



Alliance for Choice Derry (AfCD) response to Department of Education Consultation on Relationship and Sexuality (RSE) Education

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1 Introduction

Alliance for Choice Derry (AfCD) was founded in Northern Ireland in 1996. We are the largest direct-action feminist group in the North-West, who fight for reproductive justice in the north and south of Ireland and offer international solidarity.

As an organisation with a membership of over 4,000 members across the north-west of Northern Ireland, we wish to respond to the consultation on Relationship and Sexuality (RSE) Education.

Since February 2022, we have devised an education and training module to combat abortion stigma and share information, advice and support about the now legal abortion pills. Our Abortion Stigma and Pills Workshops have taken place in many community and workplace settings across the island of Ireland, with over 300 participants. AfCD recognised the public health need for this education module, due to the lack of commissioned abortion services in Northern Ireland. We recognise that the lack of an age-appropriate, comprehensive and scientifically accurate education on sexual and reproductive health and rights in schools, as well as lack of a public health awareness campaign about abortion access, contributes to misinformation and stigma within our communities.

Throughout our workshops, the majority of participants express their concerns about the lack of relationship and sexuality education within schools. Participants have also emphasised that the current provision of relationship and sexuality education within schools is a postcode lottery, with schools in the North-West often missing out on such education entirely. Participants who had received relationship and sexuality noted that it only took place in Science or Religion lessons which resulted in the education being poor, biased, stigmatising and heteronormative.

On the 16th November 2023, we hosted a RSE Consultation Event based in Derry-Londonderry, with 25 participants. We used this opportunity to engage with members of the community to discuss the upcoming changes to RSE so they could make their opinions heard.

Participants at this event included parents, carers, secondary school pupils, teachers, healthcare professionals and Community and Voluntary Sector workers. One secondary school pupil stated that they would like to see RSE treated as a normal part of the school curriculum.

“It’s an important subject to know about. I only know about topics that are covered in RSE because my mum’s open but not everyone’s is. None of my friends know about this stuff. I would especially like to see more inclusion of LGBTQ+ identities in RSE. We need this education so we don’t accidentally say anything that may be harmful to someone who’s LGBTQ+” in our school. It benefits everyone.”

Another participant who is a teacher-in-training emphasised that “Students really want to talk about relationship and sexuality education but feel like they can’t in case they get in trouble. RSE should be normalised so these pupils don’t feel stigmatised for wanting to learn about it.

There is a fear on both sides, as teachers also worry about saying the wrong thing and being penalised. Standardised RSE is needed so that the element of fear around RSE can be removed from teachers and pupils alike. Some educators are currently only covering the relationship aspect and not covering all the issues that need to be addressed as part of RSE provision. There needs to be a clear age-appropriate, inclusive and scientifically accurate curriculum assigned to all schools across NI.”

2 General Comments

We fully support the findings shown in the CEDAW Optional Protocol Inquiry Report (2018) which recommended that the State:

86 (d) Make age-appropriate, comprehensive and scientifically accurate education on sexual and reproductive health and rights a compulsory curriculum component for adolescents, covering early pregnancy prevention and access to abortion, and monitor its implementation.

In 2009 and again in 2018, the United Nations Educational, Scientific and Cultural Organization (UNESCO) published *International Technical Guidance on Sexuality Education: an evidence-informed approach*, positioning sexuality education within a framework of human rights, the Sustainable Development Goals, and gender equality. The *Guidance* promotes structured learning about sex and relationships in a manner that is “positive, affirming, and centred on the best interest of the young person”. By outlining the essential components of effective sexuality education programmes, the *Guidance* is designed to support countries “to implement effective sexuality education programmes adapted to their contexts”.

The 2018 *Guidance* is based on an evidence review carried out for UNESCO by researchers from the University of Oxford’s Centre for Evidence-Based Intervention. The evidence review is based on results from 22 rigorous systematic reviews and 77 randomised controlled trials in a broad range of countries and contexts. The research reaffirmed the 2008 findings that curriculum-based sexuality education programmes contribute to the following outcomes:

- Delayed initiation of sexual intercourse
- Decreased frequency of sexual intercourse
- Decreased number of sexual partners
- Reduced risk taking
- Increased use of condoms
- Increased use of contraception

The evidence reviews concluded that sexuality education programmes that promote abstinence-only do not work. Such programmes have been found to be ineffective in delaying sexual initiation, reducing the frequency of sex or reducing the number of sexual partners. By contrast, programmes that combine a focus on delaying sexual activity with content about condom or contraceptive use are effective (Kirby, 2007; Underhill et al., 2007; UNESCO, 2009; Fonner et al., 2014).

