



Statement from CESEW re Testing for Sexually Transmitted Infections

The increasing number of young people nationally with sexually transmitted infections (STIs) is leading to situations where some of our schools and sixth form colleges are being asked to participate in initiatives, eg, led by the Primary Care trusts (PCT) which encourage pupils and students to participate in testing for STIs.

CESEW understands that sometimes the tests are aimed at all students in a particular age cohort whilst sometimes the invitation is more explicitly aimed at those who think that they have been at risk of infection.

The test is a simple urine test which may be offered in school by the school nurse who may also give the result and advice on what treatment is needed as appropriate. In some places results are texted to individual students' mobiles.

Whether to agree to such testing in schools and colleges must be the decision of the individual governing body. We strongly advise that if such testing is to be made available at or facilitated through the school or college, parents should be advised of this and encouraged to discuss the matter with their daughter or son.

Governors and parents may understandably be concerned that permitting the test may be perceived as condoning pupils or students being sexually active and thus not living within the teachings of the Church. However, the paramount concern is that young people who find themselves in this situation should be able to get swift treatment so that the long term ill effects of STIs, which can include infertility, are averted. The testing programme should also prompt review of the inclusion of the issue in the Sex and Relationships Education programme at that time for the relevant cohort of pupils. This and other relevant curriculum opportunities should provide for sensitive discussion of the issues in the context of behaviour and the Church's teachings and expectations.

We offer the following guidelines to support governors in their decision making:

1. It is acknowledged that this is a complex and sensitive issue and that therefore consensus may be difficult to achieve. The governing body has a duty to ensure that the Church's teaching and therefore the Catholic ethos of the school or college is upheld. A compassionate response to the needs of pupils and students is a critical part of such ethos.

2. Whenever a young person confides in an adult within a Catholic school about a sexually transmitted infection, the response by the adult should be both compassionate and practical. Within the context of pastoral care the young person should be given the appropriate support and information with regard to medical treatment and advised to discuss the situation with their parents.
3. Safeguarding of children and young people is always a priority; the school or college should have regard to its own child protection and safeguarding policies so that it is ready to take appropriate action if, prompted by the availability of testing for STIs or other factors, a young person, under the age of legal consent discloses an inappropriate relationship.
4. The relationship between Catholic schools and parents is one of the great strengths of our Catholic school system. Therefore it is expected that governing bodies will ensure that prior to their decision making on testing for STIs parents are included in a consultation process and their views given serious consideration. The governing body will also wish to ensure that it has taken account of expert professional advice.
5. In the case of a governing body agreeing to test for STIs in or via the school or college, the governors should ensure that parents are advised of this decision and given the opportunity to let the school or college know if they do not wish their daughter or son to participate. Particular sensitivity will be needed in colleges where all the students are legally above the age of consent. Governing bodies will wish to be sure that all communications are properly recorded.
6. Parents are the first educators of their children and we urge that governors, senior management and teachers encourage parents to talk to their children about these issues and other aspects of relationships education in age appropriate manner. Likewise every encouragement should be given to children to confide in their parents. Parents should have plenty of opportunity to see and comment on the school's Sex and relationships policy and programmes, and the resources to support these.

Conclusion

We are confident that governors, parents and staff will give this complex issue their careful consideration and ensure that any decision supports both the Catholic nature and purpose of our schools and colleges and the physical and emotional health and wellbeing of our children and young people.

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