

RSE and Parents / Carers

Overview and Activities

Overview:

Schools should always seek to work in partnership with parents and carers. This is essential to effective sex and relationship education (RSE).

Research shows that children and young people want to receive their initial sex and relationship education from their parents and families, with school and other adults building on this later. But many parents and carers find it difficult to talk to their children about sex and relationships. In particular, fathers rarely take responsibility for giving sex and relationship education to their sons.

The teaching of some aspects of sex and relationship education might nevertheless be of particular concern to some parents. Teachers have a responsibility to ensure the safety and welfare of pupils and because teachers therefore act in loco parentis, parents may need to be reassured that the personal beliefs and attitudes of teachers will not influence the teaching of sex and relationship education within the PSHE framework. Teachers and all those contributing to sex and relationship education are expected to work within an agreed values framework as described in the school's policy, which must be in line with current legislation.

Consulting parents

Schools should always work in partnership with parents, consulting them regularly on the content of sex and relationship education programmes. Reflection around parents' own experiences of sex education can often lead to a productive discussion in which teachers and parents can start planning sex and relationship education provision for their children. Parents need to know that the school's sex and relationship education programme will complement and support their role as parents and that they can be actively involved in the determination of the school's policy.

Parents who withdraw their children

Parents have the right to withdraw their children from all or part of the sex and relationship education provided at school except for those parts included in the statutory National Science Curriculum. Schools should make alternative arrangements in such cases (RSE Guidance DfEE, 2000). However, with careful planning that includes consultation and open discussion with parents about the rationale for age appropriate RSE this rarely occurs.

Consulting with parents/carers on RSE

It is recommended that the activities listed below be used together as part of a planned RSE parents evening. The activities can be used to inform review of your RSE policy and programme by identifying appropriate content to meet their children's needs, to identify what they would like to see in the RSE policy and to record their views of the resources within the programme.

Research has shown that parents/carers can be nervous about attending meetings on RSE, so it may be effective to hold a meeting on the broader PSHE curriculum.

Consideration needs to be given to:

- How parents/carers will be invited (phone/letter)
- The language that is used for the invitations and whether any translation is needed
- The timing of the meetings
- Whether meetings should be single or mixed gender

It is recognised that some parents/carers will withdraw their children even after effective consultation. This is not necessarily a sign schools are doing a bad job; some parents/carers believe that it is their responsibility to educate their children about sex and relationships. In this type of situation it is important that the RSE programme is not significantly compromised to meet the needs of a tiny minority. However it may be appropriate to offer leaflets and resources to parents to support them in talking to their child.

(Blake and Katrak, 2002)

It is important to explain to parents that their feedback is intended to provide the school with information in the form of priorities identified by parents. There is no guarantee that everything everyone wants can be fulfilled.

Working with Difference:

Learning points from an initiative undertaken in a school with a large minority ethnic community:

- Don't make any assumptions about the feelings of others
- Always have interpreters available
- If you are not of the relevant faith, facilitate using people from the community when relating to issues of either religion or culture
- Be clear about the difference between what is religiously, and culturally, acceptable
- Group work is not always appropriate (may be more acceptable to mothers groups than mixed mothers and fathers groups)
- Do work within the school's framework, for example, equal opportunities. Try to reach consensus but don't compromise the schools principles

(Blake and Katrak, 2002)

RSE Parents/Carers Session Plan:

Possible aims of a parents RSE session include:

- To introduce parents to RSE as a subject, to 'open up' discussion and improve communication
- To review a specific resource(s) and gain parents views
- To allay concerns raised by parents about RSE
- To consult with parents about their views on resources and curriculum content to inform RSE policy review

Possible staff to attend:

- PSHE coordinator
- Teacher(s) involved in delivering RSE (or specific year group depending on audience)
- Child Protection Lead and/or SENCO (SMT)
- School Health Adviser (school nurse)
- LA Healthy Schools staff

Resources:

1. Flip chart paper and post it notes
2. 'Sex & Relationship Education is...' handout
3. 'My RSE' worksheets
4. Timeline activity
5. Copies of RSE parents leaflet

Activities:

1. What is RSE?

Sex and Relationships Education' in the middle of flip chart paper.

Ask parents to 'brainstorm' what they think RSE is about.

Map each topic / issue with a line to either the word 'sex' or 'relationships'.

Go through with them everything that it can entail.

