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ABOUT THIS RESOURCE

Curriculum for Excellence has an important role to play in promoting the health and wellbeing of children and young people and all of those in the educational communities to which they belong.

Learning through health and wellbeing ensures that children and young people are able to:

- make informed decisions in order to improve their mental, emotional, social and physical wellbeing
- experience challenge and enjoyment
- experience positive aspects of healthy living and activity for themselves
- apply their mental, emotional, social and physical skills to pursue a healthy lifestyle
- make a successful move to the next stage of education or work
- establish a pattern of health and wellbeing which will be sustained into adult life, and which will help to promote the health and wellbeing of the next generation of Scottish children

CfE Health and Wellbeing Principles and Practice - Page 1

The Experiences and Outcomes (Es & Os) as contained in a Curriculum for Excellence reflect a holistic approach to promoting the health and wellbeing of all children. The Relationships, Sexual Health and Parenthood (RSHP) strand is no different. To ensure that all learners receive relevant, enjoyable and active learning experiences the Health and Wellbeing Es & Os are designed to encourage links with all other areas of the curriculum. This framework and its supporting materials are designed to help support schools in delivering RSHP in a **planned** and **progressive** manner. The creation of this framework, supported by Education Scotland, builds on existing good relationships between Angus, Dundee City, Perth and Kinross Councils and NHS Tayside and aims to promote and enhance existing and future partnership working. It has distilled the existing development work of the three Local Authorities, to create an

inter-authority collegiate approach to coherent and progressive planning. This will provide opportunities for each authority to further develop moderation and quality assurance processes.

As well as historic links, NHS Tayside unites Angus, Dundee City and Perth and Kinross Councils with a focused approach to addressing Health and Wellbeing issues and developments. NHS Tayside aims to support education to improve the health and wellbeing of children and young people in Tayside by offering structured programmes of support. With this framework learners have an opportunity to develop a shared learning experience within RSHP that will support them at times of transition between stages, schools, clusters and the three Local Authorities. Planning learning through this framework takes into account the wide range of support, resources and expertise of NHS Tayside and by taking such a collaborative approach with key partners to the provision of RSHP education it enhances the outcomes for all learners.

The framework is aligned to the **Professional Learning Resource: Assessing Progress and Achievement in Health and Wellbeing** from Education Scotland, as well as the current **National Guidance on Sex Education in Scottish Schools (2001)** provided by the Scottish Executive.

National and local research and recommendations continuously promote and support the need for a consistent and relevant approach to RSHP education. The views of young people, parents and health professionals have been widely collated in recent years and present a clear mandate for a revision of current RSHP education that addresses the needs of children and young people in Tayside.

The National Picture

Evidence consistently shows that high quality RSHP can lead to young people delaying sexual activity and reducing pregnancy rates and sexually transmitted infections. Research also shows that effective RSHP should be initiated early, before patterns of sexual behaviour are established. However, RSHP provision in schools is variable in content and quality. Some young people report that the RSHP they receive is too little, too late, too biological, and they would like to learn more about emotions and relationships.

Friends and school rank first and second as primary sources of information on sexual matters for both boys and girls. Boys are more likely to source information on sexual matters from the internet and less likely to get information from schools.

HBSC Survey in Scotland 2010

ChildLine Scotland (CLS) funded a research study that examined the nature of calls to CLS over a two year period (2005 - 2006). The results highlighted that 42% of all calls were related to concerns regarding the Facts of Life and many calls involved seeking explanation or advice about puberty and development.

Recommendations resulting from this research highlighted the need to:

- meet children and young people's on-going needs for information, learning and support
- provide needs-based sex and relationships education continuously throughout the years in education
- alleviate anxieties about differences and promote children and young people's acceptance of self and others
- provide a discursive sexual health curriculum essential to challenging young people's conceptions of normality

The recent Health and Sport committee report on teenage pregnancy (2013) further supports these recommendations.

