science, RE, PSHE, Citizenship, literacy activities and form time. It is taught by classroom teachers, teaching assistants and, if appropriate, outside visitors such as the college nurse.

A range of teaching methods which involve student's full participation are used to teach Relationship and Health Education. These include use of video, discussion, looking at case studies, drama and role play.

# **Monitoring and Review**

The success of the Trust's policy is evaluated through self-evaluation and reporting activities such as:

- Monitoring of planning and timetabling by the Senior Management Team (SLT) and other members of staff;
- Visits from Local Authority personnel and Ofsted inspection arrangements;
- Feedback from parents, guardians and carers and staff, both formal and informal, following consultation.

Last reviewed: June 2025 Due for review: August 2026