

Sex and Relationships Policy

Ysgol Bro Dinefwr – Document Control	
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Sex and Relationships Policy

Purpose of Sex and Relationships Education

At Ysgol Bro Dinefwr we believe that Sex and Relationships Education (SRE) is an educational entitlement of all pupils and is an essential part of each pupil's development from adolescence into adulthood.

The objective of sex and relationships education (SRE) is to help and support pupils through their physical, emotional, moral and spiritual development. Effective SRE is also essential if young people are to make responsible and well-informed decisions about their lives.

SRE is about understanding the importance of stable and loving personal relationships, respect, love, care, and the building of successful relationships with friendship groups and the wider community.

SRE is also about gaining knowledge and awareness of sex, sexuality and sexual health. Pupils should develop their understanding of human sexuality, learn about the benefits of delaying sexual activity, and how to obtain appropriate advice on sexual health. Such knowledge offers young people protection and should help to prevent confusion, unhappiness, unnecessary shame and guilt.

A successful programme will help pupils learn to respect themselves and others and move with confidence from childhood through adolescence into adulthood. It should prepare pupils for the opportunities, responsibilities and experiences of adult life, and enable them to develop considered attitudes, values and skills which influence the way they behave.

Aims and Objectives:

At Ysgol Bro Dinefwr, Sex and Relationships education will be taught within the context of the PSE framework and the specific objectives of SRE at the school will be to:

1. Provide information appropriate to their ages and maturity about growth and development, puberty and human reproduction to all our pupils regardless of race, disability or gender.
2. Develop responsible attitudes to their own and others' health and wellbeing.
3. Help them to develop an understanding of their own and others' feelings and how they can affect these.
4. Address concerns and misunderstandings children may have about relationships, from the media or their peers
5. Guide and protect them in managing unwanted sexual experiences including in the use of the internet, pressure from peers or other harassment (including learning about where to get help).
6. Help pupils learn about friendships, families and other relationships and to value and respect friends and family as a source of love and affection.
7. Develop their understanding of the law around sexual activity, appropriate to their age.
8. Put all their learning about relationships and sexuality in the context of the values

- shared by our community.
9. Help children learn to take increasing responsibility for their own decisions and actions and have confidence and self-esteem.
 10. Learn personal hygiene routines and take increasing responsibility for their physical wellbeing as they approach adolescence.
 11. Begin to address and challenge stereotyping.
 12. Provide an atmosphere where children feel safe to enquire and learn about sensitive issues with adults whom they can trust.
 13. Meet parents' concerns and wishes about knowledge, attitudes and skills in our programme of Sex and Relationships Education.
 14. Help pupils understand the place of sexual activity in human relationships; the significance of marriage for family life and the bringing up of children; the diversity of a range of mutually supportive stable relationships outside of marriage.
 15. Provide opportunities for open discussion of sensitive issues in a supportive and familiar environment in order to help pupils make healthy choices.
 16. Make connections for our pupils with appropriate outside agencies such as GP's, school nurse and sexual health services.

Content and delivery of Sex and Relationships Education

Sex and Relationships Education provides knowledge and encourages the acquisition of skills and attitudes which help pupils develop mutually supportive relationships with friends, family and sexual partners, and manage their adult lives in a responsible and healthy way.

Sex Education forms part of the Personal and Social Education programme for every year group. Form tutors will provide basic background work around feelings and emotions, understanding individual and cultural differences, social and personal attitudes and values. Knowledge and understanding of sexual health issues will be provided in partnership with health professionals and will be planned as part of the overall programme. Teachers of all subjects have a responsibility to understand what is taught and how and to support the work through their own subject work in line with this policy.

Sex and Relationships Education is delivered through the compulsory National Curriculum Science curriculum and the PSE curriculum. SRE is co-coordinated by the PSE Coordinator who is responsible for planning, implementation and review of the programme.

In **Science** (Interdependence of Organisms) pupils will use and develop their skills, knowledge and understanding by investigating how humans are independent yet rely on other organisms for survival, applying this to life in countries with different levels of economic development. More specifically pupils will learn about:

Key Stage 3:

- The basic structure and function of some cells, tissues, organs and organ systems and how they support vital life processes
- The beneficial and detrimental effects of some drugs on the organs of the human body and other consequences of their use
- Applications of science, medicine and technology that are used to improve health and the quality of life including those in countries with different levels of

economic development

Key Stage 4:

- The ways in which organisms' functions are related to the genes in their cells
- Chemical and electrical changes enable body systems to respond to internal and external changes, in order to maintain the body in an optimal state
- Human health is affected by a range of environmental and inherited factors, by the use and misuse of drugs and by medical treatments

PSE Key Stage 3- Learners should be given opportunities to:

Skills	Range
<p>Thinking</p> <ul style="list-style-type: none"> • Consider other's views to inform opinions and make informed decisions and choices effectively <p>Communication</p> <ul style="list-style-type: none"> • Listen attentively in different situations and respond appropriately • Communicate confidently personal feelings and views through a range of appropriate methods • Express opinions and justify a standpoint • Take part in debates and vote on issues <p>ICT</p> <ul style="list-style-type: none"> • Use ICT safely and responsibly, following safe practices <p>Working with others</p> <ul style="list-style-type: none"> • Make and maintain friendships, and begin to negotiate behaviour in personal relationships • Be assertive and resist unwanted peer pressure • Empathise with others' experiences, feelings and actions • Adapt to new situations • Access an appropriate range of sources for help, support and advice 	<p>Health and Emotional well-being</p> <ul style="list-style-type: none"> • display a responsible attitude towards keeping the mind and body safe and healthy • develop positive attitudes towards themselves and others • understand the law relating to aspects of sexual behaviour • understand about contraception, sexually transmitted infections and HIV within the context of relationships • understand the features of safe and potentially abusive relationships • understand the role of marriage, the importance of stable family relationships and the responsibilities of parents • understand the range of emotions they experience and how to develop strategies for coping with negative feelings • understand the benefits of accessing different sources of information, support and advice <p>Moral and spiritual development</p> <ul style="list-style-type: none"> • develop an insight into their values • show sensitivity to the values of others • understand what they believe to be right and wrong actions and the moral dilemmas involved in life situations

PSE Key Stage 4- Learners should be given opportunities to:

Skills	Range
<p>Thinking</p> <ul style="list-style-type: none"> take different perspectives into account when making informed decisions and choices effectively <p>Communication</p> <ul style="list-style-type: none"> listen perceptively in a range of situations and respond appropriately. communicate personal feelings and views effectively in a wide range of situations through a range of appropriate methods appreciate, reflect on and critically evaluate other points of view <p>ICT</p> <ul style="list-style-type: none"> use ICT safely, responsibly and independently, complying with data protection regulations and following safe practices <p>Working with others</p> <ul style="list-style-type: none"> make and maintain friendships and negotiate behaviour effectively in relationships. adapt to changing situations evaluate and access a range of local and national sources of information, support and advice confidently 	<p>Health and Emotional well-being</p> <ul style="list-style-type: none"> accept personal responsibility for keeping the mind and body safe and healthy develop a responsible attitude towards personal relationships understand the short- and longer-term consequences when making decisions about personal health understand the range of sexual attitudes, relationships and behaviours in society understand the importance of sexual health and the risks involved in sexual activity including potential sexual exploitation understand the features of effective parenthood and the effect of loss and change in relationships understand the statutory and voluntary organisations which support health and emotional well-being know how to access professional health advice and personal support with confidence <p>Moral and spiritual development</p> <ul style="list-style-type: none"> how beliefs and values affect personal identity and lifestyle the factors involved in making moral judgements the range of values and principles by which people live

Planning the work:

All teaching about Sex and Relationships Education will be provided through our PSE programme and by specialist Health Professionals and integrated into our day to day planning. We shall follow the recommendations of the PSE Framework for Wales and the guidance of the National Assembly for Wales document 'Sex and Relationships Education in Schools' Circular 019/2010.

The programme content will be recorded as part of PSE through our normal planning cycle, beginning when children first come into school and progressing through all ages with materials and content suited to pupils' needs.

Answering pupils' questions/dealing with sensitive issues

At Ysgol Bro Dinefwr, personal beliefs and attitudes of teachers will not influence the teaching of SRE.

It is our policy that children are encouraged to ask questions about all aspects of their education. When teachers are dealing with questions about Sex and Relationships, they will use their professional judgement in providing answers which are appropriate to the age and maturity of the child or of other children who may be listening. There may be times when teachers feel that children should be advised to ask another adult, probably a parent, and if this happens, teachers will try to inform parents/carers if the child is willing, or check with them that the issue has been dealt with.

As part of our programme of Sex and Relationships Education we will talk to pupils about several sensitive issues. If parents have any concerns about these issues, it is our policy to discuss our approach and to reassure parents that all issues are raised in a context of loving and caring, of respect for ourselves and others and for the variety of sexual relationships including marriage which young people will encounter in their adult lives.

In all National Curriculum subjects, occasions may arise from apparently unrelated topics when moral and ethical issues are addressed. As long as any discussion takes place within the context of the subject, it will not be considered to be part of the sex and relationships programme and therefore will not be subject to the parental right of withdrawal.