Teenage Pregnancy Inquiry 2013

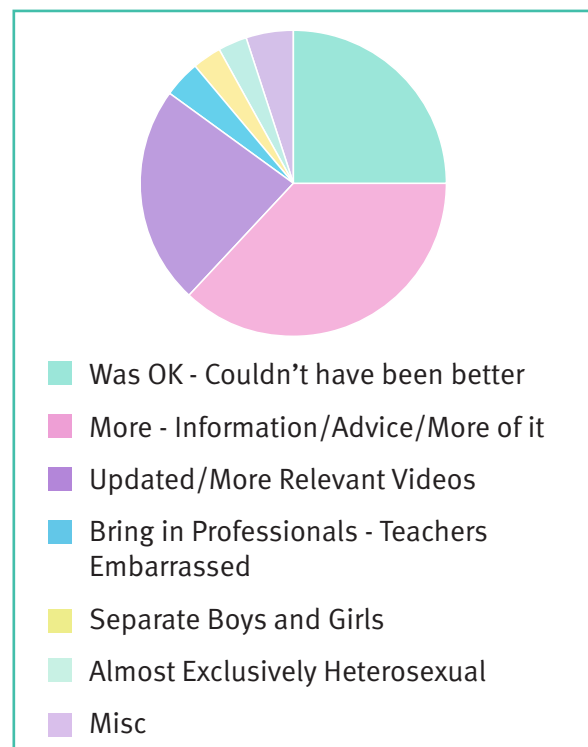
It is clear from national research that a number of young people find it difficult to communicate about sex and relationships. In many cases young people are simply unequipped with the vocabulary to talk openly about sex and relationships and some struggle to articulate the details of sex even though they may have the knowledge.

The Local Picture

In 2009 young people from across Tayside, supported by NHS colleagues and Youth Work partners from each local authority, came together to conduct a consultation on young people's Mental Health and Sexual Health. The findings of this consultation, based on a total of 994 respondents, were published in the 2010 Youth Talkin' Health report.

85% of respondents said they had received sex education while at school, with a significant minority rating the quality of sex education as being 'Not Too Good' or 'Bad'. Respondents were also asked how they thought sex education could be improved:

How could Sex Education have been better



The recommendations from the Youth Talkin' Health report were strikingly similar to the national recommendations reported earlier. The report highlighted a need for:

- high quality and consistent sexual health education to be provided to all school pupils in all schools by those properly trained to deliver it
- sexual health education which is inclusive and uses relevant material as standard, ensuring there is no bias.

HOW TO USE THIS RESOURCE

RSHP focused work is a lifelong process whereby learners develop their social skills and their understanding of how to maintain positive relationships with a variety of people. They develop an awareness of how thoughts, feelings, values and beliefs influence decisions about relationships and sexual health. They understand the complex roles and responsibilities of being a parent or carer.

RSHP should:

- be viewed as one element of health education and set within the wider context of health promotion and the health promoting ethos of the school
- contribute to the physical, emotional, moral and spiritual development of all learners within the context of today's society
- focus on sexual health, the complex nature of relationships and the impact of parenthood
- reflect the cultural, ethnic and religious influences within the home, the school and the community
- be non-discriminatory and sensitive to the diverse backgrounds and needs of all learners
- start informally at an early stage with parents and carers and continue through to adulthood both within the home and at all stages of school life

This framework has been informed by these values and groups together all RSHP Es & Os under four key themes:

- Relationships
- Sexual health
- Parenthood
- Safe choices (3rd level/4th level/Senior Phase)

Intended learning, including some from the Angus Council repacked outcomes, has been grouped together to inform practitioners' planning. These have been organised by level and by theme and are intended to be flexible in their use and can be used to support the delivery of RSHP either within or outwith context.

The planning structure reflects the principles set out in the NAR flowchart¹. Teachers are encouraged to use the Level plans to generate learning experiences (lessons) which are appropriate to their learners, as well as to identify significant aspects of learning covered at each stage to allow for clear progression. An example of how this may be taken forward has been exemplified in Appendix 2².

