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ST MICHAELS C OF E PRIMARY ACADEMY, NURSERY AND CHILDREN AND FAMILY CENTRE

Relationship and Sex Education Policy

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ST MICHAELS C OF E PRIMARY ACADEMY, NURSERY AND CHILDREN AND FAMILY CENTRE
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St. Michael's Academy Relationships, Health & Sex Education Policy

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Associated Documents & Links to:	
• Safeguarding and Child Protection Policy • Behaviour Policy • Whistleblowing policy • Data protection policy • E-safety Policy • Anti-Bullying Policy • Statutory DfE guidance: https://www.gov.uk/government/publications/relationships-education-relationships-and-sex-education-rse-and-health-education • Keeping Children Safe in Education (statutory guidance) • Equality Act 2010 and schools • SEND code of practice: 0 to 25 years (statutory guidance) • Alternative Provision (statutory guidance) • Mental Health and Behaviour in Schools (advice for schools) • Preventing and Tackling Bullying (advice for schools, including advice on cyberbullying) • Sexual violence and sexual harassment between children in schools (advice for schools) • The Equality and Human Rights Commission Advice and Guidance (provides advice on avoiding discrimination in a variety of educational contexts) • Promoting Fundamental British Values as part of SMSC in schools (guidance for maintained schools on promoting basic important British values as part of pupils' spiritual, moral, social and cultural (SMSC) • SMSC requirements for independent schools (guidance for independent schools on how they should support pupils' spiritual, moral, social and cultural development).	It is also aligned with the Church of England's "A CHARTER FOR FAITH SENSITIVE AND INCLUSIVE RELATIONSHIPS EDUCATION, RELATIONSHIPS AND SEX EDUCATION (RSE) AND HEALTH EDUCATION (RSHE)" and draws on the advice given in the Church of England document 'Valuing All God's Children: Guidance for Church of England schools on challenging homophobic, biphobic and transphobic bullying' (Church of England Education Office, second edition updated summer 2019).

Aims

The aims of Relationships Education, Relationships and Sex Education (RSE) and Health Education at St. Michael's Academy are to:

- Put in place the building blocks of healthy, respectful relationships, focusing on family and friendships in all contexts including online.
- Give children the tools with learning how to be safe, and to understand and develop healthy relationships, both now and in their future lives.
- Build resilience and nurture physical and mental health
- Help pupils develop feelings of self-respect, confidence and empathy
- Prepare pupils for puberty, and give them an understanding of sexual development and the importance of health and hygiene
- Teach pupils the correct vocabulary to describe themselves and their bodies
- Provide a framework in which sensitive discussions can take place

Statutory requirements

"The Relationships Education, Relationships and Sex Education and Health Education (England) Regulations 2019, made under sections 34 and 35 of the Children and Social Work Act 2017, make **Relationships Education compulsory** for all pupils receiving primary education...They also make **Health Education compulsory in all schools** except independent schools. Personal, Social, Health and Economic Education(PSHE) continues to be compulsory in independent schools."

DfE Guidance p.8

" These subjects represent a huge opportunity to help our children and young people develop. The knowledge and attributes gained will support their own, and others' wellbeing and attainment and help

young people to become successful and happy adults who make a meaningful contribution to society."

Secretary of State Foreword DfE Guidance 2019 p.4-5

As a primary academy school, we must provide relationships and health education to all pupils as stated in the Statutory DfE Guidance and parents do not have the right to withdraw their child from these lessons. Parents do have the right to withdraw their child from some or all of the sex education delivered as part of the statutory RSE. Some elements of sex education are contained in the Science curriculum and parents do not have the right to withdraw their child from these lessons.

At St. Michael's Academy we teach Relationship, Sex and Health Education as set out in this policy. We believe in working in partnership with parents and carers and understand the importance of sharing our Relationships and Sex Education (RSE) and Health Education programme and policy with families, so that they are able to support their children's physical, moral, mental wellbeing and emotional development at home.

Policy development

This policy has been developed in consultation with staff, pupils and parents. The consultation and policy development process involved the following steps:

1. Review – the PHSE Lead pulled together all relevant information including relevant national and local guidance and shared this with SLT.

2. Staff consultation – all school staff were given the opportunity to look at the policy and make recommendations through feedback in a staff meeting.

3. Governor consultation – the policy was shared with governors before shared with parents.

4. Parent/stakeholder consultation – parents and any interested parties will be able to view a draft policy asking for their feedback electronically and invited to attend a meeting about the policy.

5. Pupil reflection – we will conduct a pupil voice and ask children what they want from their RSE education and ask pupils for feedback on the SRE units once they have been completed during the academic year and use this feedback to further inform future sessions.

6. Ratification – once amendments were made, the policy was shared with governors and ratified.

Definition

Relationship Education

Relationship Education focuses on teaching the fundamental building blocks and characteristics of positive relationships, with particular reference to friendships, family relationships with other children and with adults. From the beginning of primary school, children are taught how to take turns, how to treat each other with kindness, consideration and respect, the importance of honesty and truthfulness, permission seeking and giving, and the concept of privacy. Children will be taught about the features of healthy relationships, family relationships and other relationships which young people are likely to encounter. The Equality Act requires schools to eliminate discrimination; advance equality of opportunity; and foster good relationships. By doing so, the Equality Act encourages schools to meet the diverse needs of the children and to improve outcomes for al pupils regardless of background. Part of the Equality 'duty' is to teach children about rights and responsibilities, acceptance, empathy and understanding of others. When teaching relationships, children are also taught about online safety and appropriate behaviour online in a way that is relevant to the children's lives. Teaching about families requires sensitive and well-judged teaching based on the knowledge of pupils and their circumstances. Children are taught how families of many forms provide a nurturing environment for children. Families can include for example single parent families, LGBT parents, children living with

grandparents, adoptive parents, foster parents/carers amongst other structures, along with reflecting sensitively that some children may have a different structure of support around them (for example: looked after children or young carers).

As a school we aim to value and include all children and all family compositions, not to mention all teachers and the school community, thus equipping children for life in the UK today. At no point is there any mention of sexual activity. Through the Taking Care Project (which is taught in Autumn 1), children are taught about the difference between 'safe' and 'unsafe' secrets and the knowledge they need to recognise and report abuse including emotional, physical and sexual abuse. Children are taught how to report concerns when they suspect or know something is wrong.

Sex Education

The DfE Guidance 2019 (p.23) recommends that all primary schools 'have a sex education programme tailored to the age and the physical and emotional maturity of the pupils.
However, 'Sex Education is not compulsory in primary schools'. (p. 23)

At St. Michael's Academy, we believe both boys and girls should be prepared for the changes that adolescence brings and draw on knowledge of the human life cycle set out in the national curriculum for Science. **We define Sex Education as understanding human reproduction – how a baby is conceived and born.**

Curriculum

As a school we use the Jigsaw Programme for PSHE lessons which offers us a comprehensive, carefully thought-through Scheme of Work which brings consistency and progression to our children's learning in this vital curriculum area.

Relationship Education

Relationships education focuses on teaching the fundamental building blocks and characteristics of positive relationships (see appendix 1) including:

- Families and people who care for me
- Caring friendships

- Respectful relationships
- Online relationships
- Being safe

It is important to explain that whilst the Relationships Puzzle (unit) in Jigsaw covers most of the statutory Relationships Education, some of the outcomes are also taught through our 'No Outsiders' lessons. At St. Michael's we celebrate diversity and are committed to the principles of inclusion and equality. No Outsiders proactively supports the Equality Act to ensure that everyone is treated equally and without prejudice. No Outsiders is part of our curriculum and is taught through a series of picture books addressing the different areas of the Equality Act. Children are taught about that the society in which we live, and how the different types of loving, healthy relationships that exist can be created and maintained in a way that respects everyone and allows each individual to feel valued and loved.

Parents should also be aware that the Church of England states in "Valuing All God's Children", 2019, that Relationships and Sex education should: "*Make it clear that relationships and sex education is designed to prepare all pupils for the future, regardless of sexual orientation or gender identity. RSE must promote gender equality and LGBT equality and it must challenge discrimination. RSE must take the needs and experiences of LGBT people into account and it should seek to develop understanding that there are a variety of relationships and family patterns in the modern world.*" (Page 34) Online relationships is addressed within the computing curriculum and through whole school opportunities such as anti-bullying week.

Health Education

Health Education in primary schools will cover 'Mental wellbeing', 'Internet safety and harms', Physical health and fitness', Healthy eating', 'Drugs, alcohol and tobacco', 'Health and prevention', 'Basic First Aid', 'Changing adolescent body' – see appendix 2.

As a school, we recognise how mental health and well-being, as well as children's physical health, can have a significant impact on a child's learning and school life. Teachers support children in

understanding steps that can be taken to protect their own and others' health and well-being, including simple self-care techniques, personal hygiene, prevention of health and wellbeing problems and basic first aid. As part of the Taking Care Project in the Autumn Term, children create their own personal networks to support them in seeking support and discussing their feelings. Every classroom in the school also has a 'worry monster' where children can reach out and post their worries or anxieties and adults in school will read and act on.

Teaching children about puberty is now a statutory requirement which sits within the Health Education part of the DfE guidance within the 'Changing adolescent body' strand, and in Jigsaw this is taught as part of the Changing Me Puzzle (unit) in the Summer Term. As a school we recognise that children need to learn about the physical and emotional changes associated with puberty before they experience them, so that they can have the correct information about how to take care of their bodies and keep themselves safe. 'The onset of menstruation can be confusing or even alarming for girls if they are not prepared. Children will be taught the key facts about the menstrual cycle including what is an average period, range of menstrual production and the implications for emotional and physical health. '(Statutory guidance p.31).