Methodology and Approach

At Ysgol Bro Dinefwr, we are keen that pupils develop lifelong learning skills for the 21st Century and will ensure that SRE is taught as part of an integrated PSE programme rather than as a 'one-off' individual session.

Teaching Strategies

A variety of approaches will be used in the teaching of sex and relationships education including activities, games, discussion, and reflecting on what has been learnt.

There are several teaching strategies that support our teachers and trained peer mentors in the delivery of SRE:

- Establishing 'ground rules' with the pupils
- Using 'distancing' techniques
- Knowing how to deal with unexpected questions or comments from pupils
- Using discussion, active learning methods, and appropriate materials (such as quizzes, discussion, games, etc.)
- Encouraging reflection

Pupil Groupings

Pupils will usually be taught in mixed ability and gender groups.

Resources:

Materials

A wide range of teaching resources is available. It is our policy to use high quality resources that are up to date, suitable for both boys and girls, suited to the age and maturity of our pupils and wherever possible available bilingually. Parents/carers may contact the coordinator to view resource material.

Staff

Areas of the PSE curriculum are delivered by tutors, specialist teachers and visitors from local health agencies. Specialist teachers/form tutors/ teach units in Year 7, Year 8, Year 9, Year 10 and Year 11. All staff and visitors are expected to teach within the school's value framework of Guiding Principles and the SRE policy. Teachers and peer mentors also work within the guidelines of other school policies which have relevance to SRE, in particular, Equal Opportunities, Anti-Bullying, and Child Protection.

Role of external providers/working with the wider community

We welcome the input of any outside agencies able to support us in meeting our objectives. We particularly welcome the input of the School Nurse and Specialist Sexual Health Service to help us develop resources and to talk to pupils about methods of contraception and advice on access to local and national sources of information. We shall follow the good practice guide lines in the PSE Policy when involving visitors in our programme (Appendix 1).

Specific Issues:

Confidentiality and Advice

It may happen that pupils wish to disclose information about their actual or intended sexual behaviour and/or seek advice from members of school staff. 'Staff' will be taken to include teachers, support staff, and any other adult who is supporting the school in delivery of its curriculum and the care of pupils. On certain occasions, particularly where there may be issues of child protection, the school may intervene based on other received information, for example, from other pupils.

We will make it clear to pupils that some information cannot be kept confidential, and that if certain disclosures are made, we may have to involve outside agencies. This will be particularly relevant in cases where pupils are engaging in or intending to engage in sexual activity below the legal age of consent (16) or in any case where the member of staff and the Head Teacher may judge that the pupil is at risk. Pupils will be offered sensitive and appropriate support in the event of such disclosures.

Whilst it is the school's policy to inform and involve parents/carers, there is no legal responsibility for teachers to do so if this is against the express wishes of the pupil concerned. The Head will retain the ultimate decision as to the informing of parents/carers. The following procedures will be adhered to by all members of school staff.

1. Whenever possible, conversations of this nature will be held at a place and time which gives the pupil the opportunity to talk calmly and with security to a trusted adult.
2. Pupils will always be advised of the following:
 - confidentiality cannot be guaranteed
 - they will be encouraged to share the information disclosed with parent/carer or another trusted adult and support will be offered to help them do so. If a pupil discloses a pregnancy or asks for advice on contraception, the school will encourage the pupil to talk to their parents/carers first and will also give the pupil information about the most appropriate professional/health agency. Support will be given if the pupil needs help in telling their parents/carers
 - they will be informed themselves before parents/carers are contacted
 - the Head Teacher will be informed of any such incident
3. Where there is reasonable suspicion of abuse and/or neglect, the school's Child Protection policy will be put into action.

HIV/AIDS

No pupil or parent should need to disclose if a pupil is HIV positive provided the simple hygiene rules are properly followed. The school acknowledges that the risk of infection by ordinary germs such as the common cold is far greater than the risk of them infecting others with HIV. Furthermore, the social implications of their HIV status being known to others would be detrimental both to the individual pupil and to the school.

Family life

The value of family life is an integral feature of SRE and is approached through discussion and reflection of the qualities and relationships between family group, with emphasis on respect, trust, caring, stability and support.

Sensitive Issues

As part of SRE and Religious education, sensitive issues of contraception, abortion, safer sex and HIV/AIDS and other sexually transmitted infections, and sexuality are addressed. Facts are presented in an objective and balanced way, with pupils being encouraged to consider their attitudes and values within the approved values framework. They will be made aware of the differences between fact and opinion.

Working with parents/guardians/carers

Parents have an important role to play in terms of delivering messages about relationships

and sex. Parents are the key people in teaching their children about sex and relationships and maintaining the culture and ethos of the family. As a result, the school sees SRE as a shared responsibility and seeks to keep parents informed about the policy, programme of study and resources. The school welcomes any comments from parents that are aimed at improving the school's provision in this area.

