



Sexuality and sexual health education best practice statement



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Principles of sexuality and sexual health education (SSHE)

- 1 Human rights
- 2 Accessible to all young people and inclusive of identities and experiences of all young people
- 3 Appropriate to the age and level of development of learners
- 4 Holistic and broadly-based in scope and depth
- 5 Scientifically accurate
- 6 Incorporates emerging issues related to sexual health and wellbeing
- 7 Supports development of health literacy
- 8 Uses a learner-centred approach
- 9 Emphasises a deep understanding of consent and respectful relationships
- 10 Promotes gender equality and the prevention of sexual and gender-based violence
- 11 Culturally relevant
- 12 Nurtures positive values and attitudes towards sexuality and sexual health
- 13 Supported by a whole-of-school, or health-promoting school, approach
- 14 Provided by educators who have the knowledge, skills, confidence and commitment to deliver comprehensive sexuality and sexual health education
- 15 Uses engaging, evidence-based teaching methods
- 16 Trauma-informed



Sexuality and sexual health education best practice statement

Purpose

This document provides guidance for planning, delivering and evaluating sexuality and sexual health education (**SSHE**) programs in New South Wales schools. The content is based on current research evidence and internationally recognised best practice for effective education in this field. Evidence-based **SSHE** is intrinsically linked with respectful relationships and consent education.

Research evidence indicates that effective education in this field takes a broad comprehensive approach that goes beyond the teaching of reproduction, risk and disease. It includes teaching about body autonomy, values, rights and respect, communication, informed decision making, the influence of media and technology, healthy relationships, intimacy, gender and power imbalances and the understanding and negotiation of consent (UNESCO, 2018).

Audience

Audience for this document includes school-based educational, leadership and wellbeing staff.

This document supports a whole-of-school approach, which recognises that **SSHE** messages are more effective when they are well-planned and consistent across schools and the community. A whole-of-school approach has been shown to promote communication and confidence, allowing staff to feel supported in their work with students and their communication with parents.

This document provides information and an evidence base to support communication with staff, parents.

Documents in this series:

- Sexuality and sexual health education best practice statement (Family Planning Australia, 2023)
- Guidance document for school leaders on sexuality and sexual health education (Family Planning Australia, 2023)
- Guidance document for school wellbeing staff on sexuality and sexual health education (Family Planning Australia, 2023)
- Guidance document for schools on working with parents, carers and families about sexuality and sexual health education (Family Planning Australia, 2023)

What is sexuality and sexual health education?

Sexuality and sexual health is a key aspect of overall health and wellbeing. Schools play a crucial role in equipping all students with age-appropriate knowledge and skills needed to have respectful and healthy relationships and to support and enhance their sexual and reproductive health as they mature.

In an education context, the subject area is referred to by a variety of terms, including sexual health education, sexuality and sexual health education, sex education, sexuality and relationships education and comprehensive sexuality education. Internationally, comprehensive sexuality education is the term used for recognised best practice in this field of education.

UNESCO (2018) defines comprehensive sexuality education as

A curriculum-based process of teaching and learning about the cognitive, emotional, physical and social aspects of sexuality. It aims to equip children and young people with knowledge, skills, attitudes and values that will empower them to: realize their health, well-being and dignity; develop respectful social and sexual relationships; consider how their choices affect their own well-being and that of others; and, understand and ensure the protection of their rights throughout their lives (p.16).

Research evidence (UNESCO, 2018) indicates that effective education in this field takes a broad comprehensive approach that goes beyond the teaching of reproduction, risk and disease. It includes teaching about body autonomy, values, rights and respect, communication, informed decision making, the influence of media and technology, healthy relationships, intimacy, gender and power imbalances and the understanding and negotiation of consent. Effective education programs also support the development of students' health literacy so they can understand and access health information and services.

Using this comprehensive approach has been shown to be more effective in terms of student learning and to be more likely to result in positive health outcomes in comparison to programs which have a narrow range of content and programs which focus only on abstinence (UNESCO, 2018, p. 18).

In this document the term 'sexuality and sexual health education' (**SSHE**) will be used to refer to this comprehensive approach to teaching this content, reflecting recognised best practice for effective education programs in this field and utilising terminology from the NSW Personal Development, Health and Physical Education (PDHPE) and use PDHPE from here K-10 Syllabus (NSW Department of Education, 2018a).

Overview of sexuality and sexual health education topics

SSHE includes a wide range of topics, some of which are inter-related and therefore may be taught in a holistic and integrated way to support students to make connections between them. Content comprises knowledge, skills and attitudes.

International guidance

The *International technical guidance on sexuality education* (UNESCO, 2018), widely regarded as one of the most authoritative guidelines internationally, divides **SSHE** into eight key concepts, with up to five topics within each concept area. The document provides more detail within each of the key concepts and topic areas, including learning objectives for four age groups (5–8 years; 9–12 years; 12–15 years and 15–18+ years). This document provides a good basis for schools to plan or review **SSHE** programs in a holistic way across primary and secondary schools, or to develop scoping and sequencing for particular concepts and topics. An overview of the key concepts and topics appears below.