Sexuality education has the greatest impact when school-based programmes are backed up with community elements, including condom distribution; training for health providers to deliver youth-friendly services; and involving parents and teachers (Chandra-Mouli et al., 2015; Fonner et al., 2014; UNESCO, 2015a). Further, linking school-based sexuality education with non-school-based youth-friendly services, is particularly important for reaching marginalised young people, including those who are not in school (UNESCO, 2016).

Overall, the evidence base detailed in the UN's Guidance shows that comprehensive sexuality education has positive effects, including increasing knowledge about different aspects of sexuality, behaviours, and risks of pregnancy or HIV and other STIs. It also reaffirmed the evidence that sexuality education, in or out of schools, does not increase sexual activity, sexual risk-taking behaviour or STI/HIV infection rates (Fonner et al., 2014; Shepherd et al., 2010).

It is unfortunate, then, that the consultation takes a confrontational stance by directly stigmatising RSE as a controversial and uncomfortable topic rather than an integral and inherently affirming part of a young person's education (UNGA, 2010).

3 International Obligations

United Nations treaty bodies have viewed the lack of access to sexual and reproductive education as a barrier to compliance with the State's obligation to guarantee the rights to life, health, non-discrimination, education and information. For example, the Human Rights Committee has urged the removal of barriers to access by adolescents to information about safer sex practices, such as condom use. We have cited above the comments related to the Convention on the Elimination of All Discrimination Against Women. The UN Committee on the Rights of the Child has recommended that States include sexual education in the official programmes of primary and secondary education, while that Committee together with The Committee on Economic, Social and Cultural Rights has stated that the right to health and the right to information require States to refrain from censoring, withholding or intentionally misrepresenting information relating to health, including sex education and sexual information.

4 Question Responses

Question 1: The content of teaching and learning resources for Learning for Life and Work developed by CCEA should be factual and contain age-appropriate, comprehensive and scientifically accurate education on sexual and reproductive health and rights, covering prevention of early pregnancy and access to abortion and these resources

should not advocate, or oppose, a particular view on the moral and ethical considerations of abortion or contraception.

We agree with this statement.

Western Europe pioneered the introduction of school based RSE programmes 50 years ago. Countries such as Sweden, Norway and the Netherlands have long-standing RSE programmes in schools, and significantly lower birth rates than countries where discussions of issues related to sexuality and RSE in schools remain more sensitive (UNESCO, 2018). AfCD believe that factual, inclusive and comprehensive RSE is essential to the health and wellbeing of young people in Northern Ireland. AfCD suggests that the wording in this statement be changed from “should be factual” to “must be factual” in order to prevent any malicious misinformation being presented due to the suggestive nature of the phrasing.

RSE classes should be rigorously checked and continuously updated (including any third party RSE providers). RSE should focus on learning factual science based information at regular, age-appropriate intervals throughout schooling. Information resources should not comment on the "moral and ethical considerations of abortion or contraception" as RSE classes are not the appropriate space for moral and ethical discussion of abortion or contraception.

Research demonstrates that curriculum based RSE contributes to healthier young people with delayed and informed sexual initiation, decreased frequency in sexual intercourse, decreased number of sexual partners, reduced risk-taking, increased and more consistent condom use, increased and more consistent use of contraceptive methods. (UNESCO, 2018). The education that RSE provides will serve to ensure young people have an array of options and are well informed about their relationship and sexuality health across the spectrum.

To this end, AfCD believes that RSE resources should align with the fact that abortion is not a criminal act in Northern Ireland and therefore should focus on the importance of freedom of access, and provide non-directive and appropriate signposting.

We are also concerned with the phrasing “these resources should not advocate... a particular view”. Already this could be construed as moralising reproductive care by legitimising the argument against abortion. As such, we seek clarification on what advocating and scrutinising of resources means pragmatically. For example would education on where to get help with seeking an abortion count as ‘advocating’ for abortion? Or how to talk to your support system about wanting an abortion? AfCD strongly believe and assert that RSE curriculums must not frame abortion as a debate - rather abortion should be clearly discussed as a form of healthcare.