Parental right to withdraw

Parents have the right to withdraw their child from SRE lessons. The school must be informed in writing by the parents, if they wish to exercise this right.

Parents cannot withdraw their children from aspects of SRE which appear as part of the National Curriculum Science orders (See above).

Role of Subject Leader/PSE Co-ordinator

The role of the subject leader with the responsibility of SRE will be specifically to:

- Co-ordinate the formulation of the school's SRE policy by involving all relevant stakeholders
- Inform all staff and adults involved with the delivery of SRE within the school, of the contents of the policy and its implications to them as providers
- Liaise, monitor and evaluate the scheme of work in conjunction with other subject leaders to ensure that all statutory requirements are met
- Monitor and evaluate the scheme of work and the suitability of resources
- Review the policy and make appropriate changes and amendments at least every three years
- Assess the CPD needs of school staff involved with the programme and seek to respond to these needs
- Liaise with outside agencies and co-ordinate their involvement with SRE programme

Training provision

All professional development needs will be analysed in the context of the School Development Plan.

Liaison between Key Stages

The school makes appropriate links and liaises with the Primary/Secondary school to ensure continuity and development from Key Stage 2 to Key Stage 3 ensuring effectiveness of the provision.

Links with other Policies and Procedures

All providers of SRE at Ysgol Bro Dinefwr are made aware of the school's policies regarding:

- PSE
- Equal Opportunities

- Anti-bullying
- Drugs and Alcohol
- E Safety

All providers are conversant with:

- Child Protection (All Wales Child Protection Procedures and LEA County Protocol)
- Locally agreed syllabus for RE

A copy of all the above will be available from the school office/ Head Teacher.

Process - involving all stakeholders

- The policy and the scheme of work form part of the school's commitment to PSE education and their work towards the Healthy School's award
- The policy and scheme of work were formulated in line with the Sex and Relationships Education in Schools National Assembly for Wales Circular No: 019/2010, Personal and Social Education Framework for 7-19 year olds in Wales 2008, Skills Framework for 3-19 year olds in Wales 2008, Science in the National Curriculum for Wales, Estyn Sex and Relationships Guidance March 2007
- An audit of the children's views with respect to the current scheme of work should be sought and considered when the SRE policy is formulated or reviewed.

Procedures for Monitoring and Evaluation

The SRE co-ordinator will be responsible for monitoring and evaluating the SRE programme, whilst implementation of this policy will be monitored by the PSE Coordinator, Head Teacher and members of the Governing body.

The following people will be consulted when the policy is reviewed:

- Parents
- Staff
- Pupils
- Governors
- Health Professionals and Outside Agencies (including LEA)

Appendix 1

Checklist: The role of visitors in PSE

Planning points	
The school and the visitor have agreed the aims, content and approach of inputs by the visitor.	
The school has:	
checked that the work of the agency or visitor is known to them and considered appropriate in respect of safeguarding /child protection procedures.	
made the visitor aware of and familiar with any relevant school policies.	
planned for the visitor to be supervised/actively supported by a teacher at all times throughout the visit.	
explained how the visit fits into the PSE programme e.g. any preparatory work/follow up work to be done.	
provided information on:	
<ul style="list-style-type: none"> • the number of sessions expected 	
<ul style="list-style-type: none"> • the age of the learners in each session 	
<ul style="list-style-type: none"> • the number of learners in each session(s) 	
<ul style="list-style-type: none"> • any additional learning needs of learners 	
The following have been agreed:	
<ul style="list-style-type: none"> • the date and time of the visit 	
<ul style="list-style-type: none"> • where the speaker will be met, at what time and by who 	
<ul style="list-style-type: none"> • the name of the class teacher(s) who will be present at the session(s) 	
<ul style="list-style-type: none"> • where the session(s) will take place 	
<ul style="list-style-type: none"> • the number of sessions, timings and durations for each 	
<ul style="list-style-type: none"> • relevant school timings e.g. registration, assembly, breaks, lunch etc. 	
<ul style="list-style-type: none"> • what school resources are required by the speaker 	
<ul style="list-style-type: none"> • where resources can be accessed. e.g. video, TV, DVD player 	
<ul style="list-style-type: none"> • what resources the speaker will provide 	
<ul style="list-style-type: none"> • arrangements for collecting feedback from the session(s) • from learners • from teaching staff 	
<ul style="list-style-type: none"> • arrangements for jointly evaluating the session(s) 	
Signed: School	Visitor
Date:	

SRE Pupil Audit

What kind of learning activities should be used in Sex and Relationships Education? Choose 10 activities and number in order of importance (1 most important, 10 least important). You may add some of your own ideas if you wish.

