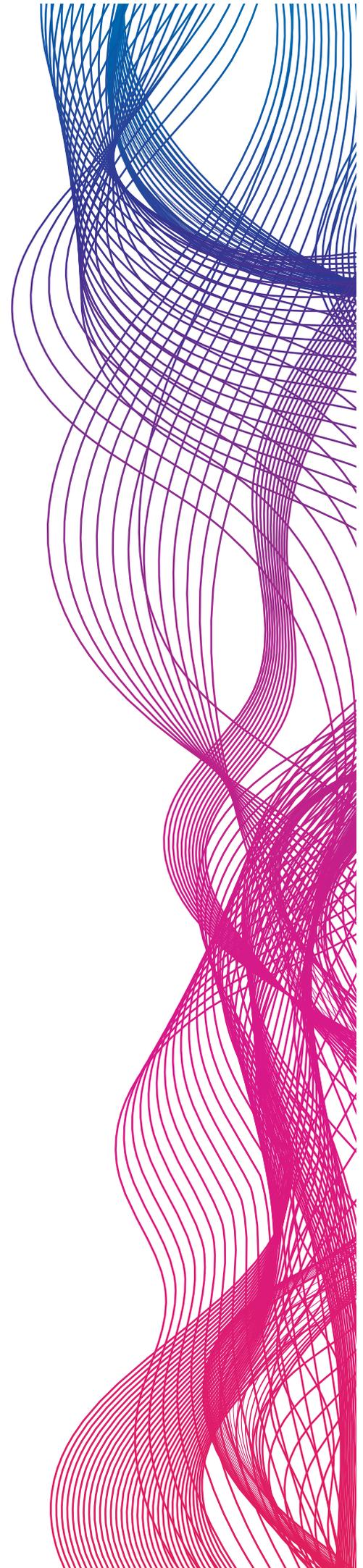


# Frequently Queried Topics Years 9–13

**Relationships and Sexuality Education**  
GUIDELINES | YEARS 9–13

**RESOURCE FOR TEACHERS**



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# Legal requirements

## Implementing RSE as a state integrated school

The legal requirement to consult with the school's community about the delivery of health education refers to state and state integrated schools. In a state integrated school with a designated special character, how RSE is approached will be guided by the school's values, philosophy and culture, with oversight from the school's board of proprietors.

*The New Zealand Curriculum* is followed in state integrated schools, which means RSE learning will draw from the conceptual framework and achievement objectives in the Health and Physical Education learning area. Key learning, as articulated in the RSE guide, will be selected to reflect the school's values and the school community.

### See also

- [RSE Guide](#) Section 3 (pages 28–30) and Section 4 (pages 46–49)
- [Video Hornby High School](#)

## Legal obligations

RSE is situated in the *New Zealand Curriculum* within health education, in the Health and Physical Education learning area. This means that it is mandatory for schools to deliver RSE until the end of year 10. The *New Zealand Curriculum* is a flexible, non-prescribed curriculum. Across years 1–10, ākonga should have the opportunity to experience learning across the key areas of learning (of which “sexuality education” is one) and the achievement objectives that comprise Health and Physical Education. The key learning tables in the RSE guide provide ideas for possible learning at each curriculum level.

Associated legal obligations in relation to RSE include (1) consultation with the community, (2) appropriate response to requests for children to be withdrawn from aspects of sexuality education, and (3) responding to children's questions.

1. See the ‘consultation’ section of this FAQ for more detailed information in this area.
2. Schools do not need to seek permission from parents for ākonga to participate in RSE

learning. However, according to the Education and Training Act 2020 (section 51), parents or caregivers may ask the principal in writing for their child to be released from any particular element of sexuality education. The principal must ensure that the student is released from the relevant tuition and the student is supervised during that time. It is good practice to communicate with whānau prior to RSE to let them know that RSE learning is coming up, and the broad nature of that learning. This opens the dialogue for parents to clarify the focus of RSE and raise concerns if needed, and also enables parents to talk with their children about their learning in RSE while it is happening at school.

3. Teachers are legally entitled to respond to any questions ākonga ask in formal RSE programmes or at any time. This includes if a child who was released from aspects of sexuality education is present in the class. See the ‘teaching’ section of this FAQ for more specific guidance on answering students' questions.

### See also

- [RSE Guide](#) Section 3 (pages 35–39), Section 4 (pages 46–49) and Section 5 (pages 50–53)

# Consultation

## Consultation in special character as well as state schools

There is no set process or format for the community consultation, and we advocate an approach in which you consider how you can best engage with your community at least every two years. The legal requirements are set out by section 91 of the Education and Training Act 2020, which applies to state and state integrated schools:

- The Board of Trustees must, at least once every 2 years, after consulting the school community, adopt a statement on the delivery of the health curriculum.
- The purpose of the consultation is to inform the school community about the content of the health curriculum; and ascertain the wishes of the school community regarding the way in which the health curriculum should be implemented given the views, beliefs, and customs of the members of that community; and determine, in broad terms, the health education needs of the students at the school.
- The board may adopt any method of consultation that it thinks fit to best achieve the purpose, but it may not adopt a statement on the delivery of the health curriculum until it has prepared the statement in draft, given members of the school community an adequate opportunity to comment on the draft statement, and considered any comments received.
- The 'school community' is defined, for a state school, as "the parents of students enrolled at the school". Added to this for a state integrated school is "and the school's proprietors". For both types of school, the school community also includes any other person who the board considers part of the community (e.g. teachers, students, local elders or other community members).