Sex Education

The National Curriculum for Science (a compulsory subject which children cannot be withdrawn from) includes learning the correct names for the main external body parts, learning about the human body as it grows from birth to old age and reproduction in some plants and animals.

Primary sex education in PSHE will focus on:

- How a baby is conceived and born

Jigsaw's changing me unit is taught in Years 4,5 and 6 over a period of 6 weeks in the Summer Term (See Appendix 3). Each year group will be taught appropriate to their age and developmental stage, building on the previous years' learning. At no point will a child be taught something that is inappropriate. Before the lessons are taught, the class teacher will explain how there is a box in the classroom for any questions to be put into and children can choose

to be anonymous or put their name on the question; however if the teacher feels it would be inappropriate to answer either infront of the class or privately (e.g. because of its explicit or mature nature), the child will be encouraged to ask his/hers significant adult at home. The question will not be answered to the child or the class if it is outside the remit of that year group's programme. If a class teacher is aware of who asked a particular question that they are unable to answer, they will inform the significant adult of that question.

All lessons are taught using the correct terminology, child-friendly language and diagrams. It is essential that children learn the correct biological names for the genitalia and reproductive organs. Having the right language to describe all parts of the body and knowing how to seek help if they are worried or uncomfortable about something and have the vocabulary to describe why they are seeking help – are vital for safeguarding. To keep children safe from abusive behaviours makes it essential for this language to be introduced early in their schooling.

We conclude that sex education refers to Human Reproduction, and therefore inform parents of their right to request their child be withdrawn from the PSHE lessons that explicitly teach this i.e. the Jigsaw Changing Me Puzzle (unit) see Appendix 5-7

Equal Opportunities

The Relationships and Sex Education (RSE) and Health Education programme will be delivered in accordance with the school's Inclusion Policy and the Diocese of Coventry Multi Academy Trust Equalities Statement. The promotion of any type of relationship will not occur. Where appropriate, children will be given opportunities to discuss specific issues related to puberty in single sex groups although we recognise the importance of females learning about changes in the male body during puberty and vice versa.
The Church of England document "Valuing all God's Children", 2019, states:
"Central to Christian theology is the truth that every single one of us is made in the image of God. Every one of us is loved unconditionally by God. We must avoid, at all costs, diminishing the dignity of any individual to a stereotype or a problem. Church of England schools offer a community where everyone is a person

known and loved by God, supported to know their intrinsic value" (page 1)
Relationship, Sex and Health Education must be accessible for all pupils. High quality teaching that is differentiated and personalised will be the starting point to ensure accessibility. RSE can be especially important for those children with Social, Emotional and Mental Health needs or learning disabilities. St. Michael's will ensure that all of their teaching is sensitive, age appropriate in approach and content.

Roles and responsibilities

The local academy governance committee (AGC) - The LAC will monitor the implementation of this policy on behalf of Trustees.

The Headteacher - The headteacher is responsible for ensuring that Relationships Education, Relationships and Sex Education (RSE) and Health Education is taught consistently across the school, and for managing requests to withdraw pupils from non-statutory/non-science components of RSE.

Staff

Staff are responsible for:

- Delivering Relationships Education, Relationships and Sex Education and Health Education in a sensitive way
- Modelling positive attitudes to Relationships Education, Relationships and Sex Education and Health Education
- Monitoring progress
- Responding to the needs of individual pupils
- Supporting the review and reflection process for pupil feedback after taught units.
- Responding appropriately to pupils whose parents wish them to be withdrawn from the non-statutory/non-science components of Sex Education.

- Making pupils aware that if anything that is said during these sessions raises any concerns about themselves or about someone that they know they should talk to a trusted member of staff about it.
- Staff do not have the right to opt out of teaching RH(S)E
- Staff who have concerns about teaching RH(S)E are encouraged to discuss this with the Headteacher.

Pupils

Pupils are expected to engage fully in RH(S)E and, when discussing issues related to RH(S)E, treat others with respect and sensitivity. Failure to behave appropriately will be dealt with in accordance to the Behavior Policy. If gaining a wider awareness of positive relationships versus negative relationships causes any concern to any pupil about themselves or someone they know, they are encouraged to share these concerns with a trusted member of staff who will deal with them in accordance with the safeguarding policy.

Parents' right to withdraw

Parents do not have the right to withdraw their children from relationships or health education.

Parents have the right to withdraw their children from the non-statutory/non-science components of sex education – how a baby is conceived and born.

If a parent wishes to withdraw their child from a Sexual Education Lesson, this will be discussed with the Headteacher and the 'Request to withdraw my child from: How a baby is conceived and born lesson' form will be completed setting out the reasons for withdrawing the child in line with the Government's statutory guidance. The Headteacher will discuss the request with parents and take appropriate action and record the viewpoint of both parties as well as the outcome of the discussion. Alternative work will be given to pupils who are withdrawn from sex education. A copy of withdrawal requests will be placed in the pupil's educational record.

Training

Staff are trained on the delivery of RH(S)E and it is included in our continuing professional development calendar. Where appropriate, visitors from outside the school, such as school nurses or sexual health professionals will be used to provide support and training to staff teaching RSE in line with the academy's Visitors Policy.

Monitoring arrangements

The delivery of RH(S)E is monitored by Liz Read as PSHE Subject Lead through: planning scrutinies, learning walks, monitoring of floor books and pupil voice.

Pupils' development in RH(S)E is monitored by class teachers as part of our internal assessment systems.

This policy will be reviewed by The Subject Lead bi-annually or sooner if as a result of pupil feedback, consultation feedback or a change in guidance from the DfE. At every review, the policy will be approved by the Trustees.

Appendix 1

Relationships Education in Primary schools – DfE Guidance 2019

The focus in primary school should be on teaching the fundamental building blocks and characteristics of positive relationships, with particular reference to friendships, family relationships, and relationships with other children and with adults.

The guidance states that, by the end of primary school:

	Pupils should know…
Families and people who care for me	• R1 that families are important for children growing up because they can give love, security and stability. • R2 the characteristics of healthy family life, commitment to each other, including in times of difficulty, protection and care for children and other family members, the importance of spending time together and sharing each other's lives. • R3 that others' families, either in school or in the wider world, sometimes look different from their family, but that they should respect those differences and know that other children's families are also characterised by love and care. • R4 that stable, caring relationships, which may be of different types, are at the heart of happy families, and are important for children's security as they grow up. • R5 that marriage represents a formal and legally recognised commitment of two people to each other which is intended to be lifelong (Marriage in England and Wales is available to both opposite sex and same sex couples. The Marriage (Same Sex Couples) Act 2013 extended marriage to same sex couples in England and Wales. The ceremony through which a couple get married may be civil or religious). • R6 how to recognise if family relationships are making them feel unhappy or unsafe, and how to seek help or advice from others if needed
Caring friendships	• R7 how important friendships are in making us feel happy and secure, and how people choose and make friends

	• R8 the characteristics of friendships, including mutual respect, truthfulness, trustworthiness, loyalty, kindness, generosity, trust, sharinginterests and experiences and support with problems and difficulties • R9 that healthy friendships are positive and welcoming towards others and do not make others feel lonely or excluded • R10 that most friendships have ups and downs, and that these can often be worked through so that the friendship is repaired or even strengthened, and that resorting to violence is never right • R11 how to recognise who to trust and who not to trust, how to judge when a friendship is making them feel unhappy or uncomfortable, managing conflict, how to manage these situations and how to seek help and advice from others, if needed
Respectful relationships	• R12 the importance of respecting others, even when they are very different from them (for example, physically, in character, personality or backgrounds), or make different choices or have different preferences or beliefs • R13 practical steps they can take in a range of different contexts to improve or support respectful relationships • R14 the conventions of coutesy and manners • R15 the importance of self-respect and how this links to their own happiness • R16 that in school and in wider societythey can expect to be treated with respect by others, and that in turn they should show due respect to others, including those in positions of authority • R17 about different types of bullying (including cyberbullying), the impact of bullying, responsibilities of bystanders (primarily reporting bullying to an adult) and how to get help • R18 what a stereotype is, and how stereotypes can be unfair, negative or destructive • R19 the importance of permission-seeking and giving in relationships with friends, peers and adults

Online relationships	• R20 that people sometimes behave differently online, including by pretending to be someone they are not. • R21 that the same principles apply to online relationships as to face-to-face relationships, including the importance of respect for others online including when we are anonymous. • R22 the rules and principles for keeping safe online, how to recognise risks, harmful content and contact, and how to report them. • R23 how to critically consider their online friendships and sources of information including awareness of the risks associated with people they have never met. • R24 how information and data is shared and used online.
Being safe	• R25what sorts of boundaries are appropriate in friendships with peers and others (including in a digital context). • R26 about the concept of privacy and the implications of it for both children and adults; including that it is not always right to keep secrets if they relate to being safe. • R27 that each person's body belongs to them, and the differences between appropriate and inappropriate or unsafe physical, and other, contact. • R28 how to respond safely and appropriately to adults they may encounter (in all contexts, including online) whom they do not know. • R29 how to recognise and report feelings of being unsafe or feeling bad about any adult. • R30 how to ask for advice or help for themselves or others, and to keep trying until they are heard, • R31 how to report concerns or abuse, and the vocabulary and confidence needed to do so. • R32 where to get advice e.g. family, school and/or other sources.

Appendix 2

Physical health and mental well-being education in Primary schools - DfE Guidance

The focus in primary school should be on teaching the characteristics of good physical health and mental wellbeing. Teachers should be clear that mental well-being is a normal part of daily life, in the same way as physical health.