Brainstorming		Scenarios	
Continuum		Debate	
Discussion		DVD/film	
Quizzes		Problem pages	
Role-play		Storytelling using photos or magazine cuttings	
Demonstrations e.g. condom		Using worksheets	
Textbooks		Junk modelling	
Peer education (older pupils supporting younger pupils)			

What aspects do you think should be taught to year 8 pupils (please rank in preferred order 1 being most important and feel free to list topics that you feel should be taught).

Relationships		Anatomy 3D modelling	
Puberty emotional and physical aspects		Relationships	
Sexual discrimination/ stereotyping		Contraception and access to sexual health services	
Sexually Transmitted Infections (STIs)		Homophobia	

What is your opinion about the SRE programme in your school? In which way (if any) could it be improved?

Useful Information

Sex and the Law - with grateful thanks to the Family Planning Organisation for their advice and support.

AGE OF CONSENT

In England, Scotland and Wales the age of consent is 16 for heterosexual, gay and lesbian relationships is 16 . In Northern Ireland it is 17.

A young person who is under 18 having sex with someone under 16 may be committing a sexual offence under the Sexual Offences Act 2003

The age of consent remains at 16. It is not intended that the law should be used to prosecute mutually agreed teenage sexual activity between two young people of a similar age, unless it involves abuse or exploitation.

Where the two parties are close in age, and the sexual activity is mutually agreed a prosecution may be less likely to be in the public interest than if one party is much older than the other. Where both parties are particularly young, for example, under 13, it may be more appropriate to draw the children to the attention of the Social Services rather than to pursue a prosecution. However, such decisions are a matter for the CPS, and need to be considered on a case by case basis.

The aim of the law is to protect the safety and rights of young people and make it easier to prosecute people who pressure or force others into having sex they don't want. Forcing someone to have sex is a crime. (TPU and Home Office Guidance.)

CONTRACEPTION

In 1986 guidelines were issued by Lord Fraser following the House of Lords' ruling in the case of Victoria Gillick v West Norfolk and Wisbech Area Health Authority. These guidelines are known as the Fraser guidelines and apply to doctors in England and Wales.

The Fraser Guidelines specifically refer to contraception, but the principles also apply to other treatments, including abortion. They refer to doctors but also apply equally to other health professionals in England & Wales. Provided the health professional is satisfied that the young person is competent to understand fully the implications of any treatment and to make a choice of the treatment proposed. The health professional must establish that all the following criteria are met:

- the young person understands the health professional's advice;
- the health professional cannot persuade the young person to inform his or her parents to allow the doctor to inform the parents that he or she is seeking contraceptive advice;
- the young person is very likely to begin to continue having intercourse with or

without contraceptive treatment;

- unless he or she receives contraceptive advice or treatment, the young person's physical or mental health or both are likely to suffer;
- the young person's best interests require the health professional to give contraceptive advice, treatment or both without parental consent.

ABORTION

In England, Scotland and Wales legal termination of a pregnancy may be carried out provided that two registered medical practitioners agree the following criteria:

The pregnancy has not exceeded 24 weeks and the continuation of pregnancy would harm the women's mental or physical health more than having an abortion, or the health of other existing children in the family.

With no limit on time, the abortion is necessary to save the women's life, or to prevent serious permanent harm to her mental or physical health.

With no limit on time, there is a high risk that the baby would suffer from physical or mental abnormalities.

(1967 Abortion Act amended by the 1990 Human Fertilisation and Embryology Act).

A young woman under 16 may consent to an abortion without parental knowledge if both the doctors concerned agree that she has enough maturity and understanding to appreciate what is involved (Fraser guidelines).

In practice most doctors require the consent of a parent or other responsible adult before any procedure is performed.

GENITOURINARY MEDICINE

The 1974 Venereal Diseases Regulations has established that information acquired through a medical consultation, or any indication that a consultation took place, is completely confidential.

In August 2006, the Department of Health published a consultation on the Regulations. The consultation closed at the end of October 2006. At the time of writing, no announcement has been made about any changes to the Regulations as a result of the consultation.

Patients are not obliged to give their name and can register at the clinic giving an alternative name or number. No information is given to a doctor or to the hospital nursing staff without the consent of the patient. Patients can refer themselves and, in most clinics, an appointment is not necessary.

PEOPLE WITH LEARNING DIFFICULTIES

Under the Sexual Offences Act 2003 is it an offence for a person to have sexual intercourse with someone with a learning disability who cannot consent

People with Learning Disabilities:

The SOA 2003 refers to 'people with a mental disorder' the definition of which is:

"...mental illness, arrested or incomplete development of mind, psychopathic disorder and any other disorder or disability of mind."

