Teacher and School Executive frequently asked questions

Questions

- Do teachers need to inform parents they are implementing sexuality or sexual health education or Child Protection Education with their class?

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The school has a responsibility to inform parents, prior to the occasion, of the specific details of the program, so that parents have time to exercise their rights of withdrawing their child from a particular session on certain controversial issues. In this regard, a parent's wish must be respected.


This should be applied to the introduction of external speakers on controversial issues and the study of controversial material to supplement curriculum programs. Where parents and carers indicate they wish to withdraw their child from a program it is useful to negotiate which parts of the program they are concerned about. Schools should implement a consultative process to ensure parents and carers have opportunity to participate in discussions on both curriculum content and teaching and learning materials where appropriate to ascertain whether parts of the program need to be modified.

There are many misconceptions about what students learn about and how students learn in sexuality and sexual health education. Communication with parents and carers assists the community to better understand the content and aims of the programs.

Establishing how parents and carers will be informed about programs and involved in consultation is a school-based decision.

- Does the Department of Education have guidelines and policy about relationships, sexuality and sexual health education?

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The Board of Studies, Teaching & Educational Standards NSW (BOSTES) is responsible for developing syllabuses to be taught in New South Wales schools, from Kindergarten through to Year 12. Sexuality and sexual health education forms part of the mandatory Personal Development, Health and Physical Education (PDHPE) key learning area.

According to BOSTES, syllabus content must be covered in each Stage of learning (e.g. Early Stage 1/ Kindergarten, Stage 1/ Year 1/2 through to Year 10). Sexuality and sexual health education is delivered in NSW schools in an age appropriate manner, guided by the K-6 and 7-10 PDHPE syllabuses. There
is no specific Department policy governing public schools on relationships, sexuality and sexual health education. The About sexuality and sexual health education in NSW government schools fact sheet provides clear advice on effective approaches and policy and legislation relevant to sexuality and sexual health education in NSW public schools.

The Principles of sexuality and sexual health education in NSW Government schools are evidence based and have been developed as part of the NSW Sexual Health in Schools project for use by principals and teachers within the NSW Department of Education. The Principles comprise a framework to guide the development of effective sexuality and sexual health education in NSW government school settings.

Individual schools are encouraged to develop school-specific guidelines to address a range of health-related issues. School guidelines/policy for relationships, sexuality and sexual health education should include areas such as professional learning for teachers, guidelines for external providers, learning resources and communication with parents.

More information can be found on the Guiding Principles section of the Teaching Sexual Health website.

How early should the names of body parts be introduced?

It is considered age appropriate and best practice to introduce the correct names of the body parts as early as kindergarten, including the reproductive and sexual parts such as penis, vulva, breast, testicles and bottom.

Knowing these names enables a child to communicate clearly if they need to get help; and in particular in cases of abuse or injury.

The classroom teacher should communicate with parents/caregivers with adequate notice to ensure they understand the concepts and proposed learning sequence their child will be participating in.

What happens if parents or caregivers request to withdraw students from relationships, sexuality and sexual health education?

Principals and teachers have a responsibility to inform parents, prior to the occasion, of the specific details of the program, so that parents have time to exercise their rights of withdrawing their child from a particular session on certain controversial issues. In this regard, a parent’s wish must be respected. Source: NSW Department of Education, Controversial Issues in Schools Policy Implementation Procedures.

Where parents and carers indicate they wish to withdraw their child from a program it is useful to negotiate which parts of the program they are concerned about. Teachers and Principals should implement a consultative process to ensure parents and carers have opportunity to participate in
discussions on both curriculum content and teaching and learning materials where appropriate to ascertain whether parts of the program need to be modified.

Teachers and Principals must ensure that reasonable efforts are made to provide alternative means for students who are withdrawn from lessons to achieve the same outcomes as other students. Parents must be advised that the student’s achievement and assessment may be adversely affected by withdrawal from particular classes.

What if a student discloses abuse or risk of harm?

Employees of the NSW Department of Education have responsibilities under the Children and Young Persons (Care and Protection) Act 1998 relating to the reporting of concerns about suspected risk of significant harm and risk of harm to children and young people to their principal or workplace manager.