By the end of primary school:

	Pupils should know
Mental wellbeing	• H1 that mental wellbeing is a normal part of daily life, in the same way as physical health. • H2 that there is a normal range of emotions (e.g. happiness, sadness, anger, fear, surprise, nervousness) and scale of emotions that all humans experience in relation to different experiences and situations.

	• H3 how to recognise and talk about their emotions, including having a varied vocabulary of words to use when talking about their own and others' feelings. • H4 how to judge whether what they are feeling and how they are behaving is appropriate and proportionate. • H5 the benefits of physical exercise, time outdoors, community participation, voluntary and service-based activity on mental well-being and happiness. • H6 simple self-care techniques, including the importance of rest, time spent with friends and family and the benefits of hobbies and interests. • H7 isolation and loneliness can affect children and that it is very important for children to discuss their feelings with an adult and seek support. • H8 that bullying (including cyberbullying) has a negative and often lasting impact on mental well-being. • H9 where and how to seek support (including recognising the triggers for seeking support), including whom in school they should speak to if they are worried about their own or someone else's mental well-being or ability to control their emotions (including issues arising online). • H10 it is common for people to experience mental ill health. For many people who do, the problems can be resolved if the right support is made available, especially if accessed early enough.
Internet safety and harms	• H11 that for most people the internet is an integral part of life and has many benefits. • H12 about the benefits of rationing time spent online, the risks of excessive time spent on electronic devices and the impact of positive and negative content online on their own and others' mental and physical wellbeing. • H13 how to consider the effect of their online actions on others and knowhow to recognise and display respectful behaviour online and the importance of keeping personal information private. • H14 why social media, some computer games and online gaming, for example, are age restricted.

	• H15 that the internet can also be a negative place where online abuse, trolling, bullying and harassment can take place, which can have a negative impact on mental health. • H16 how to be a discerning consumer of information online including understanding that information, including that from search engines, is ranked, selected and targeted. • H17 where and how to report concerns and get support with issues online.
Physical health and fitness	• H18 the characteristics and mental and physical benefits of an active lifestyle. • H19 the importance of building regular exercise into daily and weekly routines and how to achieve this; for example, walking or cycling to school, a daily active mile or other forms of regular, vigorous exercise. • H20 the risks associated with an inactive lifestyle (including obesity). • H21 how and when to seek support including which adults to speak to in school if they are worried about their health.
Healthy eating	• H22 what constitutes a healthy diet (including understanding calories and other nutritional content). • H23 the principles of planning and preparing a range of healthy meals. • H24 the characteristics of a poor diet and risks associated with unhealthy eating (including, for example, obesity and tooth decay) and other behaviours (e.g. the impact of alcohol on diet or health).
Drugs, alcohol and tobacco	• H25 the facts about legal and illegal harmful substances and associated risks, including smoking, alcohol use and drug-taking
Health and prevention	• H26 how to recognise early signs of physical illness, such as weight loss, or unexplained changes to the body.

	• H27 about safe and unsafe exposure to the sun, and how to reduce the risk of sun damage, including skin cancer. • H28 the importance of sufficient good quality sleep for good health and that a lack of sleep can affect weight, mood and ability to learn. • H29 about dental health and the benefits of good oral hygiene and dental flossing, including regular check-ups at the dentist. • H30 about personal hygiene and germs including bacteria, viruses, how they are spread and treated, and the importance of handwashing. • H31 the facts and science relating to immunisation and vaccination
Basic first aid	• H32 how to make a clear and efficient call to emergency services if necessary. • H33 concepts of basic first-aid, for example dealing with common injuries, including head injuries.
Changing adolescent body	• H34 key facts about puberty and the changing adolescent body, particularly from age 9 through to age 11, including physical and emotional changes. • H35 about menstrual wellbeing including the key facts about the menstrual cycle.

Appendix 3

The changing me unit is all about coping positively with change and includes:

Reception	Growing Up: how we have changed since we were babies.
Year 1	Boys' and girls' bodies; correct names for body parts
Year 2	Boys' and girls' bodes; body parts and respecting privacy (which parts of the body are private and why this is).
Year 3	How babies grow and how boys' and girls' bodies changes as they grow older. Introduction to puberty and menstruation.
Year 4	Internal and external reproductive body parts. Recap about puberty and menstruation. Conception explained in simple terms.
Year 5	Puberty for boys and girls in more detail including the social and emotional aspects of becoming an adolescent. Conception explained in simple biological terms.
Year 6	Puberty for boys and girls revisited. Understanding conception to the birth of a baby. Becoming a teenager.

Appendix 4

Request to withdraw my child from: How a baby is conceived and born lesson

Request to withdraw my child from:
How a baby is conceived and born lesson

Dear Mr Errington,
I would like to withdraw my child _____ in class _____ from the Changing Me unit of PSHE.

I understand that I can only request that my child is withdrawn from the **Sexual Education Lessons** which deal with how a baby is conceived and born, and that they will still participate in the statutory Relationships and Health Education sessions.

The reason(s) that I would like my child to be withdrawn from their Year 4, Year 5, Year 6 (delete as appropriate) changing me lesson (that are in line with the government's statutory guidance) are:

Headteacher's response to the request:

The best phone number to contact me on is _____

or alternatively, please email me at _____

Yours sincerely

_____

Appendix 5

Puzzle 6: Changing Me - Ages 8-9 - Piece 2

Having a Baby	
Puzzle 6 Outcome **Tree of Change Display**	**Please teach me to…** correctly label the internal and external parts of male and female bodies that are necessary for making a baby understand that having a baby is a personal choice and express how I feel about having children when I am an adult
Resources Making Things cards Jigsaw Chime 'Calm Me' script Jigsaw Jaz Jigsaw Jerrie Cat Flashcard pictures of sperm and egg PowerPoint slides - Changes on the inside Animation: The Female Reproductive System Printed copies of PowerPoint slides Jigsaw Journals My Jigsaw Journey Jigsaw Jaz's Post box (from last lesson)	**Vocabulary** Sperm Egg/ Ovum Penis Testicles Vagina/ Vulva Womb/ Uterus Ovaries Making love Having sex Sexual Intercourse Fertilise Conception

Teaching and Learning

Note

Check Jigsaw Jaz's post box for questions prior to this session as some may be answered by the content of this lesson. Teachers can then refer to relevant children's questions throughout the lesson making it personal and responsive to the questions they want answers about.

If children ask the difference between vulva and vagina as they have been introduced to these terms previously, simply explain that the vulva is the name for the outside parts of a female's private parts, and the vagina is the channel just inside.

Teachers may wish to take notes within this lesson as part of the summative assessment for this unit of work (Puzzle).

Teachers will need to check which animation may be most appropriate to use with their classes.

Connect us

Shuffle the cards for the Making Things game and give one to each child. Then ask them to move around and compare their card with other people's, find the connections, and eventually form themselves into groups containing one finished article (a cake, an oak tree, a new car and a baby) and the 'ingredients' required for making it. There should be five in each group: if, as is likely, your class is not an exact multiple of five you could have some fun asking those left over what they think they could make with their assorted ingredients! Make sure all the class knows what the four finished articles and their constituent parts are.

Ask me this…

Do you know what things are made of and how they are made?

Open my mind With the class in a circle, point out that to make anything new it requires the right ingredients and the right conditions. Which of the four things in the game is the most special and important thing to make? Ask the children to work in talking partners and pose two questions for a brief discussion: • What do you think are the reasons why people might choose to have a baby? • What do you think might be difficult about looking after a new baby? After 3 minutes take some feedback and bring out the idea that having a baby is both a great joy and a big responsibility, and that is why many people wait until they have a loving and stable relationship in which to care for the baby. Point out that it has always been a natural human instinct to want babies; if not, none of us would be here! Explain it's a choice people make, and some people choose not to.	What is the most special and precious thing any of us can make? Why do people choose to have babies? What is difficult about looking after a baby? Does everybody have to have a baby?
Tell me or show me Slides 1-4: Think back to the starter game: what were the main ingredients for making a baby? Show flash cards with pictures of sperm (remember these are full of messages contained in genes about what the father is like) and egg /ovum (remember this is full of messages/ genes about what the mother is like). Use the PowerPoint slides to recap where the sperm and egg/ovum come from inside the body. The following simple 'script' suggests an approach to telling the story from this point on for children of this age. You may choose to include more explicit detail depending on what you judge yourself, the children or their parents/carers will be comfortable with. However, you decide to approach it, bear in mind that the children will not perceive any of this as sensational or shocking unless your manner and body language tell them so. *It's amazing how a baby starts to grow when a man's sperm and a woman's ovum meet and join together. This can happen when a grown-up man and woman share an especially close and loving embrace which allows the sperm to be released through the penis into the vagina. People refer to this as 'making love' or 'having sex' or sexual intercourse (children will probably have heard these expressions before, but may not really understand what sexual intercourse really means) It's an intimate, loving and very private part of a grown-up relationship. From the vagina, the sperm can swim through the womb/ uterus into the tubes that lead from the ovaries. If they meet an egg/ ovum there, one of them may 'fertilise' it - join with it so that it starts growing into a baby. This is called conception. The fertilised egg settles into the soft lining of the mother's womb, where it will grow until it is big enough to be born 40 weeks/(9 months). The baby will get half of its genes from the mother's egg/ovum and half its genes from the father's sperm.* **Show the animation: The Female Reproductive System. Some teachers prefer to show the whole animation and then ask the children to recap what has been shown; others like to pause the animation at key points for clarification and questioning. Note the animation does not show conception but the journey of the egg/ ovum. If children raise questions about menstruation ask them to hold onto their questions for next time, or to use Jigsaw Jaz's post box. Animations can be found on the Jigsaw Community Area on the website.**	Can you remember where the sperm and the egg come from? Why do we need to have differences between male and female?