Key Concept: 1 Relationships	Key Concept: 2 Values, Rights, Culture and Sexuality	Key Concept: 3 Understanding Gender
Topics: 1.1 Families 1.2 Friendship, love and romantic relationships 1.3 Tolerance, inclusion and respect 1.4 Long term commitments and parenting	Topics: 2.1 Values and sexuality 2.2 Human rights and sexuality 2.3 Culture, society and sexuality	Topics: 3.1 The social construction of gender and gender norms 3.2 Gender equality, stereotypes and bias 3.3 Gender based violence
Key Concept: 4 Violence and Staying Safe	Key Concept: 5 Skills for Health and Wellbeing	Key Concept: 6 The Human Body and Development
Topics: 4.1 Violence 4.2 Consent, privacy and bodily integrity 4.3 Safe use of Information and Communication Technologies (ICTS)	Topics: 5.1 Norms and peers influence on sexual behaviour 5.2 Decision-making 5.3 Communication, refusal and negotiation skills 5.4 Media literacy and sexuality 5.5 Finding help and support	Topics: 6.1 Sexual and reproductive anatomy and physiology 6.2 Reproduction 6.3 Puberty 6.4 Body image
Key Concept: 7 Sexuality and Sexual Behaviour	Key Concept: 8 Sexual and Reproductive Health	
Topics: 7.1 Sex, sexuality and the sexual life cycle 7.2 Sexual behaviour and sexual response	Topics: 8.1 Pregnancy and pregnancy prevention 8.2 HIV and AIDS stigma, care, treatment and support 8.3 Understanding, recognizing and reducing the risk of STIs, including HIV	

Table 5.2 from *International technical guidance on sexuality education* (UNESCO, 2018, p. 36)

Australian curriculum

Within the *Australian curriculum in health and physical education from foundation to year 10* (Version 9.0), **SSHE** content falls within the focus area of relationships and sexuality (ACARA, 2022). The focus area description below provides a summary of this focus area and the topics to be covered.

Relationships and sexuality

This focus area addresses physical, social and emotional changes that occur over time and the significant role relationships and sexuality play in these changes. The content supports students to establish and manage respectful relationships. It also supports them to develop positive and respectful practices in relation to their reproductive and sexual health and their identities. In doing so, students gain understanding of the factors that influence gender and sexual identities.

It is expected that all students at appropriate times across the continuum of learning from foundation to year 10 will learn about:

- puberty and how the body changes over time
- practices that support reproductive and sexual health (contraception, negotiating consent, and prevention of sexually transmitted infections and blood-borne viruses)
- the nature of consent, seeking permission and setting boundaries, understanding the harm that can be caused when consent isn't gained or is ignored
- the impact of power and coercion on boundary setting in relationships
- establishing and managing changing relationships (offline and online)
- strategies for dealing with relationships when there is an imbalance of power (including seeking help when wanting to end the relationship)
- bullying, harassment, discrimination and violence (including discrimination based on race, gender and sexuality)
- understanding the nature of gender-based violence and the beliefs and attitudes that drive this behaviour.

Australian curriculum health and physical education F-10 (Version 9.0), Focus area descriptions (ACARA, 2022, p. 7)

Links to NSW PDHPE K-10 Syllabus

SSHE content appears in the following sections of the *NSW PDHPE K-10 Syllabus* (NSW Department of Education, 2018a).

Contexts for learning:

- Sexuality and sexual health
- Relationships

Content strands and content:

- **Health, well-being and relationships:** Includes topics such as puberty, menstruation, body systems, rights and responsibilities in relationships, sexuality and consent
- **Healthy, safe and active lifestyles:** Includes topics such as personal identity and how it can differ in various contexts, sexuality, changes during adolescence, relationships, skills for unsafe situations, inclusive and equal relationships, ethical behaviour in relationships, impact of gender stereotypes

Outcomes for K-10 and life skills outcomes for year 7-10

Knowledge and understanding outcomes	Summary of content relevant to SSHE
PD e-1, 1-1, 2-1, 3-1, 4-1, 5-1 and LS-1	Personal identity, growth and development, managing changes and challenges, including the physical, social and emotional changes of puberty
PD e-2, 1-2, 2-2, 3-2, 4-2, 5-2, LS-2 and LS-3	Personal safety, resilience and seeking help for themselves and others, including health information and support services
PD e-3, 1-3, 2-3, 3-3, 4-3, 5-3 and LS-4	Features of respectful and inclusive relationships which support equality; communication, empathy, evaluation and analysis of relationships
PD e-6, 1-6, 2-6, 3-6, 4-6, 5-6 and LS-7	Factors, attitudes and behaviours that influence health, safety and wellbeing and how to enhance and promote health, safety and wellbeing
PD e-7, 1-7, 2-7, 3-7, 4-7, 5-7 and LS-8	Actions, strategies, health practices and resources, that promote health, safety and wellbeing for themselves and in the community
Skills outcomes	Summary of content relevant to SSHE
PD e-9, 1-9, 2-9, 3-9, 4-9, 5-9 and LS-10	Self-management, taking responsibility for their own actions, responding to other individuals and groups, and managing complex situations
PD e-10, 1-10, 2-10, 3-10, 4-10, 5-10 and LS-11	Interpersonal skills to interact effectively and respectfully with others, promote inclusion, and to build and enhance relationships

Key concepts addressed in sexuality and sexual health education K-12

SSHE content may be categorised into the following key concepts, which align with syllabus content. Schools should ensure these key concepts are covered in an age appropriate way as students move through each stage of learning in primary and secondary school.

- Human development
- Relationships
- Personal skills, attitudes and values
- Sexual behaviour
- Sexual and reproductive health
- Identity, culture and human rights

The NSW Department of Education's descriptions of these [key concepts K-12](#) (2022) provides more detail on topics which may be covered within each of them.

Teaching and learning strategies and resources

Teaching and learning strategies and resources are critical components of effective **SSHE** programs. Teaching strategies and resources should align with the best practice principles outlined above. Schools can use these principles to develop and review their learning programs and assess the suitability of teaching strategies and existing or new resources to engage students in ways which will support effective learning in **SSHE**.

