



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Joint Committee on Education & Skills

Meeting

Tuesday 12th June 2018

Opening Statement

by

Ms. Orla McGowan
Programme Manager for Education
Health Service Executive

I would like to thank the committee for the opportunity to make this opening statement and to say that we welcome the review of RSE being undertaken by the NCCA. We have made a detailed submission and I will outline the main points and our thoughts in relation to the review of RSE and respond to any questions you may have.

RSE is a key strategic focus of the HSE Sexual Health and Crisis Pregnancy Programme. As outlined in our submission, we have commissioned a range of research studies and developed a range of resource materials and training for parents, teachers and youth workers in partnership with a number of different organisations including the Department of Education and Skills, the Professional Development Service for Teachers, the National Youth Council of Ireland, Foroige, TUSLA, the National Parents Council and the IFPA.

Overall, the evidence indicates that:

- Young people are more likely to receive sex education now than in the past, and are also more likely to say that it was helpful to them.
- Young people who felt that they had good quality relationships and sexuality education were more likely to use contraception at first sex.
- Contraceptive use among young people in Ireland is very high.
- There has been a decline in 66% in the numbers of births to teenagers since 2001 and a 75% decline in the number of teenagers accessing abortion services abroad since 2001.

While these findings are positive, we acknowledge that there is more to relationships and sexuality education than preventing crisis pregnancy. Sexuality education should emphasise the importance of supporting young people to understand themselves and develop healthy relationships with others. Students should also be facilitated to explore and question how our society understands gender, power and sexual expression in an age appropriate way.

Several research reports have indicated that teachers find RSE challenging to teach and require more CPD to improve their confidence and competence levels. It is our view that any revised curriculum on its own will not be sufficient to change practice unless it is supported by a comprehensive and potentially accredited CPD Programme for teachers in SPHE and RSE. SPHE is the only subject at post-primary where there is no accredited, professional qualification and this contributes to the lack of status of the subject in some schools. We note and welcome that the NCCA review will include advice on implementation of the curriculum in schools.

Another barrier to consider is that while RSE is taught within the context of SPHE from Primary level to Junior Cycle, SPHE is still optional at Senior Cycle. This means that schools are required to teach six classes of RSE per year, but are not required to teach it within the context of SPHE. This makes RSE more difficult to timetable and more difficult to teach because the teachers might not have the opportunity to build up a relationship with the class on other areas of health education before addressing RSE. Surveys and inspection reports have consistently found that RSE implementation decreases significantly in Senior Cycle. This is a concern because 16-18 year olds may be starting romantic relationships and dealing with break ups during their Senior Cycle years.

Finally, the committee may be interested to know that ourselves and the Dept of Education have commissioned DCU to undertake a piece of research on RSE in post-primary schools to develop a more nuanced understanding of how the RSE Programme is implemented in schools. Students, parents and teachers have been interviewed. The findings are due at the end of the year and I understand will contribute to the NCCA review.

Thank you.