Let me learn

Ask the children to imagine a visiting alien from a planet where there is no difference between male and female. (You might take on the role of the alien and invent a bizarre story about how they reproduce, e.g. by breaking off a finger and planting it in the ground!)

In pairs, ask the children to prepare a simple fact file in their Jigsaw Journals with a few bullet points for the alien, explaining the physical differences between male and female humans, using the correct vocabulary, and saying why we need these differences to make a baby. You may want to provide printed copies of the PowerPoint slides of male/female organs to help them illustrate the fact files.

Bring the class back together and show some of the children's work. Clarify any questions or misconceptions that arise.

Finish by reminding the children that Jigsaw Jaz has a private post box where they can put questions any time if there are things they not sure about, or they may want to talk to their parents/carers about it.

Help me reflect

Slide 5: As in previous Pieces (lessons), ask the children to review their learning using the My Jigsaw Journey resource.

Notes

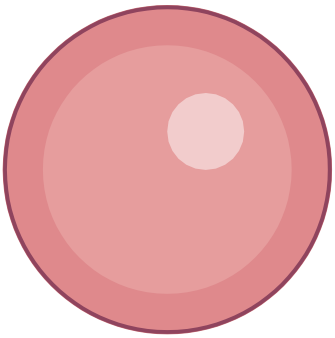
Changing Me

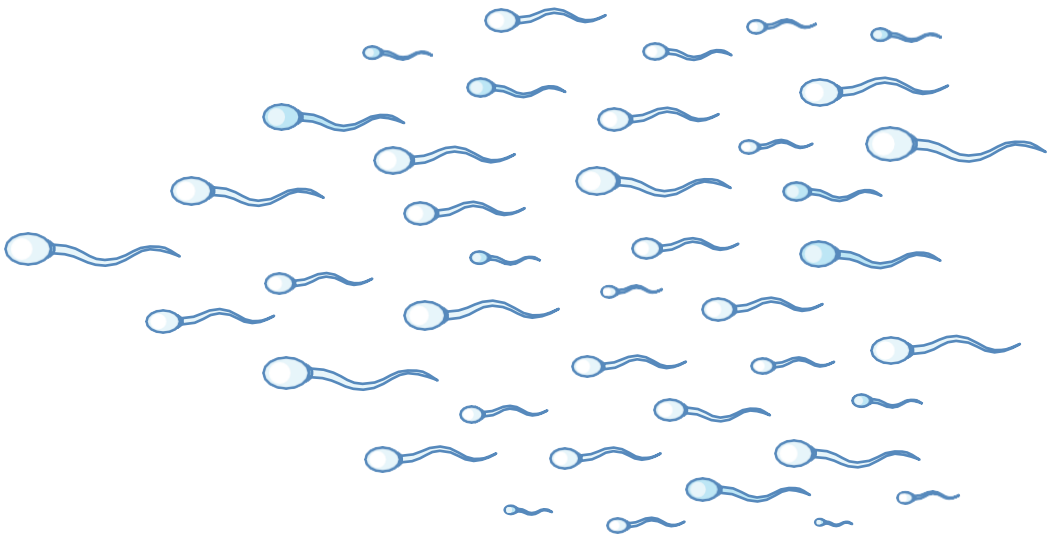
Making Things Cards - Ages 8-9 - Piece 2

A cake	An oak tree	A new car	A baby
Flour, eggs, sugar, butter and other ingredients	An acorn	Wheels, an engine and a metal body	A sperm
A baking tin	Rich soil full of nutrients and water	A factory full of machinery	An egg
A hot oven	Space to grow and spread its branches	Workers to make the parts and put them together	A mother's womb to grow in
A cook with a recipe	Warmth and light from the sun	A driver to buy it	A family to provide love and care

Changing Me

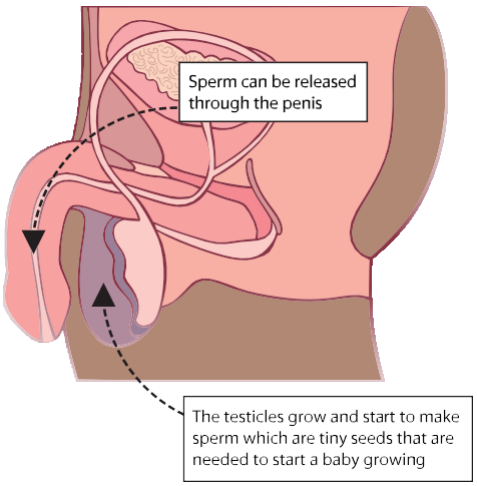
Sperm and Egg Cards - Ages 8-9 - Piece 2

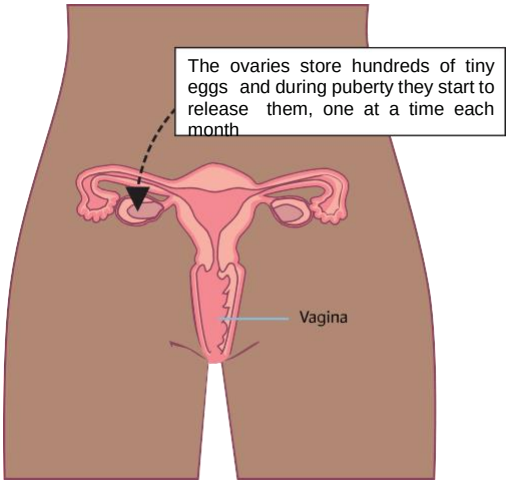




Changing Me

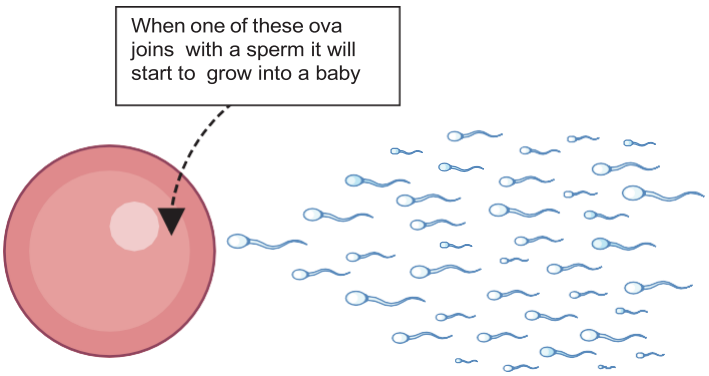
Changes on the Inside PowerPoint Slides 1-4 - Ages 8-9 - Piece 2

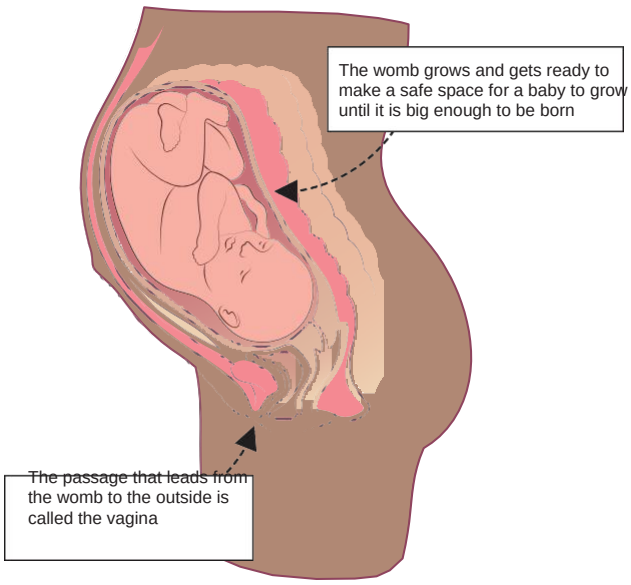




Changing Me

Changes on the Inside PowerPoint Slides 1-4 - Ages 8-9 - Piece 2

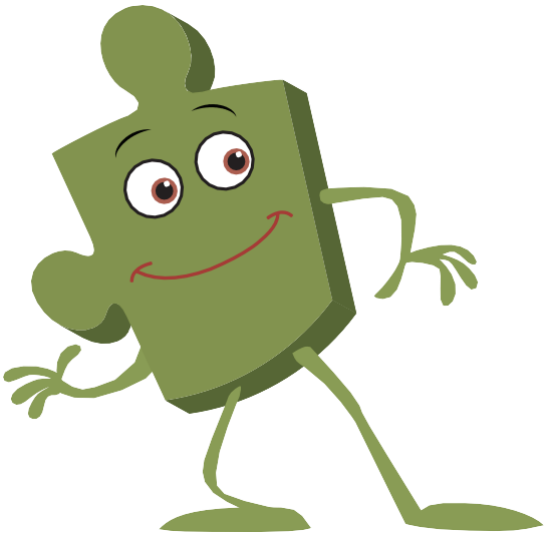




Appendix 6

Puzzle 6: Changing Me - Ages Ages 9-10 - Piece 4

Conception	
Puzzle 6 Outcome **Tree of Change Display**	**Please teach me to…** understand that sexual intercourse can lead to conception and that is how babies are usually made understand that sometimes people need IVF to help them have a baby appreciate how amazing it is that human bodies can reproduce in these ways
Resources Relationships Cards Jigsaw Chime 'Calm Me' script Jigsaw Jez Jigsaw Jerrie Cat Animations: The Female Reproductive System and The Male Reproductive System Having A Baby Diamond 9 cards PowerPoint slides: A Baby in the Womb The Truth About Conception and Pregnancy card sort – statements, true/ false cards, explanation cards Jigsaw Journals My Jigsaw Journey Jigsaw Jez's post box	**Vocabulary** Relationships Conception Making love Sexual intercourse Fallopian tube Fertilisation Pregnancy Embryo Umbilical cord Contraception Fertility treatment (IVF)



Teaching and Learning	**Ask me this…**
Note Teachers may wish to take notes during this lesson as part of the summative assessment for this unit of work (Puzzle). Teachers should also consider allowing at least 1.5 hours (ideally more) for this lesson, due to its essential content, and to allow plenty of time for discussion. Teachers should also visit Jigsaw Jez's post box prior to the lesson so that any of the children's questions or concerns can be included. **The Jigsaw Charter** Share 'The Jigsaw Charter' with the children to reinforce how we work together.	