The NSW Department of Education (2022) has developed a range of teaching and learning [resources](#) to support all NSW schools to provide high quality **SSHE** programs. These include:

- [Teaching strategies](#)
- [Sexuality education in PDHPE K-6 fact sheet](#)
- [Teaching and learning sequences for kindergarten to year 10](#)
- [Life ready](#) resources for health, safety and wellbeing programs for year 11 and 12

Professional learning programs for school staff may also provide examples of teaching strategies and learning activities, along with resources for students, teachers and others involved in supporting **SSHE** as part of a whole-of-school approach.

When do we teach it?

Providing **SSHE** across both primary and secondary school settings is an important way to ensure learning which is appropriate to the age and level of development of learners and gradually builds on previous content as students mature.

SSHE is an essential part of the curriculum, and it should be provided in a range of ways in both primary and secondary schools. Whilst it is primarily a part of the PDHPE key learning area, there are opportunities for learning both inside and outside of PDHPE classes:

- For kindergarten to year 10, **SSHE** content appears in each stage of the *NSW PDHPE K-10 Syllabus* (2018a), covered within two contexts for learning:
 - Sexuality and sexual health
 - Relationships
- For year 11 and 12 students, **SSHE** content should be included in health, safety and wellbeing programs including:
 - *Life Ready* in government schools – ‘sexuality and sexual health’ and ‘relationships’ are included as suggested content areas (NSW Department of Education, 2018b)
 - Other senior student health and wellbeing programs in non-government schools
- Other key learning areas provide essential opportunities to cover themes linked to **SSHE**, such as:
 - Analysing themes around growing up, relationships or gender stereotypes within English as part of media or literature studies
 - Learning about life cycles and reproductive systems within science units
- As part of individual support or pastoral care provided to students
- As teachable moments during informal conversations.

Why teach sexuality and sexual health education in schools?

SSHE in schools aims to provide children and young people with the values, attitudes, knowledge and skills to develop and enjoy rewarding, respectful and equitable interpersonal relationships. **SSHE** also aims to equip students to make informed and responsible decisions to support the health, safety and wellbeing of themselves and others. It is a crucial part of health education and supports young people’s rights to sexuality and sexual health education and information.

Schools are in a position to provide consistent, timely, and evidence-based sexuality and sexual health education because of their extensive contact with young people. (Fisher et al., 2019; UNESCO, 2018). Surveys of Australian school students also indicate that school-based sexuality and sexual health education programs are amongst Australian students’ most utilised and trusted sources of sexual and reproductive health information (Fisher et al., 2019; Johnson et al., 2016; Roth et al., 2021).

SSHE provides children and young people with education about how their bodies work and helps them to understand and manage physical, social and emotional changes which occur as they develop. **SSHE** plays a significant role in the prevention of reproductive and sexual health problems, helping young people to reduce their risk of sexually transmissible infections (STIs) and unintended pregnancy. Additionally, **SSHE** supports the health and wellbeing of young people around a broad range of issues, including the development of positive self-image and identity (UNESCO, 2018).

SSHE programs can also contribute to reducing sexual assault, gender based violence and discrimination through teaching about consent and addressing drivers of violent and discriminatory behaviours and attitudes (UNESCO, 2018: Our Watch, 2021; Marson, 2022).

Whilst some students may learn about these topics outside of school, such as from family members and friends, in community settings, from health professionals or from media and other online sources, these opportunities may not be available to all students. Seeking information independently online may lead students to information which is not accurate or evidence-based.

A lack of effective **SSHE** may leave children and young people more vulnerable to harmful sexual behaviours and sexual exploitation, and also limits their capacity to make informed choices and access services to support good sexual and reproductive health outcomes as they develop during adolescence and into adulthood (UNESCO, 2018).

Refer to section 8 of this document for more information about engaging with parents and carers to support learning in **SSHE**.

Principles of sexuality and sexual health education

The following principles describe features of effective **SSHE** and represent best practice for education in this field. This list has been collated from key guidance documents used internationally (UNESCO, 2018) and research evidence outlining practices which are most likely to result in effective teaching and learning in **SSHE** and have a positive impact on the behaviours and health outcomes of students. They also align with the *National principles of health education* (ACHPER, 2021).

1. Promotes human rights

SSHE is based on a human rights model and promotes the dignity of all people. **SSHE** promotes and supports the rights of people to informed autonomous decision-making, promotes respect for the rights of others and advocates for people whose rights have been denied. This includes the rights of all children and young people to access health services, information and education related to sexuality and sexual health. A human rights approach should guide decisions where there may be challenges, supporting people's right to health care and information to ensure the best possible health outcomes. **SSHE** programs empower students to make informed decisions to support their health and safety.

