

Sex and Relationships Education

The implementation of the guidance in Circular 11/02 in schools in Wales 2004 - 2005



BUDDSODDWR MEWN POBL
INVESTOR IN PEOPLE

Every possible precaution has been taken to ensure that the information in this document is accurate at the time of going to press. Any enquiries or comments regarding this document/publication should be addressed to:

Publication Section

Estyn

Anchor Court

Keen Road

Cardiff

CF24 5JW or by email to publications@estyn.gsi.gov.uk

This and other Estyn publications are available on our website: www.estyn.gov.uk

© Crown Copyright 2005: This document/publication (excluding the departmental logos) may be re-used free of charge in any format or medium provided that it is re-used accurately and not used in a misleading context. The material must be acknowledged as Crown copyright and the title of the document/publication specified

Contents	Page
1. Introduction	4
2. Main findings	4
3. Recommendations	5
4. Background	6
5. The Guidance and its implementation in schools	7
Primary schools	7
Secondary schools	8
Links with health professionals and voluntary agencies	10
6. Examples of good practice	10

1. Introduction

1 The purpose of this report is to respond to the request from the Welsh Assembly Government for information on the implementation of the sex and relationships education guidance (Circular 11/02) issued to schools in 2002. The report summarises the main findings from visits to 14 primary and secondary schools during 2004 and early 2005, as well as interviews with headteachers, teachers and pupils. It also draws on discussions with LEA advisers for personal and social education (PSE), and some Healthy Schools coordinators. The report makes a number of recommendations for action.

2 National Assembly for Wales Circular 11/02 replaced Welsh Office Circular 45/94. The replacement circular takes account of:

- the revised National Curriculum programmes of study (January 2000);
- the need for guidance on the personal and social education framework (PSE): key stages 1 to 4 in Wales;
- the Social Exclusion Unit report on teenage pregnancy;
- the National Assembly for Wales document, A strategic framework for promoting sexual health in Wales; and
- the new requirement, under the Education Act 1996 (as amended by Section 148 of the Learning and Skills Act 2000), that the National Assembly for Wales issue guidance that will ensure that, as part of sex education, schools teach the nature of marriage and its importance to family life and the bringing-up of children.

2. Main Findings

3 Those schools where sex and relationships education is an established part of a PSE programme have welcomed the guidance as a useful basis for auditing, reviewing and revising their policies and practice. Schools without established programmes are using the guidance to help them plan effective and comprehensive provision. It is too soon after the publication of the Circular to evaluate the effectiveness of the guidance in promoting best practice in these schools.

4 In the 15 LEAs that employ a PSE adviser, working groups of teachers and professionals have used the guidance to update policies and to review and amend advice, support and resources. In those LEAs without a PSE adviser, some schools have taken the decision to use the guidance, even where there has been little or no lead from the authority.

5 Most of the primary and all of the secondary schools visited have a separate policy for sex and relationships education. These policies have appropriate regard for the National Assembly for Wales Circular Number 11/02 Sex and Relationships Education in Schools. In the best practice, schools have drawn up policies in consultation with parents and health authority specialists. All the sex and relationships education policies make reference to other relevant school policies, including those relating to bullying, child protection and healthy schools. However, some primary schools do not monitor or evaluate their sex and relationships

education programmes rigorously enough in order to improve or update their policy and practice.

6 A number of secondary schools involve pupils in the planning of sex and relationships education. In more and more schools, the School Council is consulted. PSE teachers ask pupils about:

- the content that is relevant to their needs;
- their opinion on the most appropriate time to deal with specific issues; and
- the best methods of dealing with this area of work.

After each module of sex and relationships education, pupils are often asked questions about the effectiveness of the programme, and how it might be improved.

7 In the schools that HMI visited, sex and relationships education meets statutory requirements. Teaching is appropriate and effective, and in line with ACCAC's Personal and Social Education Framework. Sex and relationships education is a part of the PSE programme or, where relevant, provided through other subjects. Most frequently, these include science, religious education and drama.

