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**SPOTLIGHT**

# PROVIDING RELATIONSHIPS AND SEX EDUCATION FOR SPECIAL LEARNERS

An Essential Guide for Developing RSE Provision



### 3 Developing staff confidence in the provision of RSE

Research from a range of countries, across a wide time frame, suggests confidence levels and attitudes of staff towards providing Relationships and Sex Education has a huge impact on the success (or failure) of an establishments' RSE programme. In this chapter, we will look at how we can influence these areas of doubt and have a direct impact on the confidence levels of our colleagues.

We will also consider how to get all stakeholders involved with RSE improvement and how vital their engagement is. We need to understand the areas of concern that colleagues may have when it comes to their views on the type of RSE their learners require. We may have different views on what is important and what should (and should not) be taught. How do we find compromise and ensure what we provide is in our learners' best interests?

We should accept the fact that there will be a need to work in a supportive way with all stakeholders. A robust attitude on our part may not always be the best tactic (although understandable). There will be teaching and support staff that feel uncomfortable, for a range of reasons, with the prospect of delivering RSE to their learners and we need to convince them of the clear reasons why they should address their feelings.

In July 2019, the National Education Union (NEU) and the National Society for the Prevention of Cruelty to Children (NSPCC) published their findings of a fairly wide-ranging survey of 2,175 mainstream school leaders and teachers on attitudes towards the delivery of RSE. It is a helpful overview of our shared level of confidence. The glaring lack of insight and views from SEND schools was unforgivable, although unfortunately not surprising. Perhaps yet another reason for us to take it on ourselves in advocating for our special learners.

The survey highlighted the constant, repetitive message about our schools' poor state of readiness for the roll-out of statutory RSE.

It found:

- 47% expressed a lack of confidence in their ability to deliver the RSE/relationships education. 15% were very confident in their ability;
- 52% expressed uncertainty that their school would be ready to deliver the subjects in September 2020;
- 61% of secondary teachers said they do not feel confident about teaching the impact of pornography;
- 54% of secondary teachers were not confident about teaching lessons on female genital mutilation.

Face-to-face training and support was identified by 78% of respondents as the format that would give them the confidence and skills to deliver high-quality RSE.

This has been the number one concern for many years. Teachers have cited a lack of training, resources and guidance as reasons for not providing RSE (CHANGE, 2010; Ofsted, 2013). Even more concerning was that those teachers that did receive support state that their RSE training was inadequate (Howard-Barr et al., 2005). Others have shared their concerns that they fear getting it wrong would be worse than trying.

In some schools, and for a variety of reasons, there is no RSE provision at all (Rohleder, 2010).

To confuse things a little more, we as teachers may view our learners in terms of their cognitive rather than chronological age and can be prone to using subjective judgement instead of objective assessment to determine our learners' RSE and learning needs (Barnard-Brak et al., 2014). As teachers, our own experience of relationships and sex education (and relationships and sex themselves) means that some of us can talk about RSE with a 'matter of fact' confidence, whilst others feel inhibited and scared about saying the wrong thing. This inconsistency in RSE training, support and our teaching has serious repercussions; many young people do not and will not get access to the quality RSE provision that they both want and deserve (DO RSE, 2018).

There has been a constant failing on the part of education authorities, trusts and government to address the obvious need for support and training around both Special Educational Needs

(SEN) and RSE for longer than we would care to imagine. Historically, people with learning disabilities were often ‘constructed as either being child-like and asexual, or as over-sexed or sexually inappropriate’ (Craft, 1987). This view still resonates within our society, and within many of our schools. As a result RSE for our special learners is often seen as unnecessary, as they are considered to be asexual, or even dangerous, in that it encourages sexual expression.