Resource: 'Sex & Relationships Education is...' Handout/slide

Alternative Activity 1:

Give a short presentation on what makes good RSE using;

Resource: 'Sex & Relationships Education is...' Handout/flip chart/slide

2. Parents experience of RSE

Hand out the 'My RSE' worksheets. Ask parents to complete then discuss with a partner. Ask for volunteers to share experiences with the group.

3. Timeline Activity

Useful activity for parents to discuss what should be delivered when. Get everyone involved who is a parent (including staff).

4. Resources

Use this opportunity to review any relevant resources with parents (e.g. Living and Growing DVD, handouts, leaflets etc). Invite comments and questions. Involve those who are delivering the lessons to give an insight into how they are used in class and any comments from the pupils.

5. RSE and parents leaflet

Circulate to parents for their information. Go through the relevant key stages with them. Refer to your scheme of work for RSE and/or discuss what is recommended within the Ealing scheme of work.

<http://publications.teachernet.gov.uk/eOrderingDownload/RSE%20dES%200706%202001.pdf>

6. Feedback

- Stick an A3 sheet on the wall titled 'School RSE policy & programme'. Before they go home, circulate post it notes, invite parents to write down anything they would like the school to bear in mind when drawing up/reviewing the RSE policy and programme.

Additional Resources:

- If you are using videos during RSE sessions it is recommended to show these to parents during this lessons

References for staff:

- RSE Guidance: DfEE (2000)
- Partnership with Parents in Sex Education, Lorna Scott: NCB (1996)
- Speakeasy for Parents: Facilitators Handbook: fpa (2007)
- Faith, Values and Sex & Relationships Education: Simon Blake & Zarine Katrak: NCB (2002)
- World Religions and Sex Factsheet:
- SRE – the Evidence
- Sex and relationships education for the 21st century
- Department for Education: Government response: Life lessons PSHE and SRE in schools
- Talk to your children about sex and relationships: support for parents

- Sex and relationship education (SRE) in primary schools: guidance for parents of primary school children

How happy were you with the sex and relationships education you got when you were growing up?

What information did you get:

From your parents?

From school lessons?

From your friends?

From magazines or elsewhere?

What did you think about that, then and now?

Sex and Relationships Education is...

... learning about the emotional, social and physical aspects of growing up, relationships, sex, human sexuality and sexual health. Some aspects are taught in science, and others are taught as part of personal, social health and economic education

(Sex and relationships for the 21st Century)

Effective Sex and Relationships work consists of a balance of 4 elements:

1. Knowledge

- The mechanics of sex, including biological aspects; fertility, pregnancy and reproduction; contraception, abortion and sexually transmitted infections; puberty; information about sexual behaviour; sexuality; the law.

2. Values and Beliefs

- Explore values and beliefs and consider how we are affected by them. Appreciation of difference, tolerance and openness. Ownership of the relevance of this knowledge to our own lives and community.

3. Skills

- Communication and personal skills necessary to develop and maintain relationships and make informed choices and decisions regarding sexual health and emotional wellbeing e.g. assertion, negotiation.

4. Emotions and Feelings

- Understanding the effects that emotions have; promoting positive feelings such as empowerment and self-respect. Dispelling negative feelings, for example, fear, shame and embarrassment. Understanding appropriate expression of feelings.

Timeline Activity (fpa)

The timeline activity offers learners the opportunity to consider at what age they would discuss certain words with their children and why.

Creating your timeline



Create a timeline on A3 paper by writing the age categories (above) in a line, alternatively write the age categories on cards and place them along the floor in order. If you want to be more creative, use a washing line spanning one side of the room to the other and use clothes pegs to attach the issues/subjects.

Creating your word cards

Use the 'items of factual knowledge' to create timeline word cards for your group. If the group is large, split the learners into small groups to work together. Alternatively you could write the words onto post-it notes.

The timeline activity in your groups

Remember that the aim of the activity is for learners to identify/describe the needs of children in relation to sexuality at different stages in their lives. Learners need to consider how their children grow and develop sexually, and what words they will need to know about.

Use the questions below to guide your groups in their activity in relation to each word or topic raised. Ask them to place their word on the timeline accordingly. Invite others present to either agree, move up or move down the timeline.

- At what age might you discuss the topic with your child?
- Why at this age?
- Why might you need to discuss this topic earlier/later?

In small groups ask them to identify:

- a) High schools - the 3 most important topics/issues
- b) Primary schools – which do your children need to know about before leaving *this* school?

It is important to explain to parents that this activity is intended to provide the school with information in the form of priorities identified by parents. It does not guarantee that everything everyone wants can be fulfilled.

