

Submission of Family Planning NSW

Australian Curriculum Review

July 2021

Family Planning NSW welcomes the opportunity to make a submission to the Australian Curriculum, Assessment and Reporting Authority (ACARA) regarding the 'Australian Curriculum Review'.

About us

Family Planning NSW is the leading provider of reproductive and sexual health services in NSW and Australia. We are experts in clinical service provision and comprehensive sexuality education. Our mission is to enhance the reproductive and sexual health and rights of our communities by supporting all people to have control over and decide freely on all matters related to their reproductive and sexual health. Our work is evidence-based and shaped by our research.

Each year we provide more than 31,000 clinical occasions of service to clients, school and community based education to over 3,350 students and young people, and training to over 200 teachers on how to effectively deliver comprehensive sexuality education that aligns with Australian and NSW curricula.

Our services are targeted to marginalised and disadvantaged members of the community, including young people, people from culturally and linguistically diverse and Aboriginal and Torres Strait Islander backgrounds, and people with disability. A key focus area for our organisation is enabling young people to achieve good reproductive and sexual health by providing youth-targeted services. The services we provide to support young people include:

- youth-friendly reproductive and sexual health clinics across NSW
- health information and education through our bodytalk.org.au website
- community and school-based education for students and young people
- information and workshops for parents and carers on supporting their children

Family Planning NSW offers training, information and resources for teachers and educators to enable them to deliver holistic comprehensive sexuality education in accordance with Australian and NSW curricula. All Family Planning NSW professional development courses for teachers align with the Australian Professional Standards for Teachers. Our courses have previously been endorsed by the NSW Education Standards Authority (NESA) as NESA registered professional development.

Recommendations

Family Planning NSW recommends:

1. include key components of timely, holistic and age-appropriate comprehensive sexuality education in the Australian Curriculum as per UNESCO'S International Technical Guidance on Sexuality Education
2. embed key components of respectful relationship and consent education in content descriptors to ensure consistent provision across all schools
3. include the provision of 'relationship and sexuality education' from Foundation – Year 2 in age and stage appropriate ways as per UNESCO'S International Technical Guidance on Sexuality Education
4. include puberty and body image education in age and stage appropriate ways as per UNESCO'S International Technical Guidance on Sexuality Education e.g. from an earlier age and continuing through to early high school
5. ensure reproductive and sexual health education is integrated and prioritised within the Health and Physical Education curriculum as per UNESCO'S International Technical Guidance on Sexuality Education

6. explore opportunities to establish stronger comprehensive sexuality education links across curriculum areas
7. increase access to professional development and evidence-based resources, as part of the Australia Curriculum, to teachers and educators to ensure consistent and effective delivery of comprehensive sexuality education
8. consult with key stakeholders and experts to ensure the Australian Curriculum aligns with international best practice provision of comprehensive sexuality education

Key points

Family Planning NSW believes that everybody in every family should have access to high-quality reproductive and sexual health services and comprehensive sexuality education. We strongly affirm the need for consistent provision of comprehensive sexuality education to people of all ages, particularly students and young people, to ensure that the reproductive and sexual health and rights of all people are met. Embedding comprehensive sexuality education within the Australian Curriculum supports international best practice and consistent provision.

Following the growing calls for holistic consent education to begin at an earlier age, it is essential that the Australian Curriculum reflect student priorities and current evidence that supports lifelong teaching of comprehensive sexuality education which includes essential topics such as respectful relationships and consent.

Family Planning NSW recommends that the Australian Curriculum specifically reference and integrate the provision of comprehensive sexuality education into the Health and Physical Education curriculum, along with its evidence base.

1. Comprehensive sexuality education and the Australian Curriculum

Family Planning NSW advocates for comprehensive sexuality education to be specifically integrated within the Australian Curriculum to ensure all students have the skills and knowledge required to achieve and maintain respectful relationships and optimal reproductive and sexual health and wellbeing throughout their life.