*In order for adequate sexuality education for students with intellectual disabilities to become a reality, it is vital that these barriers be addressed.*

(FPV, 2015)

### **RSE can be a challenging subject to teach, but it can also be very rewarding for us – and equally rewarding for our learners**

RSE requires a particular style of pedagogy not often embraced in other curriculum areas. Relationships and Sex are huge topics, surrounded by controversy, stigma and diverse beliefs. It is very easy to ‘drop’ certain themes from our RSE sessions due to the difficulty they present. However, this perceived difficulty should never stand in the way of providing our special learners the opportunity to receive the many benefits that relevant RSE offers (DO RSE, 2018).

Even when we feel the ‘argument has been won’ with looming statutory status achieved, remember that convincing someone of the facts and logic of your argument does not address their ‘wired’ deep-set fears. ‘When the importance of providing sex education is recognised, the thought or practice of providing sex education may increase the anxiety of the persons tasked to do so’ (FPV, 2015).

For example, Parritt et al. (2000) found that the professionals they observed expressed greater anxiety raising issues of sexuality with disabled clients than with non-disabled clients. This will be true throughout your observations and conversations also.

*Educators may feel that providing sex education may have adverse reactions from students with learning disabilities.*

(Brantlinger, 1992)

This has been the finding of many research projects, over many years, into the provision of RSE for those with additional needs. (NSPCC, 2014; Howard-Barr et al., 2005; Rohleder, 2010) The belief that RSE would lead to inappropriate sexual behaviour that would be difficult to manage, is a real fear for many.

*Barriers to the provision of sexuality education for students with intellectual disabilities stem in part from educators themselves, who frequently report feeling unprepared to teach sexuality education to these students and experience high levels of discomfort with this subject matter.*

(Howard-Barr et al., 2005)

There are social, economic and personal benefits of improving outcomes for our special learners at school and in further education and employment through quality RSE provision. Family planning educators in Victoria, Australia, have experienced first-hand the benefits of providing RSE to special learners. These benefits included measurable increases in capacity to protect themselves from sexual abuse, demonstrable reduction in the rates of Sexually Transmitted Infections (STIs) and unplanned pregnancy along with increased contraception use and significant reductions in sexualised behaviours of concern (Family Planning Victoria, 2015).

As a safeguarding tool, providing RSE may also support the understanding and reporting of sexual abuse. As we have explored already the fact is our special learners are three times more likely to be subjected to abuse than their mainstream peers. The assessment of cases of sexual assault of people with learning disabilities includes assessment of the individual’s capacity to consent, which includes knowledge about healthy relationships and sexuality (Dickman et al., 2005).

We may have moved so far forward as a society and as educators over that last few decades in terms of our understanding of learning disabilities and our drive to be inclusive; but that shudders to a halt when we start being asked to advocate for our special learners as sexual beings.

*Your own personal attitudes to sex cannot take precedence over your professional duty.*

(Down’s Syndrome Association, 2013)

We will explore staff workshop tips, RSE training courses and team planning ideas to enable you to help develop staff confidence and reduce anxiety levels. The workshops and courses can

also be adapted and made available to governors and your external partners from Social Care and Health.

Special schools cater for a vast range of complex learning difficulties and, certainly in the case of RSE, one 'size' certainly does not 'fit all'. Ideally, we would ensure consistency yet have a flexibility of provision to be able to provide RSE for all of our learner population; our autistic learners with a diagnosis of Autistic Spectrum Disorder (ASD) and Profound and Multiple Learning Difficulties (PMLD) especially. Coupled with this is the need to ensure that issues and questions of appropriateness in terms of content are constantly addressed.

Exploring the correlation between confidence levels in teaching RSE and the range of individuals that are being taught will help focus the support required by your staff team. For example, are teachers less confident if they are expected to teach RSE to those who have PMLD or to those autistic learners (ASD)? The accepted 'truth' in most schools is that those with Moderate Learning Difficulties (MLD) are the easiest to teach, with that cohort typically being our higher achievers with a better cognitive understanding of new concepts.