Connect us Shuffle the Relationships Cards and give one to each child - make clear that the card does not need to correspond to their own gender. Ask them to circulate, compare their card with others' and pair up with someone whose card makes a pair with their own. Point out that some have more than one possible match (e.g. mother/daughter or mother/ son) and some pairs will have the same word on both cards (e.g. best friend/best friend). You may want to note that 'Boyfriend' and 'Girlfriend', 'Father and 'Mother' are deliberately doubled up so that if any children want to, they can match up Boyfriend/Boyfriend or Girlfriend/Girlfriend, Mother/Mother or Father/Father, that relates to their own particular family experiences. (Remember that there could a variety of reasons for having two mums or two dads and we should not assume this is always about sexuality. e.g. parents who have separated and have new partners; children with adopted parents and birth parents. When all are paired up, allocate each corner of the room to a different category of relationship: Family Relationships, Peer Relationships (may need explaining), Working Relationships and Relationships with Physical Attraction. Ask the pairs to go and stand in the corner that best fits the kind of relationship on their cards. Draw attention to the variety of different kinds of relationship that make up our lives, and to the fact that all these relationships can vary also in terms of how good or bad, happy or unhappy they are.	What are the different kinds of relationships we have with the people around us?
Open my mind With the children in small groups, explain that we are going to focus on relationships that involve physical attraction. Point out that often these relationships become very close and loving, and people may choose to be in a 'couple'. Some of these couples may decide they want to make a life together, may get married, and may decide to start a new family, but not all. These are all personal choices. Give each group a set of the Having a Baby Diamond 9 cards. Give them the sentence stem 'Before someone decides to have a baby, they should…', and ask them to set out the 9 cards in a diamond shape placing them in order of priority so that what they think is the most important consideration is at the top, working down to those they think are least important or irrelevant. Allow time to complete this and then compare notes around the class, asking the groups to explain and justify their priorities, and emphasising what a big, life-changing step it is to take responsibility for bringing a new life into the world. The exercise may prompt discussion of various significant issues such as whether teenagers can be good parents, whether some pregnancies are unplanned, whether people with disabilities should have a family, whether parents need to be married, how a single parent can bring up a child, whether it is right for same sex couples to bring up children, people in arranged marriages, adoption etc. Allow children to express their views: where necessary, challenge: ask them to explain, or put forward, an alternative view - but always be aware of factors in the children's own backgrounds and quickly challenge any tendency to stigmatise or condemn. Summarise that there are many different types of relationships in the adult world. The care and responsibility for any baby/child that results from a relationship should be paramount whatever the circumstances.	What are the important things a couple should consider before deciding to have a baby? Does everyone agree on what the right circumstances are for bringing up a child?

Tell me or show me Slide 2-6: Introduce the word 'Conception' - the moment when a new life begins. Re-show the animations: The Female Reproductive System and The Male Reproductive System to recap on the physical facts of how this happens and also to illustrate how the wonder of a new life grows out of the closest and most loving and private part of the couple's own relationship, sexual intercourse. Allow time for the children to ask questions, discuss and clarify any points they wish. You may wish to revisit Jigsaw Jez's Private post box at this point if further questions or concerns have been raised. Show the PowerPoint slides of a baby in the womb to recap. We want all children to feel valued and included so we cannot make a judgement about one form of conception over another, and there is a possibility that some children in the class know they were not conceived in the 'usual' way. The essence of this lesson is that children understand the biology and feel included no matter how they were conceived. Whilst sexual intercourse is the way the sperm fertilises the egg in many cases, there are occasions when this might not be possible e.g. medical reasons or same-gender relationships. So, ask the children if all babies are conceived in this way? Teachers can explain as much as they discern to be appropriate according to the nature of the children's response to this question and the age and stage of the cohort of children. It is perfectly acceptable to say that when sexual intercourse isn't possible to conceive a baby, doctors can help people to have a baby perhaps through egg donation, artificial insemination, surrogacy, or IVF. Or people can choose to adopt. At this age it is important to clarify in simple terms what they may have already heard about these subjects without burdening them with too much detail. Awareness of the existence of these things is what matters and the chance to correct any misunderstandings they have. Ensuring all children feel included is paramount.	How is a new baby made, and how does this grow out of the parents' love for each other?
Let me learn Step 1) With the children grouped in the same working groups as before, use the card sort activity 'The Truth About Conception and Pregnancy' to consolidate and develop their understanding. First, give each group a set of the statement cards and the True and False cards: ask them to discuss each statement and identify it as true or false according to their understanding. Step 2) Then hand out the cards with the detailed explanations and ask them to match these to the statements they refer to; use them to check whether they correctly identified the true and false statements. Review and discuss the results of the activity with the whole class. It will raise a number of issues that may not have come up before, including important topics such as contraception and the availability of fertility treatments. As always, remind them of Jez's post box for the questions they're still not sure about, or that may occur to them later.	What else do you need to know about how a baby is formed and starts to grow in the womb? Can people make love and not have a baby? What happens if a couple wants a baby but find they can't have one?
Help me reflect Slide 7: As in prior Pieces (lessons) invite the children to reflect on their learning using the My Jigsaw Journey resource.	

Changing Me

Relationships Cards - Ages 9-10 - Piece 4

Mother	Daughter
Father	Son
Aunt	Nephew
Uncle	Niece
Brother	Sister
Boyfriend	Girlfriend
Boyfriend	Girlfriend
Best Friend	Best Friend
Classmate	Classmate
Mother	Team Mate
Father	Team Mate