Two main resources that exist to provide a suggested process and approach for the consultation are the RSE guide (Ministry of Education, 2020) and the Tūturu (2020) resource, Community Consultation: Health Education. Both resources provide excellent guidance and ideas for schools.

### References

- Ministry of Education (2020). *Relationships and Sexuality Education – a guide for teachers, leaders and boards of trustees* (Year 1-8 and Year 9-13 versions) [RSE Guide](#)
- Tūturu (2020). *Community Consultation: Health Education* [Tūturu Health Education](#)

### See also

- [RSE guide](#) Section 4 (pages 46–49) and Section 5 (pages 50–53)
- [Video Hornby High School](#) and [Video Lynfield College](#)

## Culturally sensitive consultation strategies for diverse school communities

There are many ways in which to consult, and different approaches will work for different schools at different times. Schools have found that a range of consultation events, rather than one discrete

event held every two years, can be valuable for collecting whānau, ākonga and others' voice over time. Some specific strategies that have been successful include:

- Enlisting the support of key people from different cultural groups in the school community to invite others to be involved in the consultation. This may include translating materials into different languages.
- Providing parents, whānau and caregivers with information about health education at the school when new ākonga enrol.
- Combine a consultation meeting with another school event, for example, a working bee, school performance, learning conferences, family BBQ.
- Consulting with the community in venues other than on the school grounds. For example, a local church, marae or community centre.
- Including ākonga voice and learning artefacts in the consultation.
- Provide students with a leadership role. For example helping to design the consultation, speaking at a consultation event, gathering others' voice to feed into the consultation.

## Parent and whānau meetings

The ideas below could be drawn upon to design a whānau meeting that runs for 90-120 minutes.

- Provide refreshments and a chance for parents, whānau and caregivers to mingle on arrival. You might like to have a question box and pieces of paper available for parents, whānau and caregivers to submit any questions they have. While you speak, another teacher could prepare answers to collected questions that you can give to the group before the end of the meeting.
- Open the meeting in an appropriate manner for the people attending. Will a senior leader(s) or board member(s) attend and welcome parents, whānau and caregivers? How will you greet everyone in an inclusive way? What housekeeping/health and safety information is needed?
- Set the scene briefly with an explanation of why schools need to consult about health education, what you are seeking feedback on, and what outcomes you want from the meeting.
- Provide an overview of health education in the *New Zealand Curriculum* — for example the way in which the strands and achievement objectives, key areas of learning and the underlying concepts weave together. You may wish to include this [video](#) which includes whānau, teacher and ākonga perspectives as well as questions that could form a discussion.
- Explain teacher practice in health education — how is health education taught at your school? You may like here to model one or two activities that you use in your RSE or health education programme. This could also be an opportunity to show artefacts of health education learning, or involve ākonga.
- Explain the reason for the topics or units at the school — what factors are considered when planning to meet learning needs of ākonga?
- Introduce the draft delivery statement — at this point whānau could work in small groups to provide feedback. Page 55 of the [Tūturu](#) resource has a worksheet for this purpose.
- Provide parents, whānau and caregivers with an overview of your health education programme. Again, they could work in small groups to give feedback. Page 56 of the [Tūturu](#) resource has a worksheet for this purpose.
- Consider how you may include an opportunity for individual feedback to be provided.
- Close the meeting by letting participants know how their feedback will be used, and how the outcome of the consultation will be communicated to them. If you had a question box, answer a selection of questions.

### See also

- [RSE Guide](#) Section 5 (pages 50-53)
- [Video Hornby High School](#)

## Dealing with objections from the community

Consultations are an opportunity for the community's voice to be heard. The consultation does not require that the community, or those who responded to the consultation, need to agree to the delivery statement, nor specific topics covered in your health education programme. Teachers should modify what and how they teach to meet the needs of learners in their classes. This means that any specific topic within RSE needs to be assessed for suitability with every group of learners. The RSE guide does, however, stress the importance of including a wide range of topics, such as gender identity and diversity, in programmes of learning.

Some possible ways to respond to the school community when objections are raised to specific topics in your health education and RSE programme include:

- Ensuring that a wide range of voices will be heard during the consultation period — from past experience, is it a vocal few who respond to your request for feedback? What might you be able to do differently to ensure more diverse voices?
  - Seeking clarification from those who contributed to the consultation — what exactly are they concerned about? Are there any misunderstandings that can be resolved?
  - Drawing upon local expertise to support you. This may include experts who can discuss the concerns with the community members directly, or who can support you to have those conversations.
  - Using laws, educational policy and guidance to reinforce your position, including the messages in the RSE guide. Some other pertinent documents are:
    - Our Code, Our Standards: Teachers have a responsibility that includes commitment to the teaching profession and commitment to learners, family and whānau, and society. The standards for the teaching profession also discuss the importance of teachers planning for and providing high-quality and responsive learning for all students.
    - The *New Zealand Curriculum* sets the direction for student learning in all state and state integrated schools. The vision, principles, values and key competencies as well as the features of the HPE learning area re-affirm the importance of high-quality, inclusive and broad learning experiences for all ākonga.
    - The UN Convention on the Rights of the Child (of which Aotearoa New Zealand is a signatory), which states children's rights and culture is to be respected and they will have opportunities to achieve their full potential in education settings. See [🔗 articles 28 and 29](#) in particular.
    - Culturally-responsive and inclusive practices encompass the need for learners' realities to be reflected in their RSE learning.
    - InsideOUT's resources, developed with the support of the Ministry of Education, provide guidance in relation to gender identity and diversity in the classroom and wider school.
- Finally, ensure that parents/legal guardians understand they have a right to withdraw their child from aspects of the RSE programme (see 'legal requirements' in this FAQ above).