8 Good quality teaching is the single most important factor in ensuring an effective sex and relationships education programme in schools. LEAs with PSE advisers provide initial INSET¹ for this area of the curriculum. They offer good quality guidance on devising and implementing a policy and on curriculum content and organisation. Few LEAs provide an annual INSET session to refine teachers' skills and to update their awareness of new teaching resources in this sensitive area of the curriculum. Schools report that this is due mainly to cuts in their Better Schools Fund for INSET. None of the teachers interviewed had been able to attend INSET provided by any alternative organisation, because they were unable to fund their attendance from the school's budget.

9 Most of the schools we visited hold parents' meetings to explain the sex and relationships policy and to answer any concerns. However, few parents attend these meetings. In too many schools, there is not enough liaison between primary and secondary schools to ensure a common approach and appropriate progression, in this area of work.

10 Apart from the school nurse, primary schools rarely use outside agencies, such as local health professionals, in delivering the sex and relationships education programme. However, secondary schools have developed significant partnerships that are invariably effective.

3. Recommendations

R1 Schools should:

- have a separate policy for sex and relationships education that takes account of the recommendations set out in National Assembly for Wales Circular 11/02;

¹ INSET – In-Service Training

- work more effectively with their local health boards in delivering their sex and relationships education programme;
- use already-established links between primary and secondary schools to agree a common approach and ensure appropriate progression in sex and relationships education;
- continue to involve parents in developing their sex and relationships education programme; and
- monitor and evaluate the effectiveness of their sex and relationships education programme.

R2 LEAs should ensure that they allocate Better Schools funding from WAG to provide for specialist sex and relationships education support and training for teachers, to enable them to:

- deal confidently with difficult questions, comments and sensitive issues, in the classroom;
- keep up-to-date on the range and appropriateness of resources available; and
- deal with issues of confidentiality in respect of sex and relationships education in line with their school's child protection policy;

R3 ACCAC should:

- consider producing appropriate materials to support the effective teaching of sex and relationships education in schools.

4. Background

11 The sexual health of young people in Wales continues to be a concern. Although there has been a reduction in recent years, teenage pregnancy rates are still the highest in Europe. There are also increases in the rates of sexually transmitted infections among 16-19 year olds. 'Better Health – Better Wales' (1999) suggested that there needed to be better communication and a wider understanding about sexual health to address these issues.

12 The National Assembly's 'Strategic framework for promoting sexual health in Wales' (2000) proposed a number of health and education initiatives to address these problems. A central objective of the strategy is to ensure that all young people in Wales receive effective education about sex and relationships, to support their personal and social development and in order to promote sexual health.

13 Inspection evidence indicates that most schools provide good or very good PSE teaching. While sex education is often covered in circle time in primary schools, it is almost always part of the PSE programme in secondary schools. Many teachers feel that they need further training in these areas, to make sure that they are able to identify accurately the problems and concerns of children. Many of the physical and sexual aspects of knowledge and understanding in PSE are also taught through subjects of the curriculum such as science and physical education.

14 The most effective sex education programmes are those where the school:

- considers thoughtfully the timing of the sex education input because once young people are sexually active they are unlikely to change their behaviour;

- develops skills through teaching methods, such as role-play, which allow young people to practise their communication, discussion, negotiation and decision making skills;
- provides activities that address social, peer and media influences; and
- devises integrated programmes aimed at preventing pregnancy; increasing contraceptive use and preventing HIV/AIDS and other sexually transmitted infections.

15 The most effective school-based sex education programmes are those that link education with access to sexual health services and other agencies. These programmes involve working co-operatively with the schools. The school nurse and other health professionals have an important role in bridging the gap between education and, for example, contraception services.

5. The Guidance and its implementation in schools

16 Circular 11/02 advises that ‘sex and relationships education should not be delivered in isolation. The revised National Curriculum in Wales and the PSE Framework give schools explicit opportunities for pupils to learn about sex and relationships. In particular, the PSE Framework clearly identifies attitudes, values and skills, as well as a sound knowledge base, relevant to sex and relationships education.’

17 Advisers and schools consider that the guidance is very well structured. The clear, comprehensive information and summary of recommendations at the end of each section help schools to plan and deliver effective sex and relationships education. The annexes also provide very helpful case studies, clarifying the legal context, identifying links with the PSE Framework and detailing the relevant National Curriculum science orders for all key stages.

