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Thank you to the members of the Joint Committee for this opportunity to discuss topics raised in my written submission with Richie Sadlier, that articulated our personal experience piloting a sexual health module at Richie's Alma Mater.

My perspective is informed by two components of my work; as co-facilitator of the sexual health module with second level students, and my own PhD research that focusses on sexual behaviour and the communication of sexual consent amongst third level students.

Experience of the existing RSE curriculum – where we are; where we need to be

Data from third level students I have interviewed indicates that for most school-based RSE was at best haphazard, at worst non-existent. There was consistency with words and phrases used to describe the experience including "limited", "mechanics", "skirting around the issue," "it wasn't dealt with". One students' recollection strongly resonated, and for me summed up sex education in Ireland:

".. I think that education at that point has failed us, because we haven't had enough information.....if I had this information, I could have made different choices. And I know people who have had sex, and years later have realised that they regretted it" Ann, 21

Such experiences and memories are not something I want for this cohort of students.

As a parent, it's not what I want for my own children and their generation.

There is a very real opportunity to create a framework for sex education that is not just comprehensive, but empowers young people to develop autonomy and sexual competence in their relationships (Hirst, 2008). Collectively, as adult members of society, we owe it to young people to address past failings and support their developing sexual health. As outlined by the World Health Organisation (2006a), the sexual rights of all people must be respected, protected and fulfilled.

A critique of sexuality education internationally is that that it has historically been founded on adult concepts and agendas. In their 2007 report on the RSE curriculum Mayock, Kitching and Morgan conveyed that many students were dissatisfied with an approach to sex and sexuality education in schools that is clinical, didactic, unappealing and lacking relevance. This was largely attributed to the constraints of religious – primarily Catholic – ethos; a view that was also reflected in my own work with third level students.

While I believe this to be contributory, it is not the only constraint on RSE provision in an Irish context. International research shows that adolescents want more transparency, interactivity, and practical engagement from RSE. They want to explore topics in detail, that reflect the diversity of current societal and personal realities and opportunities (Aggleton & Crewe, 2005).

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The primary objective of the module Richie and I facilitate is to encourage an exploration of what positive sexuality means for students themselves and others in a safe, supported environment. Its intention is also to empower them with the skills to actively and affirmatively negotiate these experiences, both for themselves and others, in sexual relationships. As a sex researcher with a research focus on the communication of consent, I see how conscious the boys we support are of issues related to consent. They are also acutely aware of related gendered stereotypes, culturally and societally embedded, that are invariably heteronormative; the traditional sexual script in which males are depicted as predatory, females' passive. Indeed, research by Kreager et al. (2016) shows that the gendered social construction of sexuality must be understood to combat unbalanced and negative peer responses to real or perceived deviations from traditional sexual scripts.

Delivery of a new school based RSE curriculum

In their assessment of the challenges in implementing the existing RSE curriculum, Mayock et al., (2007) also identified the practice of involving outside agencies and professionals to support schools in its delivery, but also highlighted gaps in understanding their potential role in such support. From our experience, the relationship between us as facilitators and students is very different to a teacher-student relationship. WHO Europe and the Federal Centre for Health Education (BZgA) produced a framework for core competencies of sexuality educators that centre around attitudes, skills and knowledge (2017). Therefore, consideration needs to be given to how the new RSE curriculum will be delivered; and this should include an evaluation of the benefit of external, trained and experienced facilitators versus, what is effectively an "add-on" to the already considerable work load for post primary teachers, if we are to take the development of sexual competence and impact on future sexual health of our adolescent population seriously.

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Student-Parent-School Collaboration

I readily understand that there is a certain onus of responsibility on us as parents to facilitate our children's developing knowledge and education about relationships and sexuality. I am equally understanding of the reality that it will probably take another generation before we have matured societally and culturally in Ireland for this to happen in any meaningful way.

We are not alone in this.

Australian research relating to the attitudes of parents to RSE both in school and at home, showed that many felt inadequate in providing broad sex education to their children, with some citing their own limited education about sexuality as contributing to their lack of confidence. However, regardless of the different approaches they used, all expressed a wish that their children be well informed about sex, sexual health and relationships. (Dyson & Smith, 2012).

Factual information may be difficult for parents to convey due to specific knowledge and skills required, but a parental role could involve communication about values, providing a positive family environment to reinforce constructive messaging, and encouraging dialogue. I believe this will require support and collaboration between school and home that goes beyond lip-service.

As evidenced in, for example, Nordic countries where there is a progressive approach to sex education, children learn through both school and home that sex and sexuality are healthy and normative components of the human experience.

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