### See also

- [🔗 RSE Guide](#) Section 4 (page 49) and Section 5 (pages 50-53)
- [🔗 Tūturu Health Consultation](#)



# A whole-school approach to RSE

## Enacting a whole-school approach to RSE

A useful visual to outline what is meant by a whole-school approach (WSA) in RSE is on page 16 of the RSE guide. This shows how the wider school culture, environment and culture surround RSE teaching and learning as part of health education in the *New Zealand Curriculum*. Expanding on the diagram, another useful way to understand a WSA is the table on page 17 of the RSE guide. Here, knowledge is drawn from the Health Promoting Schools approach to distinguish three dimensions of school life, each of which can be connected to areas relevant to relationships and sexuality. Below, we illustrate how these three dimensions could connect to RSE issues.

### 1. Ethos and environment

- Policies connected to relationships and sexuality issues such as diversity and inclusion, bullying, harmful digital communications, school uniforms.
- A culture of inclusion that addresses bullying and values diversity. Emotional and physical safety are paramount (as per [NELP objective 1, priority 1](#)), as is non-discrimination (as per the [Human Rights Act](#)).
- The school's charter (mission, vision and values; aims, targets and actions).
- Leadership practices that foster openness, inclusion and student leadership.
- A safe and accessible physical environment for all ākonga, to uphold their rights and mana.

- Management systems to address arising issues of bullying and other unsafe behaviours.
  - Support systems that enable equitable access to healthcare such as nurses and counsellors.
- ### 2. Curriculum, teaching and learning
- Dedicated curriculum time for RSE and health education.
  - Support for teacher professional development. This may include off-site courses for RSE or health education-related conferences, whole-staff in-school sessions run by a member of staff or a provider from (for example) Family Planning, teacher release time for connecting with colleagues in local schools, in-school observations of other teachers teaching RSE.
- ### 3. Community connections
- Partnerships with a range of community members, including families, whānau, hapu, iwi and community organisations with whom the school has (or wants to develop) a relationship.
  - Strengthening on-going consultation with the school community, including regular health education consultation (see above section of the FAQs) and other opportunities for knowledge sharing and communication in the area of RSE.

### See also

- [RSE Guide](#) Section 2 (pages 18-27)
- [The Ministry of Education's Inclusive Education Guides](#)



## Achieving more support from the school community for RSE

As per the responses around community consultation above, a robust and on-going consultation process can open the dialogue between school and home around issues relating to RSE. This dialogue can provide you with evidence that parents, whānau and caregivers, as

well as other community members, value what you aim to achieve in RSE and health education, and the importance of the subject. This, of course, also extends to students – the more ākongā voice you can collect about what they want to learn (and how best they learn) the better.

## Advocating for more time in health education

Some specific policy, research or current topics that could be used to support your case for increasing time allocation for RSE (and health education) include:

- The RSE guide's recommendation that 12–15 hours per year should be spent on RSE, and that you provide opportunities for RSE for ākongā in years 11–13 who are not studying health education as part of NCEA (page 34).
- Your school's charter
- [Youth 2019 Reports](#) (bearing in mind though that the aim of RSE is learning outcomes, not health outcomes).
- *The New Zealand Curriculum*: Sets the direction for student learning in all state and state integrated schools. The vision, principles, values, key competencies, as well as HPE aspects, all connect to RSE in many ways.
- Our Code, Our Standards: Teachers have a responsibility that includes commitment to the teaching profession and commitment to learners, family and whānau, and society. The standards for the teaching profession also discuss the importance of teachers planning for and providing high-quality and responsive learning for all students.
- The current climate around the importance of wellbeing in schools (and society!) Wellbeing is on the [Ministry of Education's agenda](#), and RSE and health education is a critical piece of the puzzle (see the Q and A above for the three areas of school life in a whole-school approach to wellbeing).
- If your school has a NCEA health education programme, the need for students to have learning experiences in year 9 and 10 that prepare them for learning and achievement at the senior level is another possible lever for increasing curriculum time at the junior secondary level.

# Teaching RSE

## Dealing with teacher discomfort in RSE

There are several policy-level considerations and guidance documents that exist, which support a broad approach to RSE that meets learners' diverse learning needs. This means that, in practice, teachers who teach RSE need to not shy away from covering topics that may challenge them personally. It is important for students to see adults model that it is OK to talk about relationship and sexuality-related topics, and that a non-biased, non-judgemental, open and respectful approach is needed for RSE. Some pertinent documents are:

- Our Code, Our Standards: Teachers have a responsibility that includes commitment to the teaching profession and commitment to learners, family and whānau, and society. The standards for the teaching profession also discuss the importance of teachers planning for and providing high-quality and responsive learning for all students.
- The *New Zealand Curriculum* sets the direction for student learning in all state and state integrated schools. The vision, principles, values and key competencies, as well as the features of

the HPE learning area re-affirm the importance of high-quality, inclusive, broad learning experiences for all ākonga.

- [NELP objective 1, priority 1](#) cements the need for a safe physical and emotional environment for learners.
- The UN Convention on the Rights of the Child (of which Aotearoa is a signatory), which states that children's rights and culture are to be respected and they will have opportunities to achieve their full potential in education settings. See [articles 28 and 29](#) in particular.
- Culturally responsive and inclusive practices encompass the need for learners' realities to be reflected in their RSE learning.