Comprehensive sexuality education is an evidence-based, age appropriate and culturally relevant approach to teaching and learning about sexuality and relationships, inclusive of the cognitive, emotional, physical and social aspects they encompass. Comprehensive sexuality education is also recognised as international 'best practice'. Providing timely, holistic, age-appropriate and evidence-based comprehensive sexuality education promotes students' wellbeing, emotional development and safety.(1-3)

Comprehensive sexuality education includes provision of education on the following topics to support knowledge and skill development:

- the human body, development and autonomy
- puberty and body image
- respectful relationships and consent
- fertility, pregnancy, pregnancy options and contraception
- sexual health and sexual behaviour
- gender and sexual diversity
- the influence of technology and media
- health literacy and decision making

As an early intervention strategy, comprehensive sexuality education ensures not only the reproductive and sexual health and wellbeing of students, but supports students to develop lifelong protective skills including the ability to practice informed consent and develop and maintain respectful relationships.(2, 4) Further,

comprehensive sexuality education improves student health literacy, and encourages the development of critical thinking skills, aspects of which feature throughout the Australian Curriculum. Comprehensive sexuality education contributes to reduced sexual risk taking, including delayed initiation of sexual intercourse, increased use of contraception and condoms, reduced rates of unintended pregnancy and reduced engagement in gender-based violence.(2-4)

From a safety perspective, it is important that all students learn skills that enable them to develop, promote and preserve healthy interpersonal relationships from an early age.(5) Comprehensive sexuality education seeks to empower students, particularly young girls and other vulnerable and marginalised students, to identify signs of healthy and unhealthy relationships and make informed decisions about how to promote individual safety.(3) Additionally, comprehensive sexuality education has been found to be a protective factor and reduces risk of family, domestic and sexual violence in later life.(3, 5)

Consistent implementation of the core components of comprehensive sexuality education, as mentioned above, is needed to ensure students have the knowledge and skills required to develop and maintain respectful relationships and achieve optimal reproductive and sexual health. Comprehensive sexuality education ensures all student needs are met, including students belonging to diverse groups such as young people with disability, who are sexuality and/or gender diverse and young people from culturally diverse backgrounds, including Aboriginal and Torres Strait Islander students.

Recommendation: Include key components of timely, holistic and age-appropriate comprehensive sexuality education in the Australian Curriculum as per UNESCO'S International Technical Guidance on Sexuality Education.

2. The need to embed comprehensive sexuality education into Australian Curriculum: topic feedback

While the Australian Curriculum recognises some of the core components of comprehensive sexuality education, including respectful relationships and consent, it does not cover comprehensive sexuality education in its entirety. We are concerned that essential components of comprehensive sexuality education, including: reproduction, pregnancy, pregnancy options and contraception; sexual health, STIs and condom use; gender and sexual diversity; the influence of technology and the media, pornography and sexting; and, bodily autonomy are not included in the Australian Curriculum.

Respectful relationship and consent education

Family Planning NSW is pleased to see greater focus on respectful relationship and consent education in the Australian Curriculum. It is essential that all students receive integrated, age-appropriate consent and respectful relationship education to develop essential life skills, including the ability to develop and maintain respectful relationships, provide consent and negotiate boundaries. We are, however, concerned that essential components of consent and respectful relationship education primarily appear in the Curriculum's 'content elaboration' sections. Content elaborations provide teachers with suggestions of ways to teach the content descriptions – they are optional material only and not mandatory teaching.

Additionally, Family Planning is concerned that respectful relationship and consent education is not specifically mentioned in the 'content description' or 'year level description' and 'achievement standard' for Foundation year, which may result in students missing out on essential foundational level comprehensive sexuality education given the non-essential teaching nature of the 'content elaboration' section. Family Planning NSW supports the inclusion of relationships and sexuality education throughout Foundation to year 10. We do not believe that Foundation – Year 2 should be reduced to 'relationships only' education.