Be in a settled, loving relationship

Have plenty of money

Be married to each other

Be over 20 years old

Be ready to put the baby's needs before their own

Be fit and healthy

Both agree on the right way to bring up a child

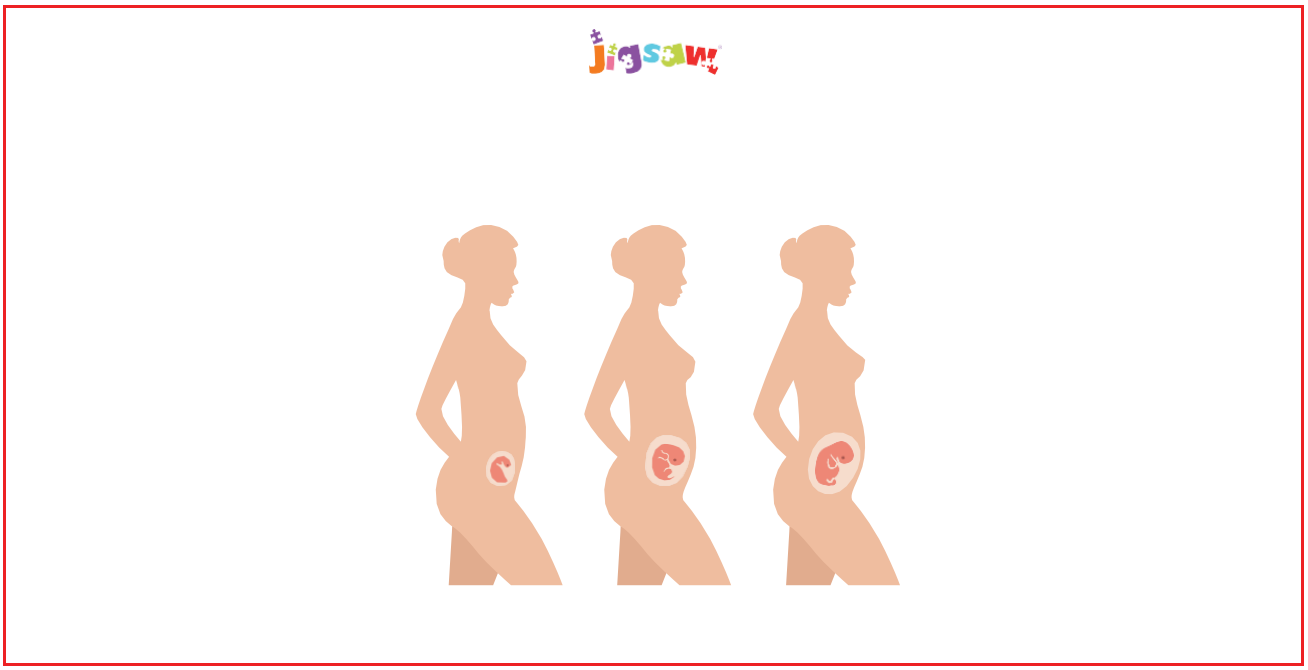
Have a house to live in

Be prepared for one of them to stay at home and look after the baby

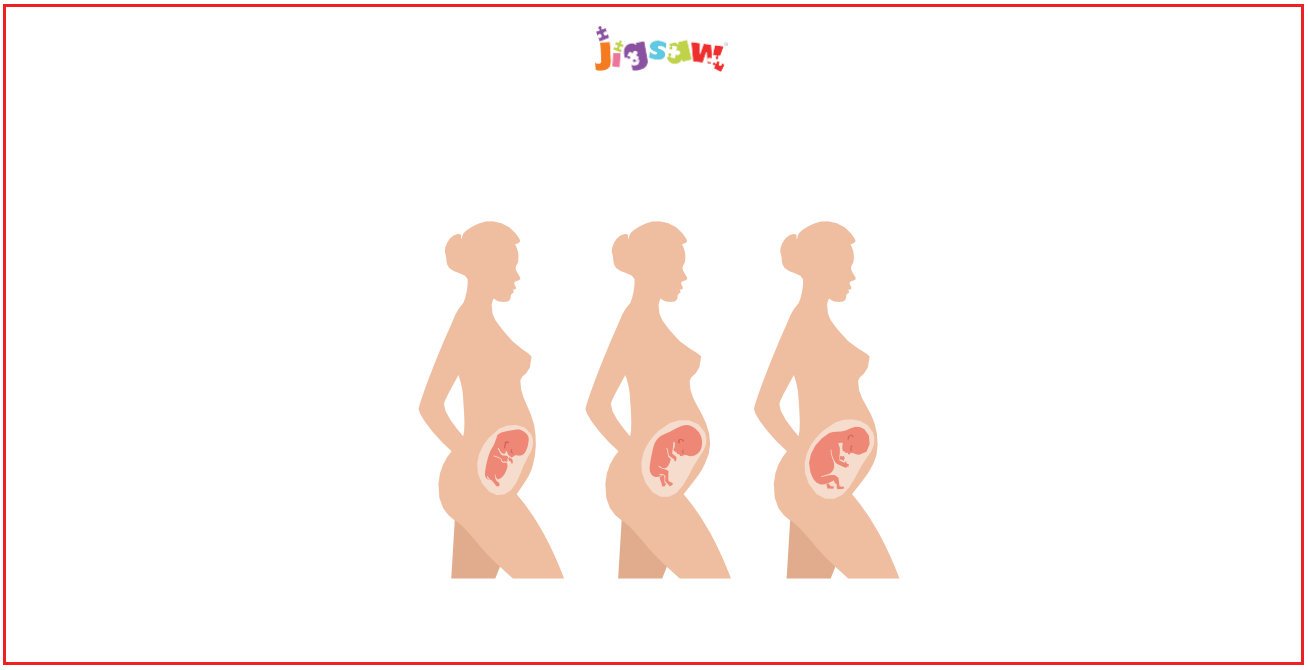
Changing Me

A Baby in the Womb PowerPoint Slides 2-3 - Ages 9-10 - Piece 4

Slide 2



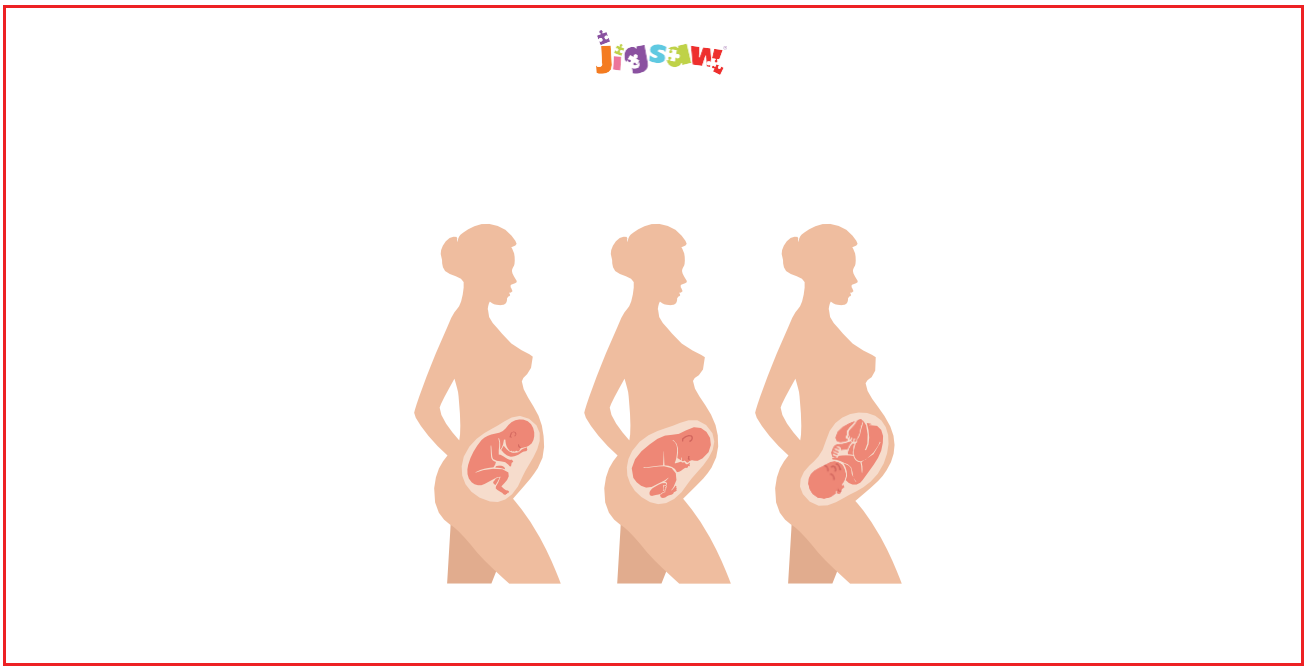
Slide 3



Changing Me

A Baby in the Womb PowerPoint Slides 2-3 - Ages 9-10 - Piece 4

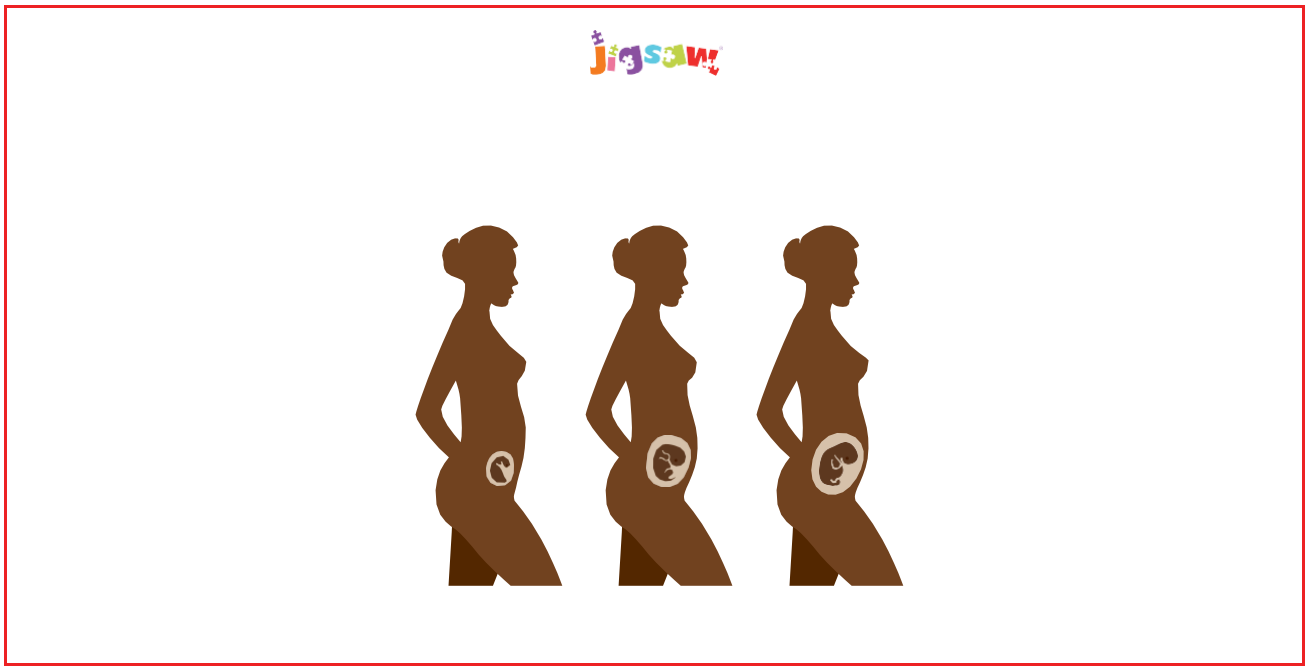
Slide 4



Changing Me

A Baby in the Womb PowerPoint Slides 2-3 - Ages 9-10 - Piece 4

