

The Australian Curriculum Health and Physical Education

(Version 6.0 dated Tuesday, 18 February 2014)

Australian Curriculum Assessment and reporting Authority (ACARA)

Response by Family Planning Victoria





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Sexual & Reproductive Health
Care. Education. Advocacy.

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Family Planning Victoria congratulates ACARA on the consultative development of the Australian Curriculum and we welcome the opportunity to provide feedback for the review that is currently in progress. Our comments relate specifically to the Australian Curriculum: Health and Physical Education Version 6.0.

Family Planning Victoria is the peak provider of sexuality education programs to schools and teachers in Victoria. We are well placed in the sector to provide valuable, specialist sexuality education comment on Version 6.0 for ACARA's consideration.

The Australian Curriculum: Health and Physical Education Version 6.0 makes clear the importance of health and physical education to assist students to 'develop the knowledge, understanding and skills to strengthen their sense of self, and build and manage satisfying relationships'.

While this is applauded, Family Planning Victoria strongly recommends that guiding principles regarding sexuality education, be included in the Curriculum Content Descriptions under the Elaborations for Years 1 through to 9 (pages 19-48). Sexuality is a sensitive and potentially contentious subject and Family Planning Victoria is aware of the number of teachers that feel challenged working in this area of the curriculum. Many teachers have no, or very little, undergraduate training in sexuality and are unsure of pedagogical approaches. If the Elaborations clearly mention content related to sexuality (where appropriate), this would go a long way to ensuring a consistent, nationalised platform on which schools can base their sexuality education programs. Our suggestions are appended to this document as Attachment A.

While we have made suggested changes to the content descriptions and elaborations, we would like to congratulate ACARA on the inclusion of a range of references to sexuality education in this document. The glossary section of the document is very thorough, particularly the reference to 'pleasurable and safe sexual experiences, free of coercion, discrimination and violence', under the definition of sexual health and 'gender roles and identities, sexual orientation, pleasure, intimacy and reproduction,' in the definition of sexuality. These references allow a comprehensive, inclusive and positive framework of sexuality to be used as a common starting point by school communities.

The Australian Curriculum: Health and Physical Education

Family Planning Victoria believes that whilst the Australian Curriculum: Health and Physical Education makes a number of references to sexuality and has a number of content descriptions that could potentially include sexuality content, it does not incorporate sufficient exploration of topics in relation to sexual and reproductive health and wellbeing. We find that some topics are:

- not clearly defined, exposing the risk of teachers not covering important components that would help to promote positive behaviour and relationships. Studies undertaken by Family Planning Victoria have found that the biggest barriers to teaching sexuality education include a lack of teacher comfort and confidence. If teachers know what they are expected to teach, because it is clearly articulated in the curriculum, opportunities for professional development can be provided by schools to fill any information or skill gaps to address lack of knowledge, comfort or confidence. Expanding definitions and including relevant examples under the Elaborations will provide clearer guidelines which are not open as widely to individual interpretation. This provides teachers with the confidence that they are clearly acting within curriculum requirements, even for potentially sensitive subjects such as sexuality. *Our suggestions are appended to this document as Attachment A.*
- introduced too late, where children's experiences or questions about certain topics may not be in line with what students want/ need to know in earlier year groups. (For example, conception, reproduction, puberty, the diversity of families etc). Not exploring these concepts early in an age-appropriate way could have negative impacts on a child's health and wellbeing. In particular, FPV believes there is a need to include an overview of puberty at Levels 3 and 4 of the curriculum to adequately reflect the reality of children's physical development.

Overall, key topics that need coverage include:

- sexual diversity. (It should be noted that 8-14% of students are same-sex attracted. Studies have shown that sexuality education is irrelevant to a substantial number of same-sex attracted students). We note the section in the document (page 11) which provides an excellent overview of issues relevant to same-sex attracted and gender-diverse students, however we believe if this topic is not explicitly noted in the curriculum Elaborations, then many teachers may choose to not include work on this topic.
- gender/ power. (Not only with regard to violence against women, but extended to include social aspects of human sexuality that impact boys and girls differently, such as social stigma around girls who may be seen as promiscuous if they prepare for safer sex)

- contraception and sexually transmissible infections
- more references to respectful relationships at Year 7 and 8 levels
- positive sexuality. (To ensure that the focus is not only on STIs or unintended pregnancy prevention)
- intimacy/ discourse of pleasure. (Including an acknowledgement of humans as sexual beings)
- reproductive health. (Including fertility, how to access health checks etc.)
- the impact of porn, sexting and technology on sexual health.

Conclusion

Family Planning Victoria strongly encourages ACARA to adopt the Victorian approach in relation to the compulsory teaching, assessment and reporting of sexuality education.

Family Planning Victoria would like to thank ACARA for this opportunity to comment on the National Curriculum: Health and Physical Education Version 6.0 and welcomes any discussion or clarification of these comments.

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Attachment A

The Australian Curriculum Health and Physical Education: Suggestions for content description changes to be more inclusive of sexuality

Years 3 and 4 Content descriptions

Personal, social and community health
Being healthy, safe and active
Explore strategies to manage physical, social and emotional change with an introduction to puberty

Years 7 and 8 Content descriptions

Personal, social and community health	
Contributing to healthy and active communities	Elaborations
	Investigating preventative health practices relevant to young people including safer sex practices , and designing and implementing health promotion activities targeting these practices

Years 9 and 10 Content descriptions

Personal, social and community health	
Being healthy, safe and active	Elaborations
Examine the impact of changes and transition on relationships, including sexual relationships	<ul style="list-style-type: none"> Assessing behavioural expectations in different relationships, including sexual relationships and social situations, and examining how these expectations can influence decisions and actions Practising skills to deal with challenging or unsafe situations, such as refusal skills in sexual relationships, communicating choices, expressing opinions and initiating contingency plans Proposing and practising a range of realistic responses to scenarios where peers are encouraging them to take unnecessary risks including sexual relationships
Communicating and interacting for health and wellbeing	<ul style="list-style-type: none"> Investigating how the balance of power influences the nature of relationships including sexual relationships and proposing actions that can be taken when a relationship is not respectful Comparing own decisions with those of others and acknowledging others' right to act differently and to change their mind including consent to sexual activity Examining actions to take greater responsibility in relation to their own health including sexual and reproductive health



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