It may also be useful for teachers to support each other (or seek extra support from others) if needed to reflect upon teaching practice in relation to feeling uncomfortable or being in conflict with their values, attitudes and beliefs. This will help teachers to think critically about the questions and responses they are providing in class when these feelings arise.

### See also

- [RSE Guide](#) Section 2 (page 27)

## Teacher PLD and up-skilling

There are many ways in which teachers can develop confidence in planning for, and teaching, RSE. Because of the diversity of communities, the fast rate of social change, and the need to keep up to date with best practice, professional learning and development (PLD) should be ongoing. Teachers can access support and PLD to inform their practice in RSE in various shapes and forms. It is important to recognise that, in a fast-changing area such as RSE, teachers should not be expected to be an 'expert' in all areas related to

teaching RSE. But it is valuable to know where to go for support, whether that be information online, or from organisations that work in the field. The following might help you to think about how and where to access PLD:

- Can you establish or build upon connections with other local teachers, perhaps including those who teach RSE in a nearby secondary school?
- What courses are available locally or online that you could access?

- How can you access external expertise to come into the school to empower teachers to plan and teach RSE and how can this be done in partnership and in a sustainable way?
- How can teachers in the school support each other?
- What communities of practice exist online or offline that you can tap into for support?
- How can you make time for teachers to collaboratively plan programmes that connect to messages in the RSE guide and are responsive in your context?
- How can you collect and act upon student voice to inform planning and teaching?

### See also

- [RSE Guide](#) Section 3 (pages 28–31; pages 40–44)
- [Effective Pedagogy in RSE](#)
- [Video Hornby High School](#), [Video Lynfield College](#) and [Video Wellington High School](#)
- [Family Planning](#)
- [Inside Out](#)
- [Te Whāriki Takapou](#)
- [The Village Collective](#)
- [NZHEA](#)

## Answering ākongā questions

You could be asked any question at any time while teaching and for a number of reasons. Sometimes students may be testing the water with you or seeking attention from peers, but most often there will be a genuine desire to learn. You need to be prepared for questions on a wide variety of topics, and legally you are entitled to answer any question a student asks you. But before you answer, it's important that you have knowledge about these topics. A question box gives you time to consider your response, so this method means you are less likely to be put on the spot. It is important that you feel confident and comfortable with teaching RSE, including responding to questions, so seek support from your colleagues if needed.

If you decide that you will not answer a question from the question box, give students a reason. You could say, "This question asks ... but I am not going to answer it because ..." or, "This question is directed to me personally. I won't be answering from my own experience. But some people believe ... and others feel ..."

For help-seeking and disclosure-type questions, ensure you are familiar with your school's child protection policy and procedures. You should also be familiar with school and community support services for young people and recommend these to encourage help-seeking behaviour from students.

Students will ask you spontaneous questions during the learning opportunities. Here are some guidelines for responding:

- Keep your expression neutral — don't show any offence, disapproval or discomfort at the question.
- It's OK to acknowledge to students that while sexuality is normal, some people find it uncomfortable and difficult to talk about. You can acknowledge that there are not always easy or straightforward answers and that it's OK to wonder about it and ask questions.
- Answer immediately if the question is simple and you know the answer.

- If you are not sure whether you have understood the question correctly, ask a clarifying question before responding.
- If you don't know the answer or are uncomfortable answering straight away, tell the class that you will check it out and get back to them the next day. Make sure you keep your word.
- Be honest but do not answer personal questions that relate to you specifically. Use wording such as, "Some people think/do ... and others ..." or, "What do others think?"
- If the question is too personal, clearly state that you won't be answering it.
- If the question is very specific to the student, consider whether the whole class needs to hear the answer. It may be better discussed individually.
- If you feel very uncomfortable about answering a question, you may want to refer the student to someone else or arrange for someone to come in to talk to the class and answer the question.
- If a student's question communicates offensive or discriminatory messages, you will need to deal with this sensitively, by making clear to the class at the time the inappropriateness of the question. This might mean leaving alone the details of the question — and its answer — in the moment, but coming back to it with a more considered response.

## Students with additional learning needs

Students with additional learning needs are at particular risk of being excluded from RSE. Talk with their support team about how to support these students, and if they have an individual education plan, make sure it includes provision for RSE. Learners and their whānau should be consulted about RSE programmes and about issues of access, safety and inclusion in the school. Teaching and learning resources may need to be adjusted so learning is accessible and inclusive, such as by using language/terminology and ideas that can be understood. For example, what feels right and what feels wrong, being kind to others, and others being kind to us. See the [Ministry's Inclusive Education Guide](#) for practical strategies, suggestions and resources to support learners with a range of additional needs.

Often we see mainstream programmes getting adapted for learning needs. However, if teachers consider diverse learning needs right from the start in their lesson planning, sessions can work for everyone inclusively.