If you take time to find out about not only the overall confidence rating of your staff, but the perhaps less obvious reasons behind those ratings, you can plan your support and potential staff training in a more tailored way. The outcomes may be different in all schools (for example some of my teaching colleagues who teach PMLD learners are some of the best RSE providers I have come across) but the answers you receive from your questioning will enhance any improvement plan and therefore focus on developing staff confidence across your establishment in delivering RSE.

*A photocopyable Staff Questionnaire can be found in the Appendix.*

## Demonstrate the 'steps' rather than the whole journey

When confronted by the prospect of delivering RSE some of my colleagues over the years have struggled with the task. As we have previously explored, this may have been due to their own personal attitudes and experiences of RSE, seeing it as irrelevant for their learners. Perhaps they were concerned that they did not have the knowledge and strategies to deliver RSE and worried that they would get it wrong. It may also have been simple embarrassment.

For some I wonder if it was because they saw a vast, spiralling RSE 'beast' with all of its tentacles disappearing into dark scary corners of inappropriate sexualised behaviour, safe and unsafe relationships, consensual sexual intercourse, reproduction, STIs, contraception, mental capacity, sexual abuse and so on.

That is not the whole truth of RSE. Although these areas will be part of what we will have to address for some of our learners; what we initially deliver is in reality something far less scary.

Make it clear to staff that they are providing RSE all day, every day. How they interact with each other, modelling good peer to peer respectful interaction (hopefully) irrelevant of hierarchy, race, gender or sexuality. They will constantly be providing RSE in how they interact with their learners; demonstrating and encouraging (hopefully) mutual respect, good self-esteem and a drive for equality.

That is RSE at its essence, not the scary beast some would have you believe it is.

### Tips on how to plan for your RSE staff training

1. **Know your colleagues needs.** If this is In Service Training Day (INSET) or twilight training, use your previous staff questionnaires to inform your content.
  - What are your colleagues' roles?
  - Do all colleagues already know each other?
  - What previous RSE training have they done and how long ago?
  - What are their expectations of this training?
  - What is the purpose of this RSE training?
  - Do you know what your colleagues want to achieve?

This will help to tailor the training to their specific needs and improve confidence levels. Improved confidence levels will be your ultimate objective. Make sure your wider learning objectives come out of your previous research; that all objectives are clearly identified at the start of the training and returned to at the end of the session to assess whether they have all been achieved.

2. **Ensure you focus on a group agreement at the start of the day/training session.**

- Confidentiality is vital. The importance of being able to share feelings and concerns during these sessions is paramount. Learn together, in an environment that is supportive, not judgemental.
- Be open about the content that will be covered, acknowledge that it can be a sensitive and challenging area of work for some of your colleagues.
- Understand that how your colleagues work together during the training can model the principles of mutual respect and tolerance that will be highlighted in the training session and hopefully throughout your establishment.
- A good group agreement will mean that your colleagues feel safe and able to take a full part in the sessions. Everyone should know what the ground rules of the group are and have some input into the creation of them. To create a group agreement, ask your colleagues what topics they think they want to include. Rules that are worded positively so the group knows what to do, rather than what not to do feel warmer and more acceptable. For example, if someone suggests a rule of 'no shouting out', suggest 'Give yourself and each other space to think' as a way of re-phrasing this.

The group agreement should be written up briefly on flip chart paper so that everyone can see it. If it makes life easier edit it into a PowerPoint presentation and/or get it typed and printed off so that it can be referred to each session or given to colleagues for inclusion in folders, if you are using/collecting CPD evidence.

Try to ensure that all the following ideas are included in the group agreement, no matter what words you use.

**Confidentiality**

Explain that personal information which people share in the group must stay in the group and must never be discussed anywhere else. Tell your colleagues that it is good for them to share the new factual information and strategies learned, and that they can share what they have learned about themselves.

Under safeguarding procedures make sure that your colleagues understand that you cannot keep confidentiality if someone says that a child or other person at risk has been harmed or is at risk of harm. Explain to your colleagues that if you need to break confidentiality you will let them know first wherever possible.