Primary Schools

18 All the schools that HMI visited spend at least half an hour a week on timetabled PSE lessons as well as in additional ‘circle time’. This is a new feature in many primary schools. It allows teachers to structure discussions on PSE issues as well as enabling them to deal spontaneously with questions, as they arise within classrooms. However, in order that PSE is taught most effectively, primary schools will need to make sure that they teach PSE across the whole school, rather than as a separate subject.

19 In early years and in KS1, there is appropriate emphasis on helping pupils to understand how they develop during early childhood. The focus is on encouraging pupils to value themselves and to develop positive attitudes. Pupils also learn about healthy eating and relationships with peers, friends and family. In KS2, in years 3, 4 and 5, schools teach sex and relationships education through topics such as ‘myself’, ‘the family’ or ‘healthy living’. These topics provide appropriate contexts for pupils to develop their self-esteem and acquire positive values and attitudes towards others. Pupils also progressively increase their knowledge and understanding of lifecycles and human reproduction.

20 In year 6, many schools in Wales offer a short sex and relationships education programme, in the majority of cases to mixed classes of boys and girls. In the best examples, teachers use a combination of commercially produced videos and talks from expert health professionals, such as the school nurse, about puberty and the onset of menstruation. Experience has shown that pupils are far more likely to ask questions in single sex groups than in mixed sex groups. So, immediately following these mixed sessions, schools organise separate discussion groups for boys and girls. Pupils with SEN receive the same lessons as their classmates but have additional guidance from learning support assistants.

21 In fulfilling their statutory obligation, schools always inform parents about the content of the sex and relationships education programme, and invite them to comment or ask questions. In practice, few parents respond, being happy to leave the issue to schools.

22 Teachers use “distancing” procedures effectively, such as a question box that guarantees anonymity, to address the concerns of pupils who feel unable to discuss openly sensitive issues, such as their sexuality. Pupils can discuss issues that arise in circle time or in other appropriate “safe” circumstances, such as role-play. Schools sometimes use visiting theatre or health education groups to organise these activities.

23 Schools use published resources well, throughout the primary years. These resources promote pupils’ skills, such as alternative thinking strategies and relationship guidance. Teachers take care to make connections with the school’s PSE scheme of work and where appropriate to subject schemes of work, particularly in science.

24 Most schools have only just begun to develop partnerships with health professionals and other agencies. In the best practice, members of the local health care team visit the school to set up the partnership and work alongside teachers and pupils, often beginning with children in the early years. They might talk to younger children about friendships and families, or what medicines are for, and from whom they should accept them. With older pupils, members of the health care team might undertake a role-play session, during which they explore issues such as bullying and physical or emotional abuse.

Secondary Schools

25 In most secondary schools, there are discrete, timetabled lessons in PSE for pupils in either key stage 3 or key stage 4, and sometimes in both. Most schools acknowledge the contribution that other subjects and provision outside lessons make to pupils’ personal and social development. In many schools, form tutors, year tutors and heads of lower and upper schools contribute significantly to PSE.

26 Secondary schools approach PSE in a variety of ways. These include using one or more of the following:

- timetabled PSE lessons;
- form tutorial time;

- a carousel arrangement, in KS4, including, for example, careers education or work-related education; and
- collapsing the timetable to address specific issues, often of a sensitive nature.

Where there are specific lessons or a carousel arrangement, a specialist team of teachers may teach the subject or the school may use non-specialist teachers who happen to be available at the time.

27. More and more schools are using a combination of methods effectively. Form tutors often teach the less sensitive parts of the programme, such as the environmental, social, vocational or learning aspects during form tutorials. Specialist teachers and health professionals teach the more personal issues such as substance misuse or sex and relationships education in PSE lessons or on a specific focus day. This ensures that the people dealing with these topics are trained, committed to supporting young people in this respect and able to address any sensitive issues or questions.

28. Most schools promote sexual health advice by displaying appropriate materials that highlight sources of advice and support, both within the school and in the wider community, that pupils can access as and when they need. Evidence shows that pupils appreciate having access to this information, and that many make use of the available support.