Question 2: Parents/carers should be informed about the specific nature and content of the age-appropriate, comprehensive and scientifically accurate education on sexual and reproductive health and rights, covering prevention of early pregnancy and access to abortion.

We agree with this statement.

QUB research in 2020 concluded that parents have an important *complementary* role to play in SRH education by sharing their own experiences, values, beliefs and expectations in relation to sexual behaviour and SRH (Aventin Á, et al, 2020). With this in mind, AfCD believes it is fair to agree that parents and carers should have access to what their child is being taught at school.

AfCD would like to query why the Department of Education is singling out RSE from the rest of the curriculum at Key Stages 3 and 4. We believe that additional parental access to RSE lesson material compared to subjects such as English, Maths or Science is unnecessary. To single out the RSE curriculum in this way is to imply that RSE is somehow dangerous or requires more parental input than other subjects. The nature and content of RSE information should align with the fact that abortion is not a criminal act in Northern Ireland and therefore should focus on the importance of freedom of access, and provide nondirective and appropriate signposting.

AfCD believes that parents and carers can play an important role in the education of a young person by supporting learning outside of the classroom, however this is not always the case. Appropriate terminology, information about abortion, STI treatment and support can save lives. It is worth noting that RSE and pastoral support in schools may be the only place that young people can receive information about their sexual and emotional health - parents may not be supportive.

There must be further adult education across the board to support parents/carers in understanding and responding to issues discussed in RSE lessons and as an organisation we believe that supporting collaborative efforts between caregivers and young people is an important way to dispel myths, address stigma, and support inclusive RSE.

Question 3: The United Nations Convention on the Rights of the Child includes at Articles 1-3 and 12 the rights of the child to ‘express their views, feelings and wishes in all matters affecting them, and to have their views considered and taken seriously’ and at Article 5 ‘the rights and responsibilities of parents and carers to provide guidance and direction to their child as they grow up so that they fully enjoy their rights. This must be done in a way that recognises the child’s increasing capacity to make their own choices.’ The Department’s guidance, when developed, should consider in such instances how schools balance the rights of both children and parents/carers in implementing the regulations.

We disagree with this statement.

Research has shown that young people in Northern Ireland have repeatedly answered this question - they want their views taken seriously and to be realised and accepted as capable of making their own choices (QUB, 2019). AfCD believes that having a space within schools that provides children, teens and young adults with educational age appropriate material on

relationships and sex is a good thing and should be actively encouraged for the emotional and physical well-being of young people.

To leave young people to figure out relationships and sex without appropriate resources and education is to leave them and their peers vulnerable to potentially harmful or even dangerous situations and relationships. The rights of the child should be a priority. AfCD believes that the Department should consider what to do in instances where children are being denied access to RSE education by carers or parents.

It is concerning to see the juxtaposition of children's rights and parent/caregiver rights on the basis that RSE is a safeguarding concern, when it is in fact a well-researched, evidence-based curriculum. Evidence-based RSE curriculums that are designed to inform, support, and encourage young people to learn about healthy relationships, self-expression, and healthcare, including reproductive care and sexual health support the rights of the child. AfCD believes we should reject the argument that children's rights are negotiable and emphasise that comprehensive fact-based RSE aligns with the key goals of Article 5 listed above.

Question 4: Pupils and parents/carers should have access to an overview of their school's RSE policy and planned RSE programme.

We agree with this statement.

As noted in Question 2 and 3, AfCD believes that RSE should not be treated as a safeguarding concern and instead should be seen as an opportunity to enhance the wellbeing and health of children and young people.

In 2019, QUB research found that only 23% of young people felt adults trusted them to make their own choices about relationships and sex (QUB, 2019). With this in mind, it is fair to agree that parents/carers have access to what their child is being taught at school. However, to single out the RSE curriculum is to imply that it is somehow dangerous or requires more parental input than other subjects.

The Department should also consider more broadly what is needed in terms of education and support for parents because RSE should be underpinned at home. Knowledge of the RSE curriculum may allow pupils to have at-home discussions with parents/carers, allowing for more exploration and the potential of greater learning across family generations. It is important that RSE curriculums are not isolated from the rest of a student's education. RSE intersects with health, social, and cultural issues.

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