*** impeding choice – this means the mental disorder impedes the choice of the person**

The SOA 2003 makes all offences genderless (apart from rape) so whereas previously men with learning disabilities were offered very little protection under the law they are now protected the same as women.

This set of laws (in the question) relate to a range of people with a learning disability. They provide protection for those who may have the capacity but because of their mental disorder in the circumstances of this case are unable to refuse and those who cannot communicate their decision

If a man has sexual intercourse with a woman or a man with no capacity to consent, he is committing rape. Vice versa and a woman could be charged with 'Causing a Person to engage in sexual activity without consent'.

In practice, prosecutions for having sexual intercourse with someone who has a mental disorder are rare, for several reasons, including that it may be difficult for the lay person to recognise the degree of impairment of intelligence and social functioning which someone has. In these offences (and the offences which deal with inducements, threats and deceptions) there is an exception but only if the defendant can prove that they did not know that the person had a mental disorder, could not reasonably be expected to know this information and does not know that this would make it likely that the person would be unable to refuse.

Familial Offences/ Incest

Section 26: Inciting a child family member to engage in sexual activity is an offence in the Sexual Offences Act 2003.

It is an offence for a person intentionally to incite a child family member (defined in section 27) aged under 18 either to touch A or to allow himself to be touched by A, where the touching is sexual. The meaning of touching covers all forms of physical contact including sexual intercourse. Whether or not the child consented to the incitement, or the activity being incited is irrelevant.

Family relationships are defined as: parent, grandparent, brother, sister, half-brother,

half-sister, aunt or uncle, is or has been a foster parent.

Adoptive parents fall into this category as an adoptive child is the child of the adoptive parents and not the biological parents. Adoptive relationships are therefore covered by this offence.

Foster parents can commit this offence for as long as the victim is under 18. So, for example even where A is no longer a child's foster parent, A will commit an offence by having sex with that child while the child is under 18.

Additionally if the person carrying out the offence lives, or has lived, in the same household as the child or is, or has been, regularly involved in caring for, training or supervising or being in sole charge of the child then they can be covered by this offence as well. This includes cousins, stepsisters, stepbrothers and stepparents.

PORNOGRAPHY

If a person is 17 it is illegal for them to pose for commercial pornographic pictures, they must be 18

Owning pornography and showing adults pornography is legal, if it is legal pornography.

Owning pornography showing children is illegal. Existing provisions are contained in the Protection of Children Act 1978 (PCA 1978) and the Criminal Justice Act 1988 (CJA 1988). The SOA 2003 amends both acts.

Provisions from these acts which have been retained are that it is illegal to:

- Take, allow to take, or make any indecent photograph or pseudo photograph of a child
- Distribute or show such photographs
- Have these photographs in your possession with a view to them being shown or distributed
- Publish or cause to be published anything advertising the distribution of these images

A pseudo-photograph is 'an image, whether made by computer graphics or otherwise howsoever which appears to be a photograph.

This provision also applies to downloading pornographic material from the Internet, since such computer-generated images are now regarded as photographs by virtue of s84(3)b of the **Criminal Justice and Public Order Act 1994**.

Owning pornography of adults who look like children is illegal. This amendment to the **Protection of Children Act 1978** was brought in under the **Criminal Justice and Public Order Act of 1994**. A couple of cases have come to court to dispute this, but it has gone into the realm of judgement, i.e. whether a reasonable person would say that it was a person under 16.

The main change to these provisions through the SOA 2003 is the age of the child. This has been extended to 18. Therefore, with the provision above a reasonable person would have to now say that the child was under 18.

Sending pornography through the post is illegal under The Post Office Act 1953.

HOMOSEXUALITY AND SECTION 28

Teachers can teach about homosexuality. There had been some confusion about what teachers could / could not do because of section 28 of the Local Government Act 1988: Since November 2003 Section 28 of the Local Government Act (1988) was removed from the statute book after much campaigning to repeal it.

For vulnerable and looked after children and young people, in the Children Act 1989, the section *Enabling young people to build and maintain relationships with others: sexual relationships* it states 'The needs and concerns of gay young men and women must also be recognised and approached sympathetically'. In the section *Enabling young people to develop their self-esteem* it states, 'Gay young men and women may require very sympathetic carers to enable them to accept their sexuality and to develop their self-esteem.'

RAPE

England and Wales: The Sexual Offences Act 2003 defines rape as:

- intentional penetration
- of vagina, anus or mouth
- with a penis
- without consent (and reasonable belief of no consent)
- or of someone under 13

This is a redefinition of rape in that it includes oral penetration. It also now includes surgically reconstructed genitalia which previously it did not.

This is now the **ONLY** sexual offence that can be carried out only by a male (aged 10 or over).