The Mandatory Reporter Guide (MRG) can assist in making an informed decision regarding child protection concerns. If concerns about the safety, welfare or wellbeing of children or young people constitute risk of significant harm, principals must report these to the Child Protection Helpline on 133627.

The Child Wellbeing Unit can be contacted on 9269 9400 when staff are unclear about how to use the MRG, wish to get advice on the MRG or the MRG indicates to contact the Child Wellbeing Unit.

Students should be made aware at the beginning of educational programs that disclosures that indicate they may be at risk of harm will be reported to the school principal in all instances. This includes personal disclosures related to instances of abuse, sexual activity under the legal age of consent or drug use.

It is important to enable students to withdraw if they find issues personally confronting and to protect them from making harmful disclosures. Equally, it is important that teachers are prepared for issues that arise as a result of a student making a disclosure. Information on how to create a supportive learning environment and teaching strategies to protect students from making harmful public disclosures can be accessed on the Teaching Sexual Health website.

Can condoms be given out to high school students?

The NSW Department of Education does not support the distribution of condoms to students or the installation of condom vending machines in secondary schools.

Secondary school students have access to developmentally appropriate information on sexual health, including contraception. If appropriate, students may be referred to relevant health services.

In NSW public schools, sexuality and sexual health education should reflect
a philosophy where abstinence from sexual activity for school-aged students is the key focus. It should also emphasise a positive preventative approach, harm reduction and safer sex strategies without necessarily normalising sexual activity for school-aged students. Where appropriate, condoms may be used during a sexuality education or sexual health lesson on contraception. It is not, however, the school’s role to distribute condoms to students.

PDHPE provides students with the knowledge, understanding and skills required to make positive decisions about health, safety and wellbeing and develop and maintain respectful and healthy relationships.

PDHPE curriculum in NSW aims to assist students to abstain from or delay the debut of sexual relations, reduce the frequency of unprotected sexual activity, reduce the number of sexual partners and increase the use of protection against unintended pregnancy and sexually transmitted infections (STIs) during sexual intercourse.

Who can provide additional sexuality and sexual health education and information sessions for students?

Teachers and executive need to play a central role for programs and approaches to be sustainable and embedded within the school. Teachers are best placed to deliver programs that promote health, safety and wellbeing. Teachers know the curriculum, their students, their learning and support needs and their communities. The principal may choose to draw on community resources, guest speakers and sources of information and expertise to help support the school’s program.

Although external agencies, including guest speakers, can add interest, variation and relevance to school-based sexuality and sexual health education programs, this strategy should not be used in isolation but should complement other learning opportunities.

Use the Department’s Engaging external providers for curriculum implementation guidelines to guide decisions before considering the engagement of an external provider to support teaching and learning programs that address curriculum requirements in public schools.

Working in partnership with health and community services can increase students’ awareness of the range of services available and where to find them. This can assist in building students’ trust and confidence to access services and provide links between young people, the school and appropriate services. Community services can also be used to enhance staff knowledge and understanding of relevant contexts and consequently assist in building the capacity of teachers to deliver effective education programs.

What does sexuality education in primary schools include?

Sexuality education is part of the mandatory K-6 PDHPE syllabus and includes links to relationships, personal identity and the body. Content must
be covered in each stage of learning through the K-6 PDHPE syllabus.

In sexuality education, student learning is focused on learning about the emotional, social and physical aspects of growing up, relationships, identity, reproduction, diversity, gender, human sexuality and sexual health.

It is important to design sexuality education programs that highlight and value the uniqueness of each individual and incorporate activities that will enhance self-esteem, body image and self-acceptance. Students need to be given opportunities to share their thoughts, feelings and values as individuals and in group situations.

Through the K-6 PDHPE syllabus, sexuality education is comprised of various content strands. Although the Growth and Development strand contains the bulk of human sexuality content, teachers should integrate this strand with other content strands to create meaningful sexuality education programs for students. The image shows the interaction on these strands and the overlap with Child Protection Education with sexuality education.

Programming decisions are best made by individual schools and are dependent upon the school’s K–6 PDHPE scope and sequence and the mapping of outcomes across the Stages.