Slide 2



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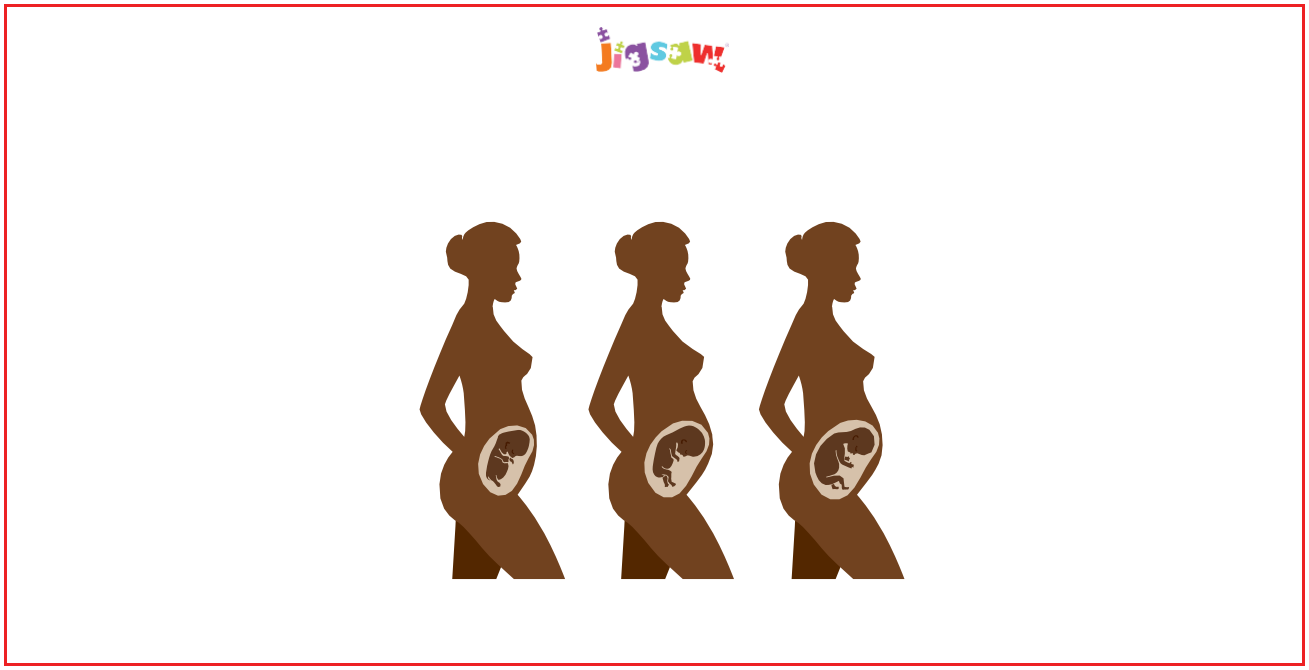
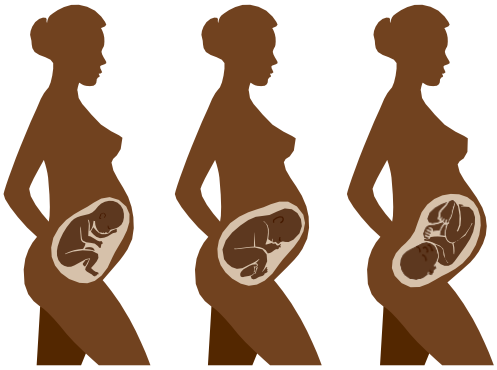


Changing Me

A Baby in the Womb PowerPoint Slides 2-3 - Ages 9-10 - Piece 4

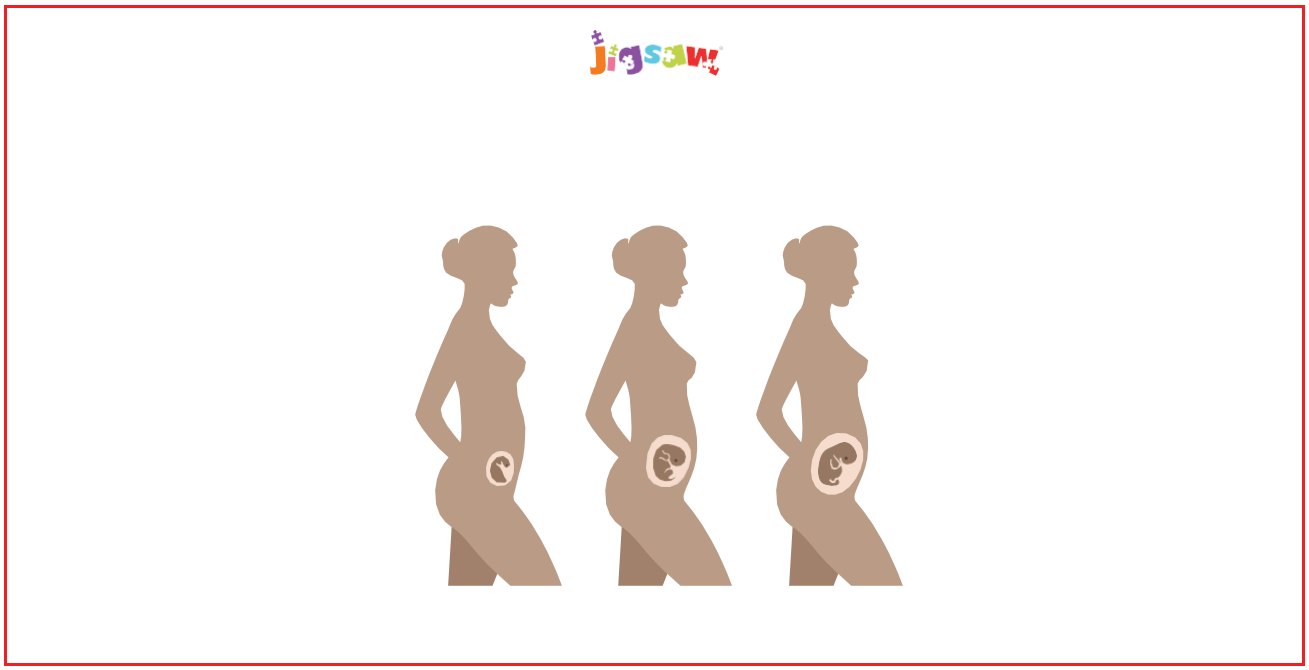
Slide 4



Changing Me

A Baby in the Womb PowerPoint Slides 2-3 - Ages 9-10 - Piece 4

Slide 2



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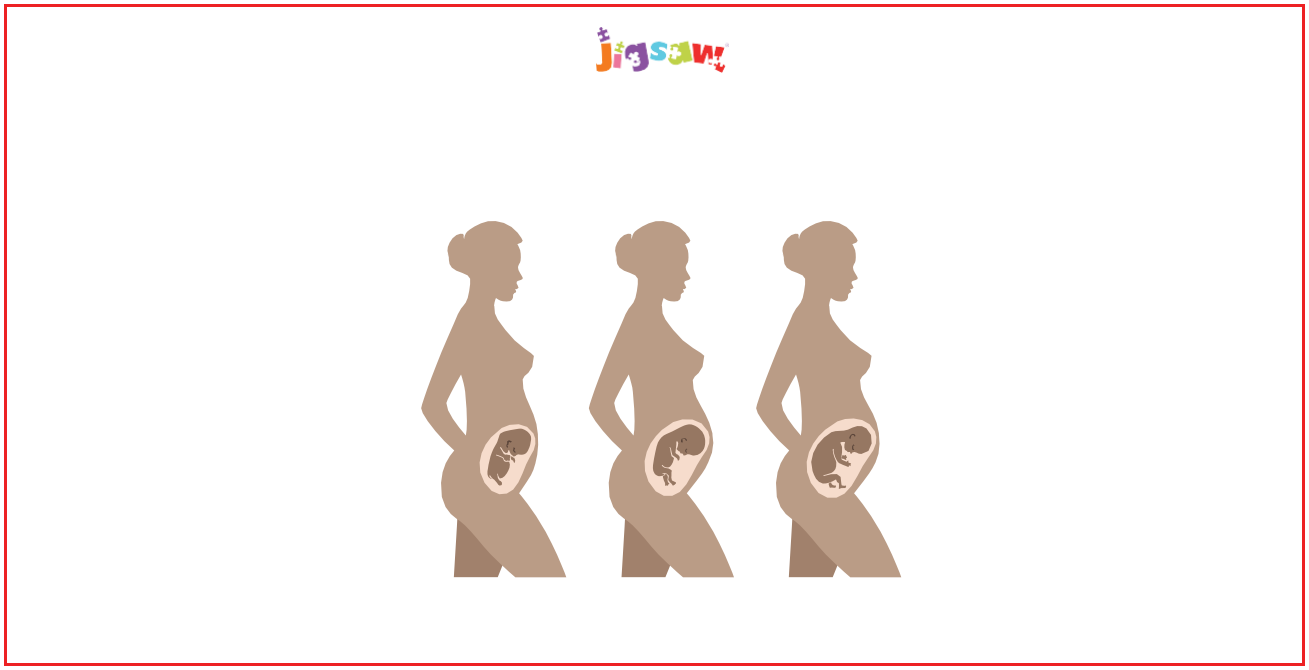
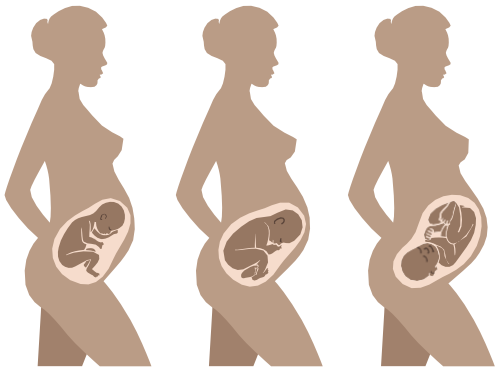


Changing Me

A Baby in the Womb PowerPoint Slides 2-3 - Ages 9-10 - Piece 4

Slide 4



Changing Me

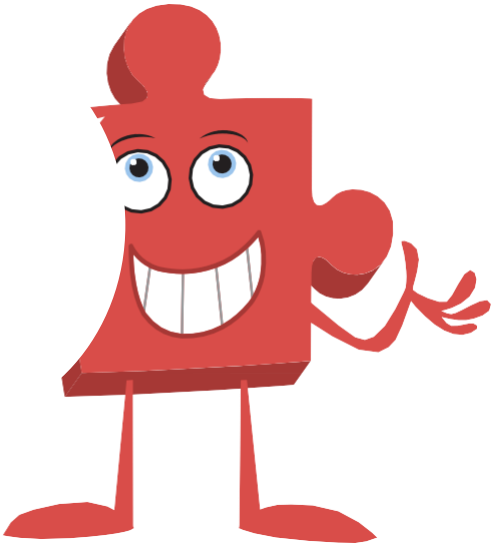
The Truth About Conception and Pregnancy - Ages 9-10 - Piece 4