29. Many secondary schools teach a spiral curriculum in PSE. This means that schools revisit aspects of sex and relationships education as appropriate and relevant to the maturity of the pupils during most years of key stage 3 and 4. In a number of examples, these include:

- physical development (Yr 7);
- social issues (from Yr 7);
- emotional development (Yr 8);
- sexual identity (from Yr 8);
- contraception (from Yr 9);
- sexual activity and its consequences (Yr 9, 10 and 11);
- resisting unwanted peer pressure (Yr 9, 10 and 11);
- parenting (Yr 10 and 11); and
- the law relating to sexual behaviour (Yr 10 and 11);

30. PSE co-ordinators in secondary schools, and in the primary schools that feed them, visit each other's schools. As a result, teachers become more aware of the way in which each school approaches PSE. It helps them plan for progression in pupils' sex and relationships education, as they move on to secondary school, and to identify and gather relevant information about individual pupils before they transfer to year 7.

31. Comprehensive schools often host annual transition programmes in the summer term for year 6 pupils. In the best examples, these include a focus not only on subjects but also on aspects of PSE, including sex and relationships education. Secondary teachers deliver this aspect of the transition programme using the 'circle' time methodology and the same resources as employed in the primary school.

Pupils from year 7 also visit year 6 pupils in their schools to answer any questions and to reassure them about what will be their new school.

32 LEAs that have specialist PSE advisers run regular training events for teachers. These advisers set up working groups of teachers and health professionals in their authorities to review and amend their policies and guidance to schools in response to Circular 11/02. However, in LEAs without specific PSE advisers, schools may not receive enough advice and support for PSE in general and sex and relationships education in particular. Schools receive notice of courses available through other providers, but few teachers are able to attend the courses. The main reason given for this by the schools is the pressure on funding.

Links with health professionals and voluntary agencies

33 In more and more primary schools, local health care teams are delivering aspects of the sex and relationships education programme. The specialist personnel include:

- social workers;
- nurses;
- doctors; and
- mental health workers such as education psychologists and psychiatrists.

34 Such professionals use activities, such as role-play, to identify year 6 pupils who may influence others, who have low self-esteem or who may need support and guidance with their relationships. Schools can track and monitor these pupils, as they move into secondary schools and provide continuing and relevant support as required. Schools that adopt this sort of approach report that it leads to a reduction in the number of secondary school pupils with behavioural or emotional problems.

35 Outside agencies help all the secondary schools visited by HMI to support and deliver their sex and relationships education programme. Schools have included professionals from the school nursing service and representatives of feminine hygiene companies in their sex and relationships education provision for a number of years. More and more schools now work very effectively with sexual health educators, sexual health outreach workers, youth access workers and theatre in education companies. Pupils appreciate the input of professionals other than teachers and consider that their advice and support is very effective.

6. Examples of good practice

The following are all good examples of effective working with the wider community, as recommended in Section 5 of the Circular.

Pupil and parent involvement

36 In one primary school, pupils and parents helped in drawing up the school's policy. There was an after-school meeting for parents to discuss how the policy would work in practice and to view the teaching resources. This meeting included discussion of teaching about sensitive issues, such as sexual orientation, and of parents' right to withdraw their children from sex and relationships education

lessons. Parents, also, received guidance on how to talk to their children about sex and relationships and make links with what the pupils are learning in school.

37 One comprehensive school held a seminar about sex and relationships education, during which the sixth form discussed and agreed the following topics:

- suitable and acceptable language and what is unsuitable or unacceptable;
- the content of the programme and the best time to teach it;
- legal aspects; and
- the most appropriate methods of delivery.

The sixth form pupils are already involved in peer mentoring in the substance misuse programme. This is very effective, and the students would like to extend it to sex and relationships education. However, the demands of Year 12 do not allow them time to do so. Year 10 pupils, who are able to find time more easily than Year 12 can, are currently trained through 'Childline' to act as a listening service.

38 In one LEA, all the comprehensive schools use the Added Power And Understanding in Sex Education (APAUSE) programme to deliver sex and relationships education. APAUSE is based on peer education, and involves senior, trained pupils in delivering not only the knowledge component, but also in leading discussions concerned with attitudes and values. The programme promotes the positive aspects of relationships, both emotional and physical. It aims to increase tolerance, respect and mutual understanding, enhances knowledge of risks and counteracts myths, improves effective contraceptive use by teenagers already sexually active and provides effective skills to those who wish to resist unwelcome pressure.