**Only share what you want to share**

Explain that it is okay to discuss the situations that relate to helping our learners understand about sex and sexuality. Your colleagues should only share as much or as little as they feel comfortable sharing. It is important to remind them that they should consider what information they want to share with others before talking. I have seen and heard colleagues start a 'confessional' about their own relationships that are quickly regretted. If anyone starts to feel uncomfortable whilst they are talking then they can confidently state; 'I want to stop there' even if they were in the middle of saying something.

**Own your opinions**

Explain to colleagues that they should try to use 'I' as much as possible when they are sharing a point, so that everyone knows that they are stating their own opinion. For example, saying, 'Learners don't need to understand about same-sex relationships until KS3' gives the impression that everyone thinks this. It is better to say, 'I think that learners don't need to understand about same-sex relationships until they are 12'. Your colleague can then prepare to be challenged.

**Accept and respect**

Your colleagues will all have different viewpoints and will have a wide range of experiences and opinions. As a group you may find that there are colleagues whose lifestyle is different to many others in the group (for example, people in same sex relationships or people with a strong religious viewpoint). Our colleagues need to be able to accept and respect a person, even when they do not agree with their opinion. Explain to your colleagues that it is normal to feel uncomfortable sometimes when discussing topics concerning relationships, sex and sexuality.

**It's okay to disagree**

All your colleagues will be different. There are going to be disagreements. Explain to your colleagues that it is okay to say that they have a different opinion. Colleagues should be persuaded to use an agreed 'script'; 'I disagree with what you have just said because...' rather than 'You're wrong'.

**Listen to each other**

Encourage all your colleagues to take turns to talk one at a time (from previous experience of school training days that may be a tough one!).

**There is no such thing as a silly question**

Remind your colleagues that we all have different levels of knowledge and experience and that we can learn from each other.

**Possible Group Agreement**

- Confidentiality, caveat for Safeguarding Children/Vulnerable Adults
  - Please refer to 'someone I know/knew/teach/care for...', avoid using names
  - Respect others opinions, experiences and values
  - Have fun!
  - Keep to time
  - Be supportive
  - Listen to each other – try not to interrupt or talk over others
  - Give yourself and each other space to think
  - It's ok to leave the room if you need to
  - Only share what you want to share
  - Own your opinions – 'I' think...
  - It's ok to disagree/challenge respectfully
  - Try to join in all activities, but step away if you feel uncomfortable – that's ok!
  - There is no such thing as a silly question...!
3. **Try to be realistic** and honest with your colleagues (and head of your establishment) about what can be achieved in the session or sessions you have available.
- Developing particular factual RSE knowledge can be achieved during a certain session but improving skills and confidence can take any amount of time and understanding of individual needs – and the needs of the learners.
  - Exploring and reflecting on the attitudes and beliefs of your colleagues is difficult; yet this is what will be needed to enable your team to reflect and be able to deliver the Relationships and Sex Education your special learners deserve.
  - One RSE training session will not result in you creating a team of enlightened, confident, knowledgeable RSE practitioners; but it will be the start of a shared journey towards where you want to be.

Whilst supporting others in how to provide Relationships and Sex Education for our special learners it often becomes apparent that your colleagues may not have had a great previous education on these matters themselves. Have time to reflect on how your colleagues learned about Relationships and Sex. Would they have changed how this was provided; and by whom?

One way to achieve this is to ask where they got their 'RSE knowledge' from.

You could use something close to the questions I use at the beginning of staff training below;

- How happy were you with the Relationships and Sex Education you got when you were growing up?
- What information did you get: From your parents?
- From school lessons?
- From your friends?
- From magazines, internet or elsewhere?
- What did you think about the information; then and now?

As a colleague, trainer and facilitator, you cannot assume a certain shared level of knowledge and understanding about RSE in any group of adults. We all have a variety of experiences and knowledge due to a range of factors. For some of us the consequences, throughout life, of having poor RSE education in childhood means that we will need more support in reducing the anxiety around talking about and providing RSE.