Thinking about **pedagogy**, consider the following points:

- Use experiential learning methodologies (i.e. role-plays, practise specific skills repeatedly, create and act out social stories).
  - Consider the language and concepts used and break down abstract concepts to concrete examples (scenario-based).
- Consider the appropriateness of videos relating to subtitles, simple language and speed (particularly for deaf and hearing impaired).
- Use additional cues, such as visuals and gestures (i.e. draw stories, use posters with visual cues — e.g. the Kidpower Safety Skill Signal posters and gestures, see link below).
- Many are survivors — practice skills using non-intrusive everyday scenarios. For example, an argument over a piece of playground equipment, or a request to help a parent out at home.
- Make learning safety skills (such as effective communication, saying "no") a successful experience so that the student feels able and entitled.
- Use repetition — hang up visuals of the skills you practised and refer to them. Support application of the skills in everyday life. By reinforcing a 'concept' or 'skill' in a variety of ways, learning is more likely to be integrated and applied.
- Use simple language.
- Use consistent language and rules.
- Prioritise and practise a limited number of skills at a time.
- Consult with their support team and whānau around learning capacities and appropriate language and concepts.

Thinking about **content**, consider the following points:

- Learn and apply the ground rules for healthy relationships and interactions — establish clear and simple ground rules (i.e. that every interaction needs to be safe, allowed, consensual and not a secret — as per the four Kidpower Consent Rules, see link below)
- Practise how to interrupt when something is physically or emotionally unsafe. For example,

set up practices to say, “Excuse me, I need help. It’s about my safety”.

- Practise how to accept a refusal gracefully — invent practices, such where student A asks student B for something, and B says “no”. A then responds with “OK”.
- Specific to content relating to consent, communication and body language, consider the appropriateness of language around ‘verbal cues’ and ‘non-verbal cues’ for those who are non-verbal.

### See also

- [RSE Guide](#) Section 3 (page 43)
- [The Ministry of Education’s Inclusive Education Guides](#)
- [Safety Through Skills Before Knowledge](#)
- [The Kidpower and Fullpower Consent Rules](#)
- [The Kidpower Safety Skills](#)

## Effective teaching in RSE

Effective and successful RSE occurs when enough time is dedicated to RSE and when teachers are confident and knowledgeable enough to deliver programmes that are meaningful, student-centred, and up-to-date. This is the ‘curriculum, teaching and learning’ aspect of a whole-school approach to RSE, and therefore needs to be supported by school culture and community connections. It is important to be responsive to the needs of your ākonga in terms of learning needs for RSE — ākonga voice can feed into your planning to ensure that both what is taught in RSE and how it is taught meets your learners’ needs. Teachers

need to be comfortable talking about a wide range of topics relating to RSE, and programmes need to be sensitively developed and taught. RSE can be integrated across learning areas, and not solely connected to the Health and Physical Education learning area. See Section 3 of the RSE guide for ideas for teaching RSE across the curriculum, and our resource on pedagogical content knowledge for ideas around effective pedagogies in RSE. Teaching practice in RSE as part of health education should also align with the principles of effective pedagogy in *The New Zealand Curriculum* and the standards for the teaching profession.

### See also

- [RSE Guide](#) Section 2 (page 27)
- [Effective Pedagogy in RSE](#)
- [Video Wellington High School](#)
- [Mental Health Education and Hauora: Teaching interpersonal skills, resilience and wellbeing](#)
- [Making Connections with Pacific Ideas in Health Education](#)

## Structuring year 9 and 10 RSE

The way in which RSE is organised and what is covered in Years 9 & 10 will be guided by your timetable and your learners' needs, respectively. The RSE guide draws on ERO (2007) to recommend 12–15 hours of RSE per year. Given that this is only one key area of learning typically covered in health education (others being mental health, body care and physical safety and food and nutrition), the following planning questions might be helpful for you to make the most of health education time to provide a thorough and responsive RSE programme:

- What knowledge, understanding and skills do learners bring with them into year 9? What have their experiences of RSE been, and what do they report as wanting to know?
- How closely does your current programme align with the learning outcomes in the key charts of the RSE guide (page 35 for curriculum level 4 and page 36 for curriculum level 5)?
- Has pubertal change already been well covered, and something you can spend a lot less time on than you might have in the past?
- Would it be appropriate for year 9 RSE to have more of a focus on friendships and relationships, and start to delve into some more

hard-hitting sexuality topics and then build upon these in year 10?

- Given that most learners do not go on to study health education past year 10, what knowledge, understanding and skills do you want them to leave with when they finish year 10? And then, what opportunities exist for weaving some RSE into senior secondary that are not tied to NCEA?
- Does your community consultation evidence (which should include student voice) give you any evidence to support your planning?
- If your time to teach health education, and RSE, in Years 9 & 10 is limited (which is the case for most teachers), how can you combine learning contexts in a clever way? For example, relationships are central to RSE, alcohol issues can be connected to consent and communication, gender diversity is connected to safety in the school — can you draw on a range of contexts and weave this together to create meaningful learning in RSE across more than just the annual 'unit on sexuality'?

Finally, we recommend connecting with colleagues in local schools and with other teachers of RSE and health education to both share practice and learn from each other.