2. Accessible to all young people and inclusive of identities and experiences of all young people

SSHE is relevant and responsive to the needs of the young people it is delivered to, inclusive of race, sex, gender identity, sexual orientation, geographic location, socio-economic status, cultural or religious background, ability, or housing status. Educators take a strengths based approach and provide opportunities to discuss and address diversity of attitudes, behaviours, identities and lived experience. For example, programs may:

- use images and stories which reflect a diverse range of bodies, genders, relationships and families
- analyse scenarios to understand different motivations of characters with differing attitudes and behaviours, then identify options available and possible health consequences from each perspective
- discuss with students ways to address factors which can influence accessibility of health information and health services, such as location and cost

3. Appropriate to the age and level of development of learners

SSHE is delivered consistently over primary and secondary school years, using a spiral curriculum approach and scaffolding to revisit and build on concepts over time as learners mature. Programs are learner-centred and accommodate diversity in levels of physical, social, cognitive and emotional development and educators work to ensure students are prepared for changes as they develop from childhood to adolescence and adulthood. For example:

- All students need to learn about puberty and managing puberty changes during upper primary school and early secondary school as they are most likely to commence puberty in this age range. Educators working with students with intellectual disability may need to use resources with modified language, or develop individualised materials, in order to meet the specific learning needs of these students as they prepare for and experience puberty.
- Educators may need to provide some information in easy English and/or translated into community languages to support students learning English as an additional language or dialect.
- Content may need to be taught when students are slightly older at times to cater for diverse needs. This may apply to students who have had interrupted schooling, such as refugees and students returning to school after prolonged illness, or if consultation with culturally diverse communities indicates this would be more culturally appropriate for some topics.

4. Holistic and broadly-based in scope and depth

SSHE is comprehensive in that it covers the full range of topics that are important for all learners to know to ensure positive sexuality and sexual health and wellbeing outcomes. This includes not just physical health, but also the associated social, emotional, and cultural aspects of sexuality and sexual health. Educators use agreed programs aligned to syllabus requirements, providing structure for consistent and quality programs to develop students' knowledge, skills and attitudes in a holistic way.

5. Scientifically accurate

Content is based on up-to-date factual information, and reviewed and updated periodically and when changes occur (such as changes in the law) to maintain currency. Information provided to students must also be supported by current evidence. It is important for **SSHE** to also dispel myths and identify and correct inaccurate information raised by learners. For example, before using new resources in teaching programs, schools should check to ensure that the most current version of the resource will be used and that it is linked to reliable and current research. Likewise, before engaging external providers for **SSHE** presentations or workshops with students, schools should check that information to be provided is accurate and current and that the content and delivery strategies are evidence-based and reflect best practice in **SSHE** more broadly.

6. Incorporates emerging issues related to sexual health and wellbeing

SSHE addresses current and emerging issues, particularly those impacting on young people. This may relate to identified sexual health issues emerging in a local context, in a relevant population group, or others emerging nationally or globally. For example, educators should include information about health conditions which are new or increasing, social issues or other behaviours impacting on sexual health and newly available preventative health strategies, health testing and/or treatment options.

Consulting with students about topics or issues they would like to cover is also recommended as a way to identify and address emerging issues within each cohort of learners.

7. Supports development of health literacy

Includes opportunities for students to develop their health literacy in relation to sexuality and sexual health. This can include learning:

- how to identify and access sources of reliable information online and in the community
- help-seeking skills, including ways to access health services when needed
- what to expect during a health appointment and ways to communicate with clinicians and health workers, such as preparing a list of questions beforehand
- problem solving skills to support decision-making about reproductive and sexual health products and issues

8. Uses a learner-centred approach

SSHE involves students in planning, delivery and evaluation to ensure that programs meet the needs and interests of the learners. **SSHE** provides authentic opportunities for all students to provide input into their priorities for content to be included, preferences for delivery styles and have the chance to ask questions as the program is being delivered. Schools must continue to provide a comprehensive learning program but should make adjustments to ensure programs are relevant to the context of the learners, which will result in more engaging and effective learning and positive health and wellbeing outcomes. This is particularly true when working with vulnerable and marginalised young people, where the most successful programs have been those developed in partnership with young people, providing a sense of ownership and agency whilst recognising and addressing their diverse perspectives and learning priorities (UNESCO 2015, 2018).

9. Emphasises a deep understanding of consent and respectful relationships

SSHE develops students' understanding of consent, and nurtures their skills, knowledge and attitudes to support respectful and equitable relationships. This is most effectively done by gradually building up students' awareness and skills, starting with exploring concepts of safety, bodily autonomy, consent in non-sexual situations and examining family and friendship relationships, before moving on to content about relationships with attraction, rights and responsibilities in relationships, sexual consent and sexual relationships. Effective **SSHE** incorporates critical thinking about factors which influence students' understandings of respectful relationships and consent, such as media depictions of sex and relationships, as well as legal, religious, cultural and peer group norms and values.

Communicating through technology, including via mobile phones, social media and dating apps, can be a significant part of forming and maintaining relationships. It is therefore important for programs to include information and discussion about safe and responsible online interactions as well as those occurring in person when teaching about relationships and consent.

Learning about positive communication and behaviours in relationships and ways of seeking support for yourself and others is essential for effective education about relationships. **SSHE** programs develop students' knowledge, skills and attitudes to identify risks to their safety and wellbeing and ways to seek information and support when needed. This includes recognising inappropriate, harmful and illegal behaviours, including breaches of privacy, as well as unwanted and non-consenting sexual attention and use of explicit imagery.

10. Promotes gender equality and the prevention of sexual and gender-based violence

SSHE builds awareness of the centrality and diversity of gender in people's lives, allowing examination of gender norms and the influences which shape them, along with ways in which gender norms can influence inequalities and affect people's behaviours, health and wellbeing. Other intersecting factors which contribute to violence and disrespect should also be explored to deepen students' understandings of power dynamics and imbalances. This is significant because programs increasing students' knowledge about sexuality and sexual health and developing their intention to engage in positive behaviours (such as avoiding risky sexual behaviour or accessing health services) will have limited impact where social and gender norms, or threats or experiences of violence, inhibit adoption of those positive behaviours or create barriers to accessing services and support.