Partnerships

39 In one school in a South East Wales local authority, teenage pregnancy figures are high. Many girls have very low self-esteem. It is part of the culture of the area that women have their babies early, and that their mothers play a major role in childcare. Parents' questionnaires show that parents are keen for the school to give them information about sex and relationships education, because they feel that their own knowledge is out-of-date.

40 The school believes that PSE is central to the school, and must be taught across the curriculum. Nevertheless, they decided that, each fortnight, form tutors would supplement this with formal PSE in a one-hour tutorial. A dedicated team, drawn from 10 teachers on the school's PSE panel, teaches sensitive issues. Each year-group has a good tutorial booklet for teachers and pupils. Each year booklet has a relationships focus, and this is taught by teachers from the PSE panel.

41 The school has well-established partnerships with other agencies. The NHS Health and Wellbeing coordinator works effectively on healthy and active lifestyles, and the Police make a very valuable contribution to substance misuse education and on personal safety. The police contributed to a day-long programme of PSE workshops for Yr 10 on a number of issues.

Advice on contraception (1)

42 A youth access worker is based at the same South East Wales school. He is fully trained by the LEA in sex and relationships education, and is also on the school's PSE panel. He has a role as a counsellor on a number of issues, and is well respected by staff and pupils. A sexual outreach worker runs a 'drop-in' session on Mondays.

43 The LEA runs a scheme, funded by WAG, which allows any teenager to go to the youth club in the evening, have a short counselling session about relationships and contraception and access free contraceptives. Their names are listed, and every time they get contraceptives, a record is kept. A number of pupils are uncomfortable about going to the Youth Club when it is open for other activities because they think it is not private enough. In response to these concerns, the youth access worker and the sexual outreach worker now open up the youth club straight after school one day per week to deliver the same service.

44 On one day in the year, the school runs a 'DNA Day' ('Drugs 'N Alcohol Day') for Year 10 pupils. This deals with a number of personal and sensitive issues. A range of outside specialists, who are known to the pupils, run workshop sessions on topics such as smoking cessation, drugs and alcohol, sexual health and healthy living.

45 The school also runs a two-day 'Go Girls' programme for a group of disaffected Yr 10 pupils. Disaffected or vulnerable pupils attend the course, which focuses on developing self-esteem. The girls have responded so well, that the school is now planning a parallel 'Go Boys' course.

Advice on contraception (2)

46 In another local authority in South East Wales, the local health board has trained every secondary school in basic contraception. This training follows the new WAG guidance. All teachers receive a free family planning teaching resource, when they complete the training. The LEA also employs a Sexual Health Outreach Worker and a Sexual Health Educator, as in the first example. Both these authorities are part of the former Gwent Health Authority.

47 Pupils access free contraceptives through the local Family Planning clinic. This was not set up as a young people's clinic, but the general population now tend to attend during the early afternoon, and pupils attend between 3 and 5pm.

48 The school has carried out two health related behaviour surveys for the comprehensive school and its feeder primary schools, which Exeter University analyses. Results are sent out to every school. This has been invaluable in identifying pupils' needs in a range of issues.

49 The school provides a 'Little Yellow Book' for all pupils at the end of Year 9. This includes all the information and contacts that the pupils might need. The book is smaller than a credit card, and will fit easily into a purse. These have been well received. The head of PSE has only ever found one discarded.

Support through mobile phone texting

50 In one school in West Wales, all pupils carry a card with details of a mobile phone number where they can get advice and support. Two nurses run the advice line. The pupils text their own mobile phone number and nurses will phone them to discuss the pupil's problem. The Welsh Assembly Government gave a £500 grant to purchase the phones and pay the bills. Fifty pupils used the service in three months of one term. The service offers a range of advice, some of which relates to sex and relationships.

51 There are also 2 outreach workers based at the school (and one in the feeder primaries) who deal with pupils' problems. These can be to do with behaviour, attendance, any conflicts at school or at home, bereavement, or sex and relationships.