### See also

- [RSE Guide](#) Section 3 (pages 28–30; pages 34–36)
- [Effective Pedagogy in RSE](#)
- [Video Hornby High School](#)
- [Mental Health Education and Hauora: Teaching interpersonal skills, resilience and wellbeing.](#)
- [Health Education Resources](#) A range of teaching and learning resources across mental health education, alcohol and drug education, and Pacific contexts in health education

## Integrated approaches to RSE (across the curriculum)

Relationships and sexuality are ubiquitous topics that are central to our human lives. As such, it is likely that RSE-related learning can be connected to a wide range of contexts across different

learning areas in the *New Zealand Curriculum*. Research on teachers' experiences of curriculum integration reveals both challenges and possibilities associated with integration (McPhail, 2018; NZCER,

2019). Curriculum integration is often approached in a whole-school context, so you may need to be guided by your school's approach in this area, but some general questions for you to consider when planning are:

- Consider pedagogy to be enacted for the integration — if student-led or project-based learning, how is this balanced with the need to develop disciplinary knowledge across both subjects?
- How can you ensure that RSE material is approached ethically and sensitively (i.e. in accordance with the health education statement in the *New Zealand Curriculum*)?
- What roles will teachers have in planning and teaching in order to ensure that disciplinary knowledge is developed in learners, and how will you negotiate roles and responsibilities?
- What connections exist between the learning areas and concepts/contexts being explored, and how do these connections add value to learners when they are combined?
- What do you want students to learn by bringing two (or more) learning areas together?
- What might you (and your students) gain, and what might you (and your students) lose?
- How will you ensure that one learning area/subject does not dominate at the expense of the other?
- How will non-health education teachers deal with some of the more sensitive topics and issues that may arise?

### References

- McPhail, G. (2018). Curriculum integration in the senior secondary school: A case study in a national assessment context. *Journal of Curriculum Studies*, 50(1), 56–76
- NZCER (2019) report on curriculum integration [🔗 Curriculum Intergration Report \(NZCER\)](#)

### See also

- [🔗 RSE Guide](#) Section 3 (pages 31–33)
- [🔗 Effective Pedagogy in RSE](#)
- [🔗 Tips for curriculum integration](#)

## The need for education around gender identity and diversity

In RSE, this is about our teaching reflecting the *New Zealand Curriculum* (and Health and Physical Education (HPE) as a learning area within) as well as needing to be aware of who is in our class, and their needs.

In terms of any gender diverse students in your class (note that they may or may not be 'out' as trans or non-binary, and many young people will still be working out who they are) the literature on inclusive and culturally responsive practice asserts the importance of designing and teaching RSE programmes within which learners can see themselves and their realities. Policy such as [🔗 NELP objective 1 priority 1](#), the Human Rights

Act, and Our Code, Our Standards, reinforce the need for all learners to be emotionally and physically safe at school. In terms of the curriculum, the front-end principle of inclusion sums this all up well: "The curriculum is non-sexist, non-racist, and non-discriminatory. It ensures that students' identities, languages, abilities, and talents are recognised and affirmed and that their learning needs are addressed". (Ministry of Education, 2007, p. 9)

In terms of the learning outcomes of RSE and health education, the underlying concepts of HPE, as well as strands C (Relationships with Other People) and D (Healthy Communities and

Environments) are particularly relevant. The sorts of learning outcomes that are situated within these aspects are personal and interpersonal skills, and attitudes and values that help prepare young people for relating to people from diverse backgrounds and to see themselves as agents of change for social justice in their lives and communities. In a well-planned RSE and health education programme, young people will have the opportunity to learn about diversity amongst people (gender diversity being one example thereof), learn to think critically by challenging assumptions and exploring power imbalances, understand how we are all different, and value difference.

Learning in this area of RSE is not about drawing attention to, or ‘outing’ any students in the class. Care needs to be taken to avoid putting students on the spot to answer questions about ‘what is it like’ or to see them as the expert in this area. Alternatives here include guest presentations from organisations such as InsideOUT or using video resources featuring diverse people’s lived experiences.

Note also that learning about gender identity includes gender norms. For example, the way in which people of different gender identities are portrayed in popular culture, the media, advertising, and in our communities.

### Reference

- Ministry of Education (2007). *The New Zealand Curriculum*. Wellington: Learning Media

### See also

- [RSE Guide](#) Section 2 (page 13) and Section 3 (page 42)
- [Video Wellington High School](#) and [Video Lynfield College](#)
- [Ministry of Education Inclusive Education Guides](#)
- [InsideOUT’s resource](#) *Making Schools Safer for Transgender, Gender Diverse and Intersex students*

## Learning about safer sex practices

There are many reasons why this is important learning for students in year 9 and 10, but, as always, be guided by the learning needs of your class. The reasons include:

- RSE (as part of health education in the Health and Physical Education learning area) is only mandated until the end of year 10. Therefore, young people may not access curriculum learning experiences in RSE past this level, and this is important learning to cover.
- It is important to model the idea that conversations about safer sex practices are important and should be normalised — this removes any potential discomfort and unease in

people’s relationships, including the discussion of safer sex practices with future partners and healthcare providers.

- Strand A encompasses more of the personal safety aspect of safer sex practices, while Strand C covers relationships and interpersonal skills — e.g. assertiveness, problem-solving, negotiation, power in relationships, consent, etc. Strand D speaks to the societal support systems in place to promote sexual health. Therefore, learning experiences around safer sex practices are considered more broadly than a sole focus on barrier methods, contraceptives and keeping physically safe.

## Māori, Pacific and other cultural knowledge in RSE

First, we recommend that you draw upon local community members' knowledge, perhaps as part of your regular health education consultation process. A diversity of knowledges and understandings exist across Māori, Pacific peoples, and people from other cultural groups, so it is difficult to pin down the nature of valued knowledge, and how best to incorporate this into RSE programmes in any given context. Some considerations, however, are:

- How familiar are you with concepts relating to RSE from different cultural perspectives? How can you further develop your understanding?
- To what extent do you draw upon indigenous models of health and wellbeing, such as te

whare tapa whā, Fonofale, Kalaka, Tivaevae, Fonua, Te Vaka Atafaga, and other relevant cultural models — and how could you incorporate these?