Research shows that relationships education programs which incorporate such examinations of gender and address drivers of gender-based violence are more effective in increasing respectful attitudes and behaviours and in decreasing students' intention to use violence and disrespectful behaviours in relationships than programs which do not (Our Watch, 2021; UNESCO, 2018). **SSHE** programs focussing on health outcomes, such as reducing STIs and unintended pregnancy, are also more effective when teaching methods support learners to question cultural and social gender norms to develop gender equitable attitudes (Haberland & Rogow, 2015; UNESCO, 2018).

SSHE educators facilitate learning activities which promote critical thinking in age-appropriate ways to develop student understandings of these topics and their influences on decision making. By exploring positive and negative messages conveyed in their communities, in the media and online, learners can then consider ways in which negative and harmful attitudes, behaviours and systems may be addressed to support gender equality, healthy relationships and positive health outcomes.

11. Culturally relevant

SSHE takes into consideration cultural and contextual elements which may impact on learners to ensure that programs are relevant to the setting. These elements could include religious beliefs and perspectives. Identifying these influences may involve consultation with families, Elders, the students themselves and/or other significant community members to inform culturally safe program development and delivery. Consultation may also be conducted to find out about particular areas of interest or concern which could be addressed in education programs. Whilst programs should remain comprehensive in nature and foster responsibility and respect within all relationships, adaptations for cultural relevance may include:

- using language and examples from real life contexts and case studies which students can relate to
- selecting videos, images and written resources to reflect culturally diverse communities, including Aboriginal and Torres Strait Islander communities
- grouping students to support safe learning environments, such as choosing to do small group discussion activities with friends, or grouping by gender for some topics
- emphasising strengths and positive values and attitudes held by families, religious groups and cultural groups in the school community to support key messages and learning outcomes
- addressing myths and misconceptions which may be prevalent in cultural groups which are part of the school community
- exploring, examining and challenging ways in which cultural norms and behaviours can affect people's choices and relationships, both positively and negatively

12. Nurtures positive values and attitudes towards sexuality and sexual health

SSHE incorporates a balanced approach to sexual health promotion that includes the positive aspects of sexuality and relationships as well as the prevention of outcomes that can have a negative impact on sexual health and well-being. Educators need to be aware of their own personal biases and ensure their communication with students remains non-judgemental and honours their professional responsibility to deliver effective **SSHE** programs.

13. Supported by a whole-of-school, or health-promoting-school, approach

A whole-of-school approach recognises that **SSHE** programs are likely to be more effective when key messages, approaches and practices are well planned and reinforced consistently by all school staff, both inside and outside the classroom (Department of Education and Training Victoria, 2021; Mitchell et al., 2000; NSW Health, 2000; Our Watch, 2021; UNESCO, 2018; WHO & UNESCO, 2021). The whole-of-school involves three key areas of alignment.

- In the classroom – Agreed **SSHE** teaching goals, content, strategies and resources across year levels should be planned and evaluated holistically. Schools should also provide opportunities for students to identify their interests and priorities in **SSHE** and for these to be incorporated into programs. Classroom interactions with teachers should consistently model best practice principles.
- In the school environment – **SSHE** best practice should be embedded in school policies, procedures, environments and practices. This involves ensuring **SSHE** programs are supported by principals and others in positions providing school leadership and supporting student wellbeing, such as deputy principals, head teachers, year advisors, school counsellors and school nurses where available. The school's physical environment, routines and activities outside of classrooms should also reflect best practice, such as providing individual support for students and being inclusive of diversity. Teachers and another school staff also need to have access to professional learning and support to develop and maintain their skills and knowledge in **SSHE**.
- In the school community – Working in partnership with parents and carers, Elders, and the wider school community contributes to **SSHE** programs which are relevant, culturally safe, engaging and therefore more effective. Schools should further support sexual health promotion by linking with local health services and relevant community services to provide additional resources, assistance or referrals to students and families as needed.

14. Provided by educators who have the knowledge, skills, confidence and commitment to deliver comprehensive sexuality and sexual health education

Educators with relevant professional learning and ongoing support are most likely to deliver effective programs which have a positive impact on the health of their students. Apart from ensuring educators have up to date knowledge of the content to be covered, educators need skills to teach **SSHE** effectively, including:

- establishing a safe learning environment so that students can engage in open and non-judgmental discussions about relationships, sexuality and sexual health whilst maintaining respect and participant confidentiality
- using trauma informed practice (see below)
- speaking with students about the content confidently and accurately in a relatable way
- being approachable, inviting questions and answering challenging questions
- use of engaging learning activities

- using a strengths-based approach, with a focus on developing each student's knowledge and skills
- identifying and accessing current, reliable, evidence-based sources of information to ensure content is up to date
- evaluating **SSHE** programs to ensure quality and facilitate continuing improvement

The World Health Organisation (2017) has published a framework for core competencies of sexuality educators, which provides more details on specific knowledge, skills and attitudes required for effective teachers of **SSHE**.