I would stress that there will be significant differences in where we have gained our relationship and sex knowledge. From many a RSE training session delivered, in many schools, in many parts of the country, I can confidently conclude that the majority of us received our RSE knowledge predominantly from our friends.

Now, I don't know about you, but my friends were a little 'loose with the truth' and I subsequently spent most of my adolescence feeling completely inadequate (but that is too much to share here, I know!).

The question to be asked of your colleagues, the one to have them reflect on over a break possibly is this; If the majority of our special learners don't get their RSE information from family, from media or from school, then where do they get their knowledge? Is it from their friends, as we did?

Sadly our learners do not have the access to their peer network like neurotypical children; even if they are able to access clubs and activities of an evening or weekend, they will have some type of 'support'. Supervised fun.

We, the professionals, the 'educationalists', need to be the ones having discussions with our learners' support network, to ensure we attend to the knowledge and skills that our special learners need. Not want, but need, to keep themselves safe and to have as fulfilling a life as possible both now and in their future adult lives.

**4. Make it clear to staff that they are providing RSE all day, every day.**

It can be reassuring for our colleagues to know that when they do work around self-esteem, mutual respect, body image, managing conflict and communication skills they are also doing valuable RSE work. By demonstrating how some aspects of this learning are already well within the comfort zones of most of us, it can help build confidence to provide RSE knowing what they are already doing.

**5. Include some 'quick wins'**

... of resources, websites and activities that can be easily replicated in practice. Giving your colleagues the opportunity to directly experience activities will give them added confidence to use them in one-to-one or group work with their learners (RSE Hub, 2015).

**6. Guidelines for colleagues providing RSE sessions**

The climate we create in the classroom when providing RSE should always be positive with the core values of respect and responsibility modelled and expected in return.

- Acknowledge the fact that talking about relationships, growing up, puberty and sexuality can feel awkward and embarrassing. This acknowledgement should reassure our learners their school is a place where important and sometimes sensitive issues can be discussed safely.
- Set agreed rules and boundaries in relation to the language that is used and respecting others with different life experiences from our own.
- Use correct terminology. Some colleagues may feel uneasy about this, but that should be balanced with how important it is for our learners to be clear about what is being discussed. These words are just that and should be 'normalised'.
- Boundaries of discussion topics; 'personal experience' – ensure learners are aware of the boundaries of confidentiality and our child protection duties.
- Consider the layout of the physical environment where possible. Arranging chairs in a circle without any tables works well to create an informal atmosphere.
- Ensure you and your colleagues sit within the circle, with your learners, so to be part of the group.
- Ensure other colleagues or learners do not interrupt the sessions so that the right to privacy is respected.
- Start and build up a folder for each learner to keep their work in.
- It is good practice to begin each session with a recap on the previous sessions' learning.
- Diversity should exist in the group, even implicitly with on-going discussions of the range of diversity with our communities. Awareness of cultural differences in relation to relationships and sexuality will also need addressing.
- Myths or stereotypes in relation to our special learners as sexual beings will need exploring.
- In order to reinforce the message of appropriate touch, ensure learners have the opportunity to practice appropriate greetings at the beginning of each session.
- Parents and carers of your learners need to be informed of session content according to the school's policy and procedures.
- Your first session should involve developing agreed group rules to follow throughout the course. A gentle reminder of these rules on subsequent sessions will be helpful as will agreed adaptations.

## **If we break down the elements of a well-rounded, long term, RSE programme what do we expect to see?**

It is essential for our learners' development and well-being that they experience a programme of RSE at a level which is appropriate for their age and physical development as well as being mindful of cognitive ability to understand new concepts (Dixon, 2006).

Your colleagues may need support to find the most effective teaching methods and resources to use in their classroom. RSE knowledge becomes deeper if our learners work in a supportive group where they feel safe. Keep activities interactive where possible and use strategies which encourage plenty of practice of useful skills. As with everything we do in special schools, constant repetition and reinforcement is key.