- What words, ideas, stories, whakataukī (and so forth) could you draw upon from a range of cultures to enhance your RSE programme?

We also recommend a close read of the RSE guide pages 41–42 in order to deepen your understanding of cultural knowledge relating to RSE for Māori and Pacific ākonga. Integrating these into teaching and learning from the beginning is considered best practice, as is recognising and capitalising upon the knowledge and understanding ākonga bring with them into RSE learning.

### See also

- [RSE Guide](#) Section 1 (pages 14–17) and Section 3 (pages 41–42)
- The Ministry of Education's Inclusive Education guides [Supporting Pacific Learners](#) and [Supporting Māori Learners](#)
- [Te Ara section on Māori sexualities](#)
- [Takatāpui Resource Hub](#)
- [NZHEA: Making Connections with Pacific Ideas in Health Education](#)

## Balancing time between sexual health learning and learning about relationships

The 2020 RSE guide points to the need to put relationships front and centre when exploring sexuality education, hence the move to language of 'relationships and sexuality education'. By approaching this key area of learning in this way, we leave the traditional 'sex education' approach well behind, and thus open opportunities for a wide variety of learning experiences that encompass the ideas set out in the key learning tables of the RSE guide (pages 35–39).

The RSE guide explains that "it is important to note that sex education and sexuality education are different. The *New Zealand Curriculum* supports

a holistic approach to sexuality education as defined by the hauora model, which includes physical, social, mental, emotional, and spiritual aspects. This is much broader than sex education, which relates only to the physical aspects of sexual and reproductive knowledge" (page 12).

A 2018 [survey](#) conducted by Family Planning found that young people wanted a broader approach to RSE. An extract from the report is: "They want more in-depth and wide ranging learning — from the practical aspects of sex like contraception, pregnancy and sexually transmitted infections (STIs), to learning related

to emotions, consent, communication and safety in relationships. And they want a more open and inclusive approach to relationship and sexuality education which acknowledges diversity of gender, sexuality and experiences”. (Family Planning, 2018, p. 6) [🔗 Research](#) conducted for the Classification Office likewise found that young people see a

focus on sex and biological aspects in sexuality education as inadequate — especially when this is framed in heteronormative terms.

In summary, a broad approach to RSE will encompass a range of considerations, of which biological aspects may form only a small part.

### References

- Classification Office (2020). *Growing up with Porn: Insights from young New Zealanders*. Wellington, NZ: Classification Office [🔗 Growing up with Porn Report](#)
- Family Planning (2018). *Young people’s experiences of sexuality education* [🔗 Young people’s experiences of sexuality education Report](#)

## Introducing learning about pornography

There is no one-size-fits all answer, so be guided by your learners’ needs here.

Research from the Classification Office (2020) states that: “Information need(s) to be available in different places, from different people and in different ways in order to reach young people in a way that works for them... There was no clear agreement about the age or year level this education about porn or sex should begin at school. However, most thought this should begin before puberty, and before most young people see

porn. Feedback from young people suggests that the intermediate years (age 11-13) would be the best time to start addressing sexuality education and issues around porn” (Page 45).

In conjunction with the Classification Office, the Ministry of Education has developed an educator resource, ‘Ka huri i te kōrero — changing the conversation around pornography in RSE’. We recommend you access this resource to support your planning for this aspect of RSE.

### Reference

- Classification Office (2020). *Growing up with Porn: Insights from young New Zealanders*. Wellington, NZ: Classification Office [🔗 Growing up with Porn Report](#)

### See also

- [🔗 RSE Guide](#) Section 1 (page 13)
- [🔗 Classification Office YouTube channel](#) for videos with animations
- [🔗 Classification Office/MoE Pornography Education Resource](#)

## Single-sex or co-educational RSE

You may see benefits to a separated approach to aspects of your RSE learning programme, and a tension exists here between being inclusive of diverse sexualities and genders, being culturally-responsive and the ability for schools to self-govern and make their own decisions about curriculum delivery. However, the following reasons exist to support a co-educational approach:

- Dividing ākonga by sex or gender causes difficulties for those who are exploring their gender, do not identify as a girl or boy, or have variations in sex characteristics (intersex). Therefore gender diverse and intersex students are better catered for in co-educational settings (students who are gender diverse or intersex may feel uncomfortable, unsafe or uncatered for in split classes). This is also the case for young people who are attracted to the same or both genders.
- Separating learners by gender could send the message that the topics are uncomfortable, stigmatised, or not something to openly discuss with people of a gender different to their own.
- Split classes may result in boys and girls receiving inequitable or gender-biased education.
- It offers opportunities to learn about topics from different perspectives and to develop empathy for the changes and challenges experienced by another gender or sex.
- Co-educational classes create opportunities for learners to practise communicating with each other about sensitive topics (which is an important skill for developing respectful

relationships with others — friendships, romantic relationships and intimate relationships).

- Note that sensitivity is needed for Pasifika learners when siblings are in the same class. See page 36 of the RSE guide for more information.

If you do decide, on balance, that separating students by sex or gender is a practice you want to continue, we offer the following advice:

- Do not just teach the 'girls' topics' to the girls and 'boys' topics' to the boys — both need to know all of the information. Also ensure both groups know they are receiving the same information.
- Consider how you will cater for gender diverse and intersex students (and be aware that these students may not be visible to you). It may be appropriate to ask students to choose which group they feel more comfortable in, as just assuming this may cause more stress and discrimination for the student. It is important to understand that even if you are providing this choice, gender diverse or intersex students may feel uncatered to by being asked to put themselves into a group that they don't belong to.
- Ensure the language you use about bodies and relationships is gender neutral and reflective of diverse young people's experiences. For instance, referring to body parts by their names rather than 'boys' or girls' parts' or 'male/female'.
- Share questions (and answers) from the question box with both groups so that everyone has the same information.
- Keep a clear learning-based reasoning for the decision.