Remember this is an opportunity to remind parents of the misinformation many children and young people receive about these words and issues whether through the media, their peers, older siblings etc.

Timeline Items of Factual Knowledge for Word Cards:

Periods

Vagina

Penis

Foreplay

Oral sex

Civil partnership

Sexual intercourse

Anal sex

Where babies come from

Marriage

Masturbation

Contraception

Gay relationships

Clitoris

Sexually transmitted infections

Pubic hair

Abortion

Wet dreams

Puberty

Sanitary products

Erections

Orgasms

Foreskin

Sexual abuse

Pregnancy

Personal hygiene

Keeping safe from harm

HIV and AIDS

This activity was devised by fpa and taken from the Speakeasy course for parents.



Glossary of terms used in 'Timeline' exercise:

Abortion: Ending (terminating) a pregnancy. May happen naturally (spontaneous abortion or miscarriage), or through medical treatment (induced abortion).

Anal sex: Sex in which penis goes into the anus. You can be gay, straight or bisexual to have anal sex. May be risky because the skin inside is delicate and tears easily, letting sexually transmitted infections through. Some people enjoy it – others don't.

Body changes: The changes that happen to boys and girls when they reach puberty.

Bras: Special underwear worn by girls and women to support their breasts.

Civil partnership: A way that same sex couples can have their relationship legally recognised, allowing them the same rights as a married couple.

Clitoris: Organ in the front of a woman's genitals that can be very pleasurable to touch. Becomes swollen and erect when a woman is sexually aroused.

Contraception: Word covering all methods of preventing pregnancy. A contraception clinic, practice nurse or doctor can help you decide which is best for you.

Erection: When the penis gets harder and bigger.

Friendship: A relationship where two people have a bond of affection for each other.

Foreplay: Sexual activity such as kissing, stroking and touching, that may or may not lead to sexual intercourse.

Gay/lesbian: When a man or woman is mainly sexually attracted to people of the same sex.

HIV: Human immunodeficiency virus – virus that causes AIDS. Can be transmitted through sex, as well as through blood and blood products. When the virus gets in to the bloodstream it begins to destroy the body's defence systems against disease. Even without treatment, people may look and feel healthy for many years after infection, but they can still spread the virus to others.

Keeping safe from harm: Providing children, young people and vulnerable people with information that enables them to protect themselves from harm.

Marriage: When a man and a woman have their relationship legally recognised.

Masturbation: Touching, rubbing or stroking your own or another sexual person's organs for pleasure. When two people do it together or to each other it's called mutual masturbation. Masturbation is safe, won't cause pregnancy (there is a small risk during mutual masturbation if the boy ejaculates very close to the girl's vagina) or transmit infection.

Oral sex: Arousal of the sexual organs of a partner using the mouth. Cannot lead to pregnancy but may carry infection risks if either partner is infected.

Orgasm: Sexual climax, also known as coming or cumming. In both men and women, orgasm is a series of intense muscular spasms in the genital area followed by muscular relaxation. In men, usually involves ejaculation.

Penis: Male sexual organ.

Period: Bleeding from the womb (uterus) out through the vagina if conception has not occurred. Most women have periods every 28 days or so, but some women have cycles that are longer or shorter, and this is normal.

Personal hygiene: Keeping your body and clothes clean.

Pregnancy: This means being pregnant, which is when an egg is fertilised by a sperm, and implants in the womb lining.

Puberty: Time of rapid physical and emotional change, usually between the ages of eight and 18. Advances at different rates in different people. Girls grow breasts

and begin menstruation. In boys, the testicles enlarge and the voice deepens. In both sexes, pubic hair develops around the genitals and hair grows under the arms. Spots may appear.

Sanitary products: Tampons or sanitary towels used by girls and women to absorb blood during a period.

Sexual abuse: When a person does something sexual to someone who has not given, or is not able to give, consent to sexual activity. This includes sexual touching, being forced or coerced into having sex, or being made to look at sexual pictures or videos.

Sexual intercourse: Usually refers to entry of the penis into the vagina or anus.

Sexually transmitted infection: Infections that can be passed from one person to another during sexual or intimate contact.

Vagina: The part of a woman's sexual organs that connects the uterus to the external genitals. Where the penis goes during sexual intercourse between a man and a woman.

Wet dreams: Ejaculation when boys or men are asleep.

Where babies come from: This is a term often used to refer to the process of sexual reproduction and pregnancy, especially in the context of explaining reproduction to young children.