Resources that promote inclusion and equality have been identified to further support planning under each theme. This includes specific resources for learners with additional support needs.

Denominational Schools

Denominational schools should continue to make links with the RME Es and Os as appropriate. Further guidance and support in this area will be distributed to schools in due course.

Assessing Progress and Achievement

The publication of Professional Learning Resource: Assessing Progress and Achievement in Health and Wellbeing by Education Scotland outlines that the focus for moderation is primarily on evaluating the learner's progress.

It would seem counterproductive to designate a particular level for a learner's achievement in Health and Wellbeing, where the learner's development and progress is dependent on a number of factors and life circumstances which can change quickly.

Education Scotland Assessing Progress in Health and Wellbeing P1

Pupils can evidence learning through a number of success criterion as suggested within the framework. These should contribute to learning conversations with learners and help inform their next steps in learning.

Skills for Learning, Life and Work

Whilst there are no explicit links to skills highlighted within the framework, teachers must consider planning for the development of skills for learning, life and work. Learners should be engaged in this process and be aware of the skills they are developing. Each Local Authority has a framework for skills for learning, life and work which should be referred to for guidance when planning.

Suggested Vocabulary

The suggested vocabulary included in the framework has been informed by NHS recommendations, national guidance and aspects of significant learning within the Es and Os. The inclusion of suggested vocabulary is intended to promote professional discussion, ensure coherence and progression and equip learners with the language to engage in relevant, age appropriate, learning conversations.

Please note that the suggested vocabulary is not mandatory and that good practice would involve professional dialogue and adaptation to address local needs and local concerns. There may also be an opportunity for schools to share the suggested vocabulary with parents and carers.

Suggested Learning Experiences

The suggested learning experiences have been included following consultation with current practitioners from each of the three Local Authorities who have a combined experience of delivering RSHP at all levels. Good practice indicates that teacher judgement and professional dialogue should inform the learning experiences that occur in our classrooms. The suggested experiences outlined in the plans are designed to act as a stimulus and are not intended to be prescriptive.

Monitoring Progression through the Level

To ensure progression and coherence professional dialogue at stage handovers is crucial. This will avoid duplication of learning and will promote the coverage of a broader spectrum of intended learning. Very good practice could involve professional dialogue between stage providers at the planning stage and again at points of transition. An example of how this could be captured and monitored is provided in Appendix 3 ¹.

Cross Curricular Elements

We acknowledge that planning for any curricular area should take into consideration cross curricular links and must be cogniscent of cross cutting themes. These are not explicitly highlighted on the plans within this framework, however, possible links have been identified and can be found for each theme within the framework.

On Track with Learning

The intended learning in this framework has been taken from the Angus Council repacked outcomes. There is an expectation that practitioners who work within Angus Council would use this framework to inform their electronic planning in On Track With Learning(OTWL).

¹Appendix 3 - RSHP Stage Handover Sheet

INVOLVING PARENTS

As with any approach to education, this is not done in isolation from the positive work happening in families across the country. Parents and carers play an active part in their child's/children's education and we continue to encourage this. Continued focus on relationships and sexual health requires the proactive support from parents and carers. Talking about relationships from an early age can contribute to delaying first sexual experience and help children and young people to make safer and more responsible decisions.

Parental involvement and support is vital to the success of the RSHP programme.

It is often hard to relate to these issues both from a professional and parental perspective, when the age focus for this work starts at pre-school. We would urge establishments, parents and carers to see the links between what we teach children of pre-school age and the responsible citizens we want to support and encourage them to become.

Establishments should:

- share intended learning with parents and carers
- have agreed procedures for consulting and taking account of parents/carers views
- work in partnership with parents and carers
- have simple, direct procedures in place for parents and carers to raise concerns
- respect the cultural, ethnic and religious environment of the home

There are opportunities for parents and carers to attend a 'Speakeasy' course. This is an eight week course that offers a flexible and relaxed way to gain greater confidence in supporting sex and relationships education at home.

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