When providing RSE to special learners, our work in class will need to be explicit and terminology correct, in concrete terms. We need to ensure the use of correct words for body parts and functions, from everyone in the school. While we can accept words and slang used by learners, the shared, clear message must be that 'we use the correct words here so we can all understand what we mean'. There have been cases where our learners have been classed as 'unreliable witnesses' in investigations of sexual assault due to their inability to use correct names of body parts. It is not our children's or our learners' embarrassment of these words that dissuade us to use the correct names for body parts – but our embarrassment. And that is shameful.

Visual material must be clear and unmistakable, as must anatomically correct, three dimensional models (Dixon, 2006).

## **Attitudes, skills and knowledge that may be covered in RSE (in no particular order)**

- Developing a positive attitude towards self and others including developing self-concept and self-esteem
- Developing effective communication skills including elements of non-verbal communication such as personal space and body language
- Vocabulary (and use of augmentative communication) to discuss feelings and ones' body (including the correct names for genitals)
- How to look after our bodies; personal hygiene and health screening
- How we change as we grow up; we all need to be prepared for puberty
- Differences between males and females
- Differences in family construction; what makes a family?
- Public and private behaviour, modesty and privacy
- Appropriate and inappropriate touch of self and others
- The importance of consent to touch another person's body or have someone touch us
- How to keep ourselves safe and be assertive
- Relationships; family, friends, school staff, future work colleagues and potential sexual partners
- Developing a positive attitude to self and others
- Sexuality and gender
- Identifying as transgender or non-binary
- Who to talk to and ask for help or support
- Bullying; why it can happen and how to get help
- Reproduction and how to prevent pregnancy
- Sexually transmitted infections and how they can be prevented

## **Pupils who use alternative methods of communication**

Some learners will have physical, visual or hearing impairments or are unable to use speech and may use signing, symbols and/or communication switches and aids. Our colleagues should adapt their RSE provision to ensure that all learners have equal access. (For example 'Writing

with Symbols' software includes 'private' body parts, with a range of clear images of body parts and functions. 'Proloquo' has a RSE page and body part images available).

### **Our special learners with PMLD will not be excluded from your school's RSE journey**

Using the skills and knowledge of appropriate strategies and activities, our learners with PMLD can experience the vital RSE elements: self-awareness, gender awareness, body recognition, privacy and self-advocacy.

Autistic learners may require individual teaching strategies to meet their specific needs. RSE can be part of a TEACHH programme and Picture Exchange Communication System (PECS) is suitable for many RSE areas of work. Again, explicit clear teaching and use of correct words, pictures and visual aids are essential to avoid confusion (Dixon, 2006).

It is obviously important to find the right balance between supporting our learners to understand and experience different kinds of relationships, and empowering them with the knowledge and skills they need to safeguard themselves from every type of abuse. The protection of our vulnerable learners is crucial and their welfare must be considered at all times, whilst not restricting their learning to a life without relationships and mistakes.

I am sure we have all made a mistake or two in a relationship, or in our choice of relationships. Our learners need to know that they too may make mistakes, but by giving them the understanding and skills to self-advocate in terms of relationships and choices we enable them to share their voice.

### **Let us be honest with ourselves, our learners and their parents**

Be clear and honest to your colleagues that talking about relationships and sex can feel awkward. Also encourage you colleagues to share this acknowledgement with parents, carers and their learners. Hopefully it will reassure learners and their parents that their school is a place where important and potentially embarrassing issues will be discussed and shared with sensitivity. The learners know that their school, college, care home, respite or hostel are places where they know they can talk, be listened to and have support and factual information.

As we have seen with the protests organised by some religious and parental groups across the country; it is one thing to convince our colleagues of the importance of Relationships and Sex Education, it can be far more challenging to get the parents and carers on board.