Because of the way rape is defined, i.e. with a penis, women cannot be charged with the offence of rape. However, in 2001 a woman was convicted of rape in exceptional circumstances. In the SOA 2003 there is a new offence of 'Causing a person to engage in sexual activity', which can be committed by a male or female and could be used to charge women rather than rape.

A man can be charged and found guilty of raping a woman to whom he is married. This became law through the **Sexual Offences (Amendment) Act 1992**.

For rape to have occurred there need not have been emission of semen, nor deep or prolonged penetration or for the women's hymen, (if victim is female), to be broken. The

offence consists in the violation of the person not the satisfaction of the perpetrator.

Rape is committed if a man has sexual intercourse with a 'consenting' girl who is:

a) under 13

If the child is under the age of 13 whether or not they consented to the activity is irrelevant. A child under 13 does not, under any circumstances, have the legal capacity to consent to any form of sexual activity. Rape and assault by penetration (for definitions see page 3) carry a maximum of life. Sexual assault and causing or inciting a child to engage in sexual activity have a maximum of 14 years.

This absolute offence applies where the defendant is an adult (aged 18 or over 18). Where the defendant is under 18 prosecutors have been advised to exercise discretion (see below).

b) under 16

In the case of 13-15-year olds (and under 13 where the defendant is under 18) there is a potential defence where the defendant must prove reasonable belief that the child was over 16.

Several things would be considered by the Crown Prosecution Service (CPS) when determining whether it is in the public interest to prosecute. These would be:

- age and emotional maturity of the parties
- whether they entered a sexual relationship willingly
- whether there was any coercion or corruption by a person
- the relationship between them
- whether there was a breach of duty of care

It is likely these would only be considered where the defendant is under 18.

Under the Sexual Offences Act 2003 women can now commit a penetrative sexual assault that is as serious as rape

The Sexual Offences Act 2003 includes another offence which can be carried out by both sexes, that of assault by penetration, which covers penetration of vagina and anus with something other than a penis, without consent.

GROOMING A CHILD FOR SEX

Grooming a child or young person under 18 with the intention of meeting for sex, even if a meeting never takes place, is a child sexual offence:

Section 14 makes it an offence for a person intentionally to arrange or facilitate any action which he intends to do, intends another person to do or believes that another person will do, in any part of the world, which will involve an offence being committed against a child under any of sections 9 to 13.

The offence is committed whether or not the offence takes place. For example, a

prosecution could still be pursued where the police, acting on intelligence in order to safeguard a child, apprehend the offender before a substantive sexual offence has been committed. Similarly, a prosecution could be pursued where a person had arranged the procuring of a child, but where the child was not delivered, or where a person had given permission for his premises to be used for sexual activity with a child, but circumstances prevented the activity from taking place.

This policy is linked with the school's e-safety guidance in identifying possible signs of potential grooming and advice is given procedures for managing this.

PROSTITUTION

Prostitution is not illegal but certain specific offences relating to prostitution are. It is illegal to buy the sexual services of someone under 18.

Paying someone money for sex or for a sexual act is not illegal if the payee is over 18

Being paid money for sex or for a sexual act is not illegal in itself but pimps can be charged with 'living off immoral earnings'

Offering sex for money would only be illegal in certain circumstances such as soliciting

Asking for sex for money would be illegal if it constituted kerb crawling

There are currently more than 35 provisions relating to the trade.

'Prostitute' is defined as 'a person (A) who on at least one occasion and whether or not compelled to do so, offers or provides sexual services to another person in return for payment or a promise of payment to A or a third person.'

The SOA 2003 has made most offences around prostitution gender neutral – e.g. soliciting and kerb crawling and has again raised the age of a child to 18.

Useful terms

Sexuality

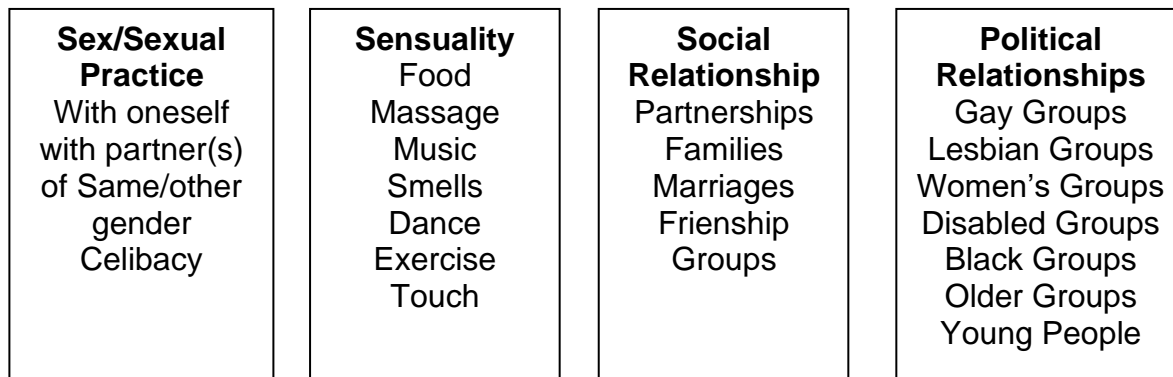
For young people to experience positive safe sexual relationships they need to understand their feelings - the way they think about and value themselves. To enable young people to do this they need confidence and skills to ensure that they can communicate effectively concerning what they want or do not want.