15. Uses engaging, evidence-based teaching methods

Programs utilise sound educational practices which support student engagement and effective learning in this field. These practices include:

- identifying and addressing learners' needs in **SSHE** programs, including the learning needs of students with disability
- positive role modelling, such as in the use of inclusive language and positive attitudes
- providing a range of student-centred learning experiences, such as interactive games and problem-solving activities to actively engage learners
- developing critical thinking and analytical skills, such as through questioning, using case studies to examine different perspectives, discussions exploring values and attitudes and reflection on learning
- developing communication skills to support student empowerment and wellbeing
- ensuring programs are of sufficient depth and duration for students to develop their knowledge, skills and attitudes
- avoiding the use of shock tactics and fear campaigns, as evidence shows these methods are less effective and may result in students becoming disengaged or triggered

16. Trauma-informed

Educators need to be aware that some children and young people have experienced trauma, which may include experiences such as physical or sexual abuse, bullying or harassment, and exposure to domestic violence. Experiences of trauma, and the factors that result from it, may negatively impact a young person's knowledge around sexuality, sexual health and relationships. Educators should use trauma-informed practices, with an aim to avoid re-traumatisation and support young people to participate in **SSHE** programs within a safe learning environment and support their paths to recovery. It is important to note that trauma-informed practices support a safe and supportive learning and environment for all students, not only those who have experienced trauma. Trauma-informed practices include:

- providing physical and emotional safety for students – use strategies such as developing group agreements at the start of each lesson to agree on ways of communicating and working together (such as respecting confidentiality), use protective interrupting if needed, avoid graphic images or stories which may be triggering, maintain a calm classroom environment
- respect for diversity – use language, stories and resources which are culturally safe and inclusive of diverse cultures, historical backgrounds, genders and relationships

- developing positive relationships focused on trust and consistency – inform students about routines and topics coming up, use open communication and model mutual respect
- empowerment of students – take a strengths-based approach, provide opportunities for students to make their own decisions, support students to pursue their learning interests and goals
- training, preparation and support for educators – learn about impacts of trauma, develop plans to deal with disclosures, learn how to recognise and support students who may be triggered (e.g. alternative safe space a student could go to during a lesson), access professional support if needed
- referring young people to appropriate support services if required

(NSW Department of Education, 2017; NSW Health, 2019; Schergen & Hebert, 2016)

The contribution of SSHE to health, safety and wellbeing outcomes

A) SSHE develops awareness, knowledge and confidence about the body and its functions in relation to sexual and reproductive health

Evidence shows that **SSHE** has positive effects, increasing young people's knowledge about how the body works, including bodily autonomy, growth and development and human reproduction. Building on this knowledge, **SSHE** develops students' understanding of puberty, ways to manage challenges which can arise during puberty, and natural variations which can occur (Thomas & Aggleton, 2016; UNESCO, 2018). They also improve their attitudes related to sexual health and risky behaviours (UNESCO, 2016b, 2018). **SSHE** also has broader positive impacts on students, with evidence demonstrating it can contribute to improving confidence, self-esteem, building self-efficacy (UNESCO, 2015), positive self-image and body image (Goldfarb & Lieberman, 2021).

B) SSHE contributes to informed decision-making and reduced sexual risk taking

Some people in the community may fear that teaching young people about sexuality and sexual health may influence them to become sexually active. However, research shows **SSHE** can delay sexual debut, with young people who have received **SSHE** waiting longer before they start being sexually active and having fewer sexual partners (UNESCO, 2015, 2018). **SSHE** dispels misinformation and improves confidence in making decisions about sexuality and sexual health. **SSHE** students demonstrate increased understanding of sexual risks, such as knowledge about STIs, including HIV, and clarifying their values about engaging in or refusing sex. When these students do become sexually active, they are more likely to engage in safer sexual behaviours (UNESCO, 2015, 2018).

C) SSHE contributes to the prevention of sexually transmissible infections and unintended pregnancy

Effective **SSHE** influences the behaviour of students in ways which lead to positive sexual and reproductive health outcomes. It provides young people with up to date, accurate information about contraception and sexually transmissible infections and builds confidence in negotiating safe sex and self-efficacy using condoms.

Evidence confirms that participating in **SSHE** programs contributes to increased use of condoms and other forms of contraception and reduced sexual risk taking, such as engaging in unprotected sex (UNESCO, 2018). Research has consistently shown **SSHE** leads to decreased rates of STIs, reducing HIV and fewer unintended pregnancies (Shackleton et al., 2016; UNESCO, 2015, 2018). It has also been shown to increase voluntary testing for HIV and other STIs (UNESCO, 2015).

NSW Health recognises the importance of comprehensive sexuality education in schools, particularly providing education before students become sexually active, as a key strategy to contribute to reducing STI transmission and unintended pregnancies in young people (NSW Ministry of Health, 2022). Many young people underestimate their level of risk in relation to behaviour which may expose them to STIs. These perceptions may be influenced by cultural beliefs, gender inequalities and a lack of knowledge about STI prevention, transmission, testing and treatment (Senior et al., 2014; UNESCO, 2018). Young people who have had accurate and relevant education about safer sexual practices and STIs, including STI testing, are more likely to use condoms, more likely to get tested for STIs and less likely to stigmatise people with STIs (Senior et al., 2014; UNESCO, 2018).

It is also worth noting that **SSHE** programs addressing gender and power in relationships are more effective in reducing STIs and pregnancy rates than those which do not address these topics (Goldfarb & Lieberman, 2021).

D) **SSHE develops students' understanding of consent, relationships and gender**

One of the key aims of **SSHE** is to support students to develop healthy and fulfilling lives, which includes positive relationships, starting with a focus on family relationships and friendships for young students and gradually addressing intimate and sexual relationships for older students. Teaching about relationships and consent using a human rights-based approach leads to positive effects on students' knowledge about people's values and attitudes and rights within relationships (UNESCO, 2018).