## LGBTQIA+ affirming RSE

Some suggestions for providing a safe and welcoming inclusive and affirming learning environment are as follows:

- Engage in self-reflection about any assumptions or social norms that may be influencing how you discuss certain topics around relationships

and sexuality. For example, when discussing relationships, what type of gendered language (if any) are you using? What messages might this language reinforce?

- Make use of glossaries in the RSE guide or InsideOUT to understand the diversity that

exists in Aotearoa New Zealand, and the vocabulary that is commonly used to describe people's identities.

- Consider how visual safety cues in physical learning spaces might make LGBTQIA+ learners feel affirmed in the space.
- Ask for anonymous student feedback from all students about how safe/represented they feel in the RSE programme.
- Use resources from trusted organisations like InsideOUT or RainbowYOUTH.

- Discuss gender and sexuality diversity within Māori and Pacific worldviews.
- Some learners will not be visible to you as LGBTQIA+, and some may be exploring their gender or sexuality. It's good to be aware of this and to not assume that there are 'no' LGBTQIA+ students in your class — statistically, there are likely to be.
- If your school has a diversity group, engage with them.

### See also

- [RSE Guide](#) Section 3 (page 42)
- [Video Lynfield College](#)
- [RainbowYOUTH](#)
- [InsideOUT](#)

## Assessing RSE

We recommend considering an assessment FOR learning approach in RSE rather than solely a focus on assessment OF learning. This opens up opportunities for gathering evidence of learning across a range of RSE aspects, and removes emphasis on such tools as end-of-unit tests and other discrete assessment tasks. An assessment for learning approach involves gathering, analysing, interpreting and using information in focused and timely ways that provide evidence of learner progress. Specific ways to assess students' learning will be dependent on the content of your RSE programme. For example, gathering evidence through:

- Students' explanations of how to apply interpersonal skills in relationships.

- Application of understanding of wellbeing in a RSE context.
- Investigation of societal messages that influence young people's sexuality.
- Community support systems in place to enhance sexual health and/or sexuality.

See our RSE progressions for ideas on how to better understand progression of learning in RSE and assess student learning. Enhancing the way assessment is used in RSE promotes learning and deeper understanding, raising learners' levels of progress and achievement. Moreover, this helps inform planning for subsequent learning opportunities in RSE and health education.

### See also

- [Health and Physical Education Learning Progressions](#)

# External providers

## Using external providers in RSE

Education policy, research and guidance documents reinforce the central role of the teacher when planning for, and teaching, learning experiences in the *New Zealand Curriculum*. RSE and health education is no exception to this. The RSE guide stresses that teachers are the experts in terms of pedagogies and the learning needs of their ākongā, and they are ultimately responsible for curriculum delivery. This is reinforced by the 'effective pedagogy' section of the *New Zealand Curriculum*, and the standards for the teaching profession. External providers often have expertise in areas teachers may not, and can be used to support teaching in RSE in partnership with schools and teachers. But it is not considered good practice to hand over the responsibility for RSE or other units of learning in health education to external providers. After all, you know your learners best. Some teachers or leaders might feel worried about teaching RSE, but the more robust your more formal consultation and your on-going communications with whānau, parents and caregivers, the less risk there is in this regard.

If you need to have a conversation with others in your school about hiring external providers, here are some tips :

- Prepare your case using the various policy and supporting documents that exist. In addition to those mentioned above, useful documents could be the [ERO's promoting wellbeing through sexuality](#) and [NZHEA's position statement on external providers](#).
- Explain why and how you plan to teach RSE and how as a teaching team you can support each other in an on-going and sustainable way.
- Outline how you will access professional learning and development as a further avenue of support. This may include attending courses run off-site, providers coming to the school to provide PLD, working with schools in your kahui ako or your local community, or you running PLD for teachers in your school.
- Ensure that your community consultation has been completed, and use any feedback from members of the school community to strengthen your case — including ākongā.
- Acknowledge the role you do see external providers having in supporting your teaching, and explain how you might work in partnership with a provider(s) and why this is important. Note that working in partnerships with schools should also be the aim of any external provider — it is a red flag if they want to come into your school to run only a 'one-off' session(s).

### See also

- [RSE Guide](#) Section 3 (page 40)



# Other

## RSE guides split into Years 1-8 and Years 9-13

The previous iterations of MoE guidance around teaching RSE (2001 and 2015) consisted solely of one document for all levels of schooling. The current version is separated into two documents in order to better connect to the respective levels of curriculum and schooling. Years 1-8 covers topics strongly connected to primary and intermediate schools (up to and including level 4 of the curriculum). Years 9-13 cover topics more pertinent in secondary schooling contexts, and include levels 4-8 of the curriculum. Hence we acknowledge the overlap that exists in curriculum levels between the primary and secondary years of schooling.

We also acknowledge the diversity of schools in Aotearoa New Zealand (for example year 1-13 schools and year 7-13 schools), but developing two guides with Years 1-8 and Years 9-13 audiences in mind was viewed as the best way to present the guidance for teachers, leaders and boards of trustees.