It is important to work within a holistic approach that encompasses relationships, self-awareness, confidence, self-esteem, communication and helping young people understand their sexuality. For this to happen it is important that issues of sexuality and sexual orientation are dealt with sensitively to ensure that it is a positive experience for all young people.

Sexuality can be expressed in many ways - physical, emotional, social, individual, religious, cultural or political.

Model of Sexuality

(Carol Painter, Youth Clubs UK 1995)



There are many mixed and conflicting messages around sexuality and as workers we may need to challenge our own attitudes, values and beliefs.

It is difficult to address the issues of sexuality with young people especially when we live in a society that does not discuss sex and sexuality in an open, honest and safe way. We need to understand that different religions, cultures and race will have different attitudes and beliefs on issues of sexuality. We need work appropriately and sensitively within different communities and ensure that we do support and meet the needs of the young people within them.

During adolescence young people go through many physical and emotional changes which can cause confusion. Young people can feel self conscious about themselves and their need to be accepted by their friends. Young people will want to compare themselves with their peers, people in the media to enable them to find and explore their own sexual identity. This can be a hard time as young people also don't want to be seen to be different from their peers.

For many young people it can be a confusing and traumatic time physically and emotionally and as workers we need to be sensitive in how we support young people in working through their feelings, conflicts, pressures and attitudes.

Everyone has the right to their own sexuality and to express it in a way that is consenting, equal, negotiated and non-oppressive regardless of their race, gender, sexual orientation or disability.

Gay– A man who is sexually attracted to other men (some women may prefer to use 'gay' rather than 'lesbian'). Some men who have sex with other men will not necessarily identify themselves as gay.

Lesbian– A woman who is sexually attracted to other women, again some women who have sex with other women will not identify themselves as lesbian.

Bisexual– A person who is sexually attracted to both women and men.

Homosexual–A person who is sexually attracted to the same gender.

Heterosexual – A person who is attracted to someone of the opposite gender (sometimes known as 'straight')

Gender– Feminine or masculine and is socially determined

Sex– Male or female biologically determined

Sexual Orientation– Some people may change their sexual orientation at different times in their lives and not all people are totally heterosexual or homosexual.

Homophobia– An irrational fear of lesbian, gay or bisexuals.

Heterosexism– An oppressive attitude that believes that heterosexuality is more valid and justifies the right to impose assumed values.

Sexism– This term is generally used when men impose their gender prejudices on women, however it is used to describe one gender dominating another.

Useful Services and Contacts:

PSE Advisory Teacher Athrawes Ymgynghorol ABCh
Adeilad 2 / Building 2,
Parc Dewi Sant / St David's Park,
Heol Ffynnon Job / Jobs Well Road,
Caerfyrddin / Carmarthen.
SA31 3HB
Ffon / Telephone 01267 246622

Healthy School's Coordinator
Adeilad 2 /Building 2,
Parc Dewi Sant / St David's Park,
Heol Ffynnon Job /Jobs Well Road,
Caerfyrddin / Carmarthen.
SA31 3HB
Ffon /Telephone 01267 246622

Head of Health Visiting and School Nursing
Carmarthenshire Local Public Health Team
Cynorthwy-ydd Gweinyddol / Administration Assistant,
Tim Iechyd Cyhoeddus Hywel Dda / Carmarthenshire Public Health Team
Iechyd Cyhoeddus Cymru / Public Health Wales,
Adeilad 1, Blwch 108, Parc Dewi Sant, / Building 1, PO Box 108, St David's Park,
Heol Ffynnon Job, Caerfyrddin, SA31 3WY / Jobs Well Rd, Carmarthen, SA31 3WY

Ffôn/Tel: 01267 225072

Rhyngrwyd/Internet: www.publichealthwales.org

Mewnrwyd/Intranet: <http://www.publichealthwales.wales.nhs.uk/>

Carmarthenshire Specialist Sexual Health Service 01267 227475

Signed:

Chair of Governors: _____ **Date:** _____

Head teacher: _____ **Date:** _____