SSHE programs which normalise positive values and provide opportunities for critical reflection around factors which influence positive and negative behaviours in relationships have the most impact on students (Goldfarb & Lieberman, 2021; Our Watch, 2021; UNESCO, 2018). Effective **SSHE** in this topic area facilitates exploration and development of students' attitudes, beliefs and values as they relate to gender, gender identity, gender norms and stereotypes and how these expectations influence behaviour and decision making around relationships and intimacy (Goldfarb & Lieberman, 2021; Our Watch, 2021; Thomas et al., 2014; UNESCO, 2018). Whilst skilled facilitation is required, discussions challenging assumptions about key drivers such as power dynamics between people and characteristics of healthy and unhealthy relationships are a key ingredient in providing effective **SSHE** around relationships. Discussions about consent are most likely to be impactful when framed within the context of human rights, gender equity and personal values, along with provision of realistic and relatable strategies and skills to discuss and negotiate consent with partners (Our Watch, 2021; Marson, 2022).

E) **SSHE contributes to the prevention of sexual abuse, assault and violence**

Evaluations of **SSHE** programs addressing sexual abuse, assault and violence have been shown to be most effective when using a rights-based, inclusive approach which explores dimensions of gender, power and challenging unhelpful and disrespectful attitudes. Such programs not only increase student knowledge, but also change attitudes, reduce victim blaming and sexist attitudes, reduce verbal and physical violence, increase connectedness of students, and increase skills to report, address and reduce domestic violence and intimate partner violence (Goldfarb & Lieberman, 2021; Our Watch, 2021; Thomas & Aggleton, 2016; UNESCO 2015, 2018).

Embedding content on gender, power relations (including between people of different genders) and human rights makes **SSHE** more effective and more likely to have a positive impact on the health outcomes of learners (Our Watch, 2021; UNESCO 2015, 2018). **SSHE** programs which teach students to recognise inequality and harmful behaviours and environments, engage in critical reflection about these issues and promote equitable social norms can contribute to preventing sexual abuse, assault and violence. They also contribute to improving health outcomes, including STI and HIV infection rates and reducing unintended pregnancy and childbearing (UNESCO 2015, 2018).

SSHE may be linked with education programs targeting child protection and protective behaviours, particularly in primary school, focusing on developing knowledge, skills and attitudes aimed at preventing violence, including sexual violence and gender based violence. When well facilitated, such programs have also been shown to be effective, resulting in increased skills and knowledge for children (Goldfarb & Lieberman, 2021).

F) **SSHE develops improved sexual health and media literacy**

Developing health literacy is one of the Propositions within the *NSW PDHPE K-10 Syllabus* (NSW Department of Education, 2018). Effective **SSHE** supports the development of sexual health literacy (Thomas & Aggleton, 2016; UNESCO, 2018), which involves developing knowledge, understandings, skills, values and attitudes about sexuality and sexual health topics, how to access accurate and relevant information, how to navigate the health system to access and use sexual and reproductive health services, and ways to appraise the reliability of information from a range of sources. The overall effectiveness of **SSHE** programs increases when they include information about referral pathways to relevant health or community services and provide access to a range of relevant and reliable sources of health information (UNESCO, 2015).

With widespread access to online information and social media amongst school students, the ability to discern reliable sources of online information is also a vital component of health literacy, overlapping with media literacy. It is also recommended to discuss the impact of social media and technology on sexuality using a framework of the best practice principles in this document. This can include discussions around dating apps, pornography and the sharing of intimate images. A well-planned approach to these topics is likely to result in improved health and media literacy and positive outcomes for student health and wellbeing.

G) **SSHE develops communication skills and skills in social and emotional learning**

SSHE programs following best practice principles and including opportunities for engaging and interactive learning activities result in improved communication skills. This includes improved capacity and confidence in students to talk about **SSHE** topics with classmates, parents and carers and intentions to discuss health issues with clinicians and relationship issues with partners (Goldfarb & Lieberman, 2021). Social-emotional learning is also supported by **SSHE** and has been shown to lead to significant outcomes such as increased empathy, respect for others, managing feelings, an increased sense of self-control and safety and skills to resolve conflicts in nonviolent ways (Goldfarb & Lieberman, 2021).

H) **SSHE develops understanding of and respect for diversity and inclusion**

Effective **SSHE** programs are inclusive and explicitly address the importance of respecting diversity, which in turn results in learners developing deeper respect for human rights, gender equality, diversity and inclusion (UNESCO, 2018). Diversity and inclusion is broad in scope and requires educators to be mindful of factors such as the language, images and case studies they use when teaching this content, as well as providing opportunities to challenge negative and harmful assumptions and emphasise a rights-based approach. Some areas of diversity which are particularly pertinent to highlight in **SSHE** include:

- diverse bodies – including a range of body sizes and shapes, people with variations in sex characteristics, and people with physical disabilities, noting the importance of positive body image and body autonomy
- diverse perspectives – including people with diverse cultures, religious beliefs, values and life experiences
- diverse identities and sexuality – including a range of expressions and experiences of gender and attraction, including people who choose not to be sexually active

For example, **SSHE** programs taking an inclusive approach to sexual diversity have resulted in positive outcomes including reduced homophobia and homophobic behaviours, reduced stereotyping around gender expression and lesbian and gay people, reduced homophobic bullying and harassment, increased empathy for people of diverse gender, gender expression and sexual orientation, increased safety for lesbian, gay, bisexual, transgender and queer (LGBTQ) students, greater awareness of discrimination based on gender and sexual orientation, increased willingness of students to intervene when witnessing bullying and harassment and overall improved school climate. Other positive outcomes for LGBTQ students included lower reports of mental health issues (including suicidal thoughts and plans), better school attendance, less use of drugs and alcohol and fewer pregnancies (Goldfarb & Lieberman, 2021).

SSHE programs developing understandings of respect for diversity and inclusion have been particularly effective where schools used a combination of formal learning within **SSHE** lessons and reinforced key messages in other subject areas and outside of the classroom, taking a whole-of-school approach (Goldfarb & Lieberman, 2021).