There does not seem to be any clear mapping or scaffolding of consent education throughout the year levels. Consent education in early years should focus on bodily autonomy, privacy, body rights and friendships and progress in a clear and mapped way to older students learning about sexual consent which is critical for healthy, pleasurable and consensual sexual behaviour. Additionally, reference should be made on the impact of illicit drugs and alcohol on sexual consent.

While we are pleased to see greater focus on respectful relationship and consent education, this education should not be at the detriment of other essential components of comprehensive sexuality education including, but not limited to, puberty, reproduction, reproductive and sexual health, pornography and sexting, gender and diversity.

Recommendation: Embed key components of respectful relationship and consent education in content descriptors to ensure consistent provision across all schools.

Recommendation: Include the provision of 'relationship and sexuality education' from Foundation – Year 2 in age and stage appropriate ways as per UNESCO's International Technical Guidance on Sexuality Education.

Puberty and body image education

Puberty is a time of physical, social and emotional change. It is essential that all students have the knowledge and skills required to understand and manage associated changes in a health way. Family Planning NSW is concerned that age-appropriate education on puberty, another essential component of comprehensive sexuality education, does not specifically begin until Year 5 and 6 where students learn to "investigate resources and strategies to manage changes and transitions, including changes associated with puberty." There is no mention of the word 'puberty' in the Australian Curriculum prior to this.

With young girls reaching puberty earlier, teachers need to address topics earlier than suggested by the Australian Curriculum to ensure safety, student wellbeing and healthy development.(6) It is important that students are aware of bodily changes and healthy development prior to the onset of puberty, which can occur from the age of eight. The United Nations Educational, Scientific and Cultural Organization's (UNESCO) International Technical Guidance on Sexuality Education recommends beginning curriculum-based puberty education at the age of five, where students learn to define puberty, understand associated changes and acknowledge that puberty is a normal element of healthy development.

Recommendation: Include puberty and body image education in age and stage appropriate ways as per UNESCO's International Technical Guidance on Sexuality Education e.g. from an earlier age and continuing through to early high school.

Reproductive and sexual health education

We are concerned that reproductive and sexual health has been removed as a focus area. It is essential that students receive information on reproductive and sexual health including, but not limited to: reproduction, pregnancy, pregnancy options and contraception; sexual health, STIs and condom use; and, gender and sexual diversity.

Evidence shows that comprehensive sexuality education has a positive impact on student reproductive and sexual health and wellbeing, including notable reductions in STI rates and unintended pregnancy.(2, 7) When provided proactively, and as part of an integrated curriculum, comprehensive sexuality education increases an individual's ability to make informed decisions regarding reproductive and sexual health.(2, 7) If students are not taught how their body works and how pregnancy occurs in late primary school, they are at significant increased risk of unintended pregnancy and STI transmission in high-school and early adulthood. It cannot be assumed that students know this essential information. It is our experience, from delivery of primary and high school education sessions that many students in high-school are still unaware of how their body functions and as such how pregnancy occurs. Reproduction should be explicitly included from Years 5-6 onwards.

In regard to Curriculum content on sexual health, there is a notable absence of specific reference to essential sexual health topics, including safe sexual decision making and practice, STI prevention, testing and treatment as well as stigma associated with STIs. Content that could be included in Years 9-10, include:

- AC9HP10P06_E6 - include use of condoms and dams under safe blood practices

- AC9HP10P07_E4 - highlight that pornography is not a reliable source of health information
- AC9HP10P08_E5 - include examples such as stigma around menstrual health, gender and sexual diversity

Discussions around reproductive and sexual health education should also include information around sexuality, diversity, sexual behaviour, pleasure, sexting and pornography and gender roles as per the UNESCO Technical Guidance on Sexuality Education. There is also a need to ensure that information on reproductive and sexual health is not solely heteronormative and is inclusive of all students. We are concerned that the Australian Curriculum does not include any of the above topic areas.

Recommendation: Ensure reproductive and sexual health education is integrated and prioritised within the Health and Physical Education curriculum as per UNESCO’s International Technical Guidance on Sexuality Education.