Engaging with parents and carers

For additional information on working with parents and carers, refer to the *Guidance document for schools on working with parents, carers and families about sexuality and sexual health education* (Family Planning Australia, 2023).

Parents and carers can be valuable partners in **SSHE** to provide information and support to their children about these important topics throughout childhood, adolescence and as they move into adulthood. Some parents and carers will do this confidently, whilst others may not feel comfortable or knowledgeable enough to do so.

The following strategies can be used to engage with parents and carers in the development and delivery of **SSHE** programs to support student learning:

- When developing new **SSHE** programs or reviewing existing programs or resources, consulting with families is recommended to build awareness of cultural or other considerations teachers should be aware of when teaching these topics.
- Schools should inform parents of upcoming **SSHE** programs and follow school guidelines about consent for participation in **SSHE** programs. It is important to emphasise how **SSHE** will contribute to the shared goals of promoting good health, safety and wellbeing for all students. This is also an opportunity to provide some information to parents and carers on how they may support this learning. When parents and carers understand the purpose of a program they are generally more comfortable and supportive of their children participating in it.
- If possible, follow up with parents and carers who don't want their children to participate in **SSHE** to find out reasons for their decision and if further information is needed. This may help to clarify what will and won't be included in the school program, and often results in children being able to participate, or at least partially participate, rather than missing out completely.
- Offer support in the form of information and resources for parents and carers to build their knowledge and confidence to engage in conversations with their children about sexuality topics at home when opportunities arise, such as puberty, relationships and consent, and reproductive and sexual health.
- Consider providing a range of resources and formats to meet the needs of families in your community, such as resources suited to students with intellectual disability, resources translated into community languages, and resources reflecting diverse cultural groups, including Aboriginal and Torres Strait Islander communities.

Some guidance for primary and secondary schools about communicating with parents and carers is also available from the NSW Department of Education, including sample letters to advise community members about **SSHE** teaching and learning programs.

Schools may recommend some of the following resources to parents and carers to involve and support them in talking about **SSHE** topics with their children:

- **Talk soon. Talk often** – A guide for parents and carers for talking to children and adolescents about sexuality and sexual health topics
- **Talk soon. Talk often** – Tip sheet. Simple, clear, reassuring tips for parents and carers talking to their children about sex, puberty, sexuality and relationships. Available in English and community languages
- **Raisingchildren.net.au** – Website for parents and carers covering all aspects of development, including strategies for talking to children and teens about **SSHE** topics and tips for addressing abuse and harmful behaviours

- **Planet puberty** – Website for parents and carers of children with intellectual disability and autism
- **Know your health** – Reproductive and sexual health information in easy English and community languages developed in consultation with people from culturally and linguistically diverse communities
- **'Yarning About' resources** – Culturally appropriate **SSHE** resources developed in consultation with Aboriginal and Torres Strait Islander people
- **eSafety Commissioner** – Website with information for parents and carers to help children and adolescents stay safe online
- **Consent education** – NSW Department of Education information for parents and carers about student wellbeing. It includes a section on consent education in schools, explaining how consent and related concepts are taught and provides an overview of consent content from early stage 1 to stage 6.

For a list of additional resources to share with parents and carers, refer to the appendix at the end of the *Guidance document for schools on working with parents, carers and families about sexuality and sexual health education* (Family Planning Australia, 2023).



Appendix: Definitions

Comprehensive sexuality education

Comprehensive sexuality education is defined by UNESCO's *International technical guidance on sexuality education* (2018) as:

A curriculum-based process of teaching and learning about the cognitive, emotional, physical and social aspects of sexuality. It aims to equip children and young people with knowledge, skills, attitudes and values that will empower them to: realize their health, well-being and dignity; develop respectful social and sexual relationships; consider how their choices affect their own well-being and that of others; and, understand and ensure the protection of their rights throughout their lives. (p. 16)

Respectful relationships

Respectful relationships is the second context for learning within the *NSW PDHPE K-10 Syllabus* (2018a) which includes comprehensive sexuality education topics.

Respectful relationships are characterised by non-violence, equality, mutual respect and trust. A focus on fostering respectful relationships among children and young people can result in lasting effects on their relationships now and in the future (Our Watch, 2021).

Sexual health

Sexual health is defined by the World Health Organisation as:

A state of physical, emotional, mental and social well-being related to sexuality; it is not merely the absence of disease, dysfunction or infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled. (WHO, 2006a)

and by the *NSW PDHPE Syllabus* (2018a) defines sexual health as:

A state of physical, mental and social wellbeing in relation to sexuality. It requires a positive and respectful approach to sexuality and sexual relationships, as well as a possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence. (p. 136)

Sexuality

Sexuality is defined by the *NSW PDHPE K-10 Syllabus* (2018a)

A central aspect of being human throughout life. It is influenced by an interaction of biological, psychological, social, economic, political, cultural, ethical, legal, historical, religious and spiritual factors. It is experienced and expressed in thoughts, feelings, desires, beliefs, attitudes, values, behaviours, practices, roles and relationships. (p. 136)

Sexuality and sexual health education

Sexuality and sexual health is the context for learning within the *NSW PDHPE K-10 Syllabus* under which the majority of comprehensive sexuality education topics fall.

In this document, we use the term 'sexuality and sexual health education' (**SSHE**) to refer to education programs in schools which cover relationships and sexuality and sexual health content using a comprehensive, holistic approach which reflects recognised best practice for effective education programs in this field.



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*Availability of these resources may depend on access provided by each organisation and may change without notice

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