3. Making links across curriculum areas: opportunities for improvement

There is great opportunity to highlight links across curriculum areas to address overcrowding concerns and ensure that comprehensive sexuality education is not limited to the Health and Physical Education curriculum.

Comprehensive sexuality education consistently addresses and supports: student wellbeing; emotional, physical and social development; personal safety; respectful relationships; consent; and, health literacy. Evidence demonstrates the widespread benefits of consistent provision, which could be achieved through implementation of the Australian Curriculum and provision of funding for teachers and educators to attend training in providing holistic, age-appropriate and inclusive comprehensive sexuality education.(1, 2, 4, 8, 9)

Research indicates that students want holistic comprehensive sexuality education, delivered across a range of curriculum priorities.(1, 2) A contemporary, evidence-based approach to comprehensive sexuality education should include:

- the use of sex-positive teaching strategies, which present balanced information about positive and negative aspects of sexuality, respectful relationships and use a holistic, evidence-based and inclusive approach that is non-judgemental and promotes respect and consent
- a holistic approach to health that includes reproductive and sexual health alongside mental health and physical wellbeing
- recognition of diversity, including concepts of diversity in gender and relationships
- reproductive and sexual health including contraception, STI treatment and prevention
- preventative health checks – in addition to STI testing, young people need to learn about cervical cancer prevention, with the HPV vaccination and screening with HPV DNA testing, along with breast and testicular health checks.

While Health and Physical Education is mandatory for all students until year 10, Family Planning NSW believes that comprehensive sexuality education, particularly content around the topic areas of puberty, online safety, the influence of technology, pornography, and relationship and consent education should not be confined to fit within one key learning area. For example, there is significant opportunity to incorporate digital safety, online relationships, pornography and sexting within the Digital Technologies curriculum. The current Digital Technologies curriculum references “ethical understandings”, “rights” and “online safety”, however, does not specify the context in which learning should be applied, limiting opportunities to discuss reproductive and sexual health in relation to digital safety.

Recommendation: Explore opportunities to establish stronger comprehensive sexuality education links across curriculum areas.

4. Professional development and training is required for quality and effective delivery

Teachers and educators require skills and confidence to deliver timely and holistic comprehensive sexuality education, including information on puberty, respectful relationships and consent, that meets student's health and wellbeing needs.(10)

A Family Planning NSW needs assessment of 339 NSW teachers and principals in 2015 found:

- almost half of teachers (39%) and principals (43%) reported that when sexual health curriculum is a priority, this is supportive of the provision of essential education
- limited time and resources were the primary constraining factors limiting comprehensive sexuality education provision
- 54% of teachers indicated they need more assistance in addressing the issues of pornography and media representations of sex and sexuality.

Teachers who feel confident to deliver relationships, sexuality and sexual health content will mean they are more likely to prioritise the delivery of comprehensive sexuality education and have the confidence to integrate the content with other relevant topics. Integrating sexuality and sexual health content across the curriculum may destigmatise these topics, engage student's interests and reduce pressure on an overcrowded timetable for teachers.

Family Planning NSW offers training, information and resources for teachers and educators to enable them to deliver age-appropriate comprehensive sexuality education. Our training and resources for primary and secondary school teachers deliver age-appropriate information on relationships, sexuality and reproductive and sexual health information, in accordance with our state and national curricula.

Recommendation: Increase access to professional development and evidence-based resources, as part of the Australia Curriculum, to teachers and educators to ensure consistent and effective delivery of comprehensive sexuality education.

Conclusion

There is significant opportunity to ensure the Australian Curriculum reflects international best practice in regard to the provision of comprehensive sexuality education for students. The current Consultation Curriculum does not include many of the key components of comprehensive sexuality education, including reproductive and sexual health, which may result in increased rates of STIs, unintended pregnancy and poor reproductive and sexual health. We encourage ACARA to further consult with key stakeholders and experts such as Family Planning NSW to ensure the Australian Curriculum aligns with international best practice and fosters the health and wellbeing of all students.

References

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