If a couple makes love, it doesn't necessarily mean they will have a baby.	True	If people want to make love but not start a baby they can use various forms of contraception to stop the sperm and the egg meeting. Also, there are many days each month when there is no egg in the fallopian tube for the sperm to fertilise, and even when fertilised the egg might not successfully implant itself in the womb.
Fertilisation happens when the sperm meet the egg in the vagina.	False	Fertilisation normally happens in the fallopian tube, which carries the egg from the ovary towards the womb. If the egg is not fertilised when it reaches the womb it dies and passes out through the vagina, along with the extra womb lining that is not needed.
One of the first signs to tell a woman she is pregnant is that her periods stop.	True	The extra womb lining needs to stay in place as the embryo (the tiny growing baby) is implanted in it, so a woman does not have periods when she is pregnant. She may notice other changes, like starting to feel a bit sick at certain times of day. A doctor can test her urine to show whether she is pregnant, or she can buy a kit to do this for herself at home.
If two sperm fertilise one egg, it will form identical twins.	False	Only one sperm can fertilise an egg, then the egg seals itself to keep other sperm out. Identical twins are formed when one fertilised egg splits into two completely separate cells and each one grows into a baby - they are identical because they come from the same sperm and the same egg. If there are two eggs and each is fertilised by a different sperm they will form non-identical twins.
The baby is attached in the womb by a cord through which it gets oxygen and food from the mother.	True	A baby in the womb can't eat or breathe in the way we do, so the umbilical cord lets it collect the oxygen and nutrients that it needs from the mother's blood - so she is eating and breathing for the baby as well. Your belly button is where the cord was attached to you when you were in your mother's womb.
A woman can't have a baby unless she has sexual intercourse with a man.	False	If there are medical reasons that prevent a couple from having a baby in the usual way, there are things that doctors nowadays can do to help. Sperm can be artificially placed in the woman's vagina, or an egg can be taken and fertilised with sperm outside the body and then implanted in the womb. This is called IVF.

Appendix 7

Puzzle 6: Changing Me - Ages 10-11 - Piece 3

Babies: Conception to Birth	
Puzzle 6 Outcome **Tree of Change Display**	**Please teach me to…** describe how a baby develops from conception through the nine months of pregnancy, and how it is born recognise how I feel when I reflect on the development and birth of a baby
Resources Tennis ball Jigsaw Chime 'Calm Me' script Jigsaw Jem Jigsaw Jerrie Cat PowerPoint slides of a baby developing in the womb A set of 'Baby Can…' cards, cut up and shuffled Animations: Female and Male Reproductive Systems From Conception to Birth resource sheet Conception to Birth card sort template Jigsaw Journals My Jigsaw Journey	**Vocabulary** Pregnancy Embryo Foetus Placenta Umbilical cord Labour Contractions Cervix Midwife



Teaching and Learning	Ask me this…
Note Teachers should plan for this lesson to run for 2 hours, or be split into two 1 hour sessions (suggested split at Let me learn). Teachers may also wish to take notes during the lesson as part of the summative assessment for this Puzzle (unit of work).	
The Jigsaw Charter Share 'The Jigsaw Charter' with the children to reinforce how we work together.	
Connect us With the class standing in a circle, use a tennis ball or similar to do a class round: start it off by saying, 'The first thing I can remember in my life is…', then bounce the ball across to someone else - when they catch it they use the same sentence stem to give their earliest memory, then bounce the ball on to another class member and so on until everybody has had a turn.	What is your earliest memory?

Open my mind Slides 1-5: Point out that we are all limited in how far back our memories go, and what none of us can remember are the experiences we had before we were born. Show the PowerPoint slides of a baby developing in the womb. (If you ask them in advance, some children might be able to bring their own baby scan pictures from home.) Ask the children what parts of the body they can identify in these pictures of the tiny, growing baby (you may want to introduce the word 'foetus' at this stage). Invite the children to consider what it must have been like for all of us when we were tiny and curled up in the womb like that. Take this further by playing the 'Baby Can…' game: with the class seated in a circle, hand out the 'Baby Can…' cards, one to each child, telling them to make sure that only they see what is on their card. There are 30 cards in all: if your class size is greater than that, ask one or two of them to work as pairs. In turn round the circle, each child reads out the statement on their card, 'When I was a baby in the womb I could…' and the rest of the class say whether they think this is true or not (perhaps by a show of hands or standing up for true and sitting for false). The holder of the card then reveals whether it is true or false - some are obvious, some are less so and may surprise them or catch them out: in those cases there is a brief explanation printed on the card, which should also be read out by way of clarification	Can you recognise a baby in the photo of a scan, and identify the different parts of its body? Can you imagine what it was like, being in the womb? Do you know what a baby in the womb can and can't do?
Tell me or show me For a more systematic introduction to the main facts of the progression from conception through pregnancy to birth, use either or a combination of the following approaches: • Animations: Male/Female Reproductive Systems • You may be able to invite either a mother of a small baby, or a midwife, to come in and talk and answer the children's questions about the experiences of pregnancy and birth • The resource sheet 'From Conception to Birth' gives a step by step account of the process, with the children (perhaps working in pairs) using a word bank to fill in key words. This exercise may be a useful way of consolidating the learning gained from either of the other approaches.	What are the stages by which a baby grows and develops through pregnancy? How is a baby born?

Let me learn

Part 1) Working individually or in pairs, let the children design and produce a set of cards for a card-sorting game, using pictures and text to present eight stages (or fewer if you prefer) on the journey from conception to birth. The Conception to Birth Card Sort template provides a model for this activity, with pictures provided for the first and last stages.

If time allows, the children could cut up their sets of cards and exchange them, to see how quickly they can sort each other's cards into the correct order.

Part 2) In a class circle ask the children to supply a word of their own to describe how they imagine the parent/s might be feeling when the birth is over. Use the opportunity to draw out and discuss the idea that there is likely to be a mixture of feelings: 'thrilled' and 'happy' will go alongside 'exhausted' and 'sore', 'proud' and 'loving' towards the new child may be competing with 'nervous' and 'anxious' about the new responsibilities. Ask them to consider also how the father may be feeling!

Part 3) Once these ideas have been aired in discussion, ask the children to write in their Jigsaw Journals, under the heading 'New Life', the thoughts and feelings they have now about the whole process by which a new life starts, and how they think they themselves may be affected by it in years to come. Remind them again that mixed feelings are very natural: it can seem amazing and miraculous, but can also seem overwhelming and a bit scary – and yet it is one of the most common and basic of all human experiences, one which we share with our earliest ancestors and with all our fellow humans in every part of the globe.

Help me reflect

Slide 7: As in prior Pieces (lessons) invite the children to reflect on their learning using the My Jigsaw Journey resource.

Can you imagine how a new born baby's parents must feel when the birth is over?

What are your own thoughts and feelings about the process by which a new life is formed?

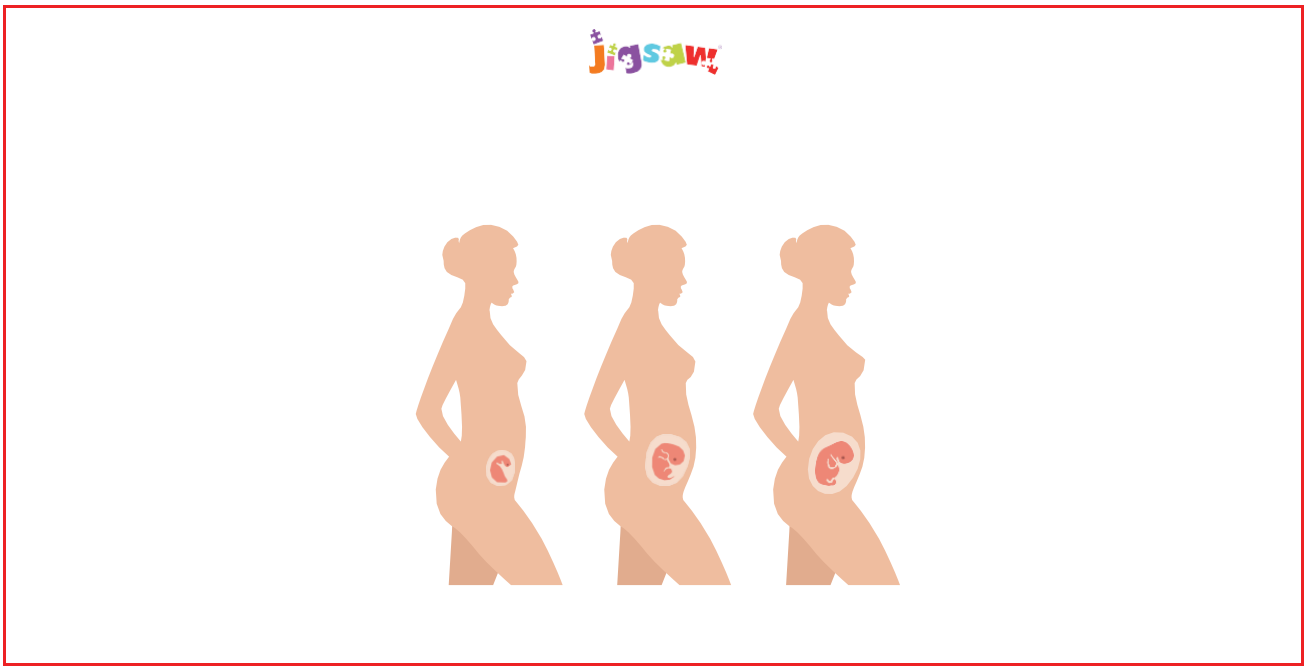
How might this affect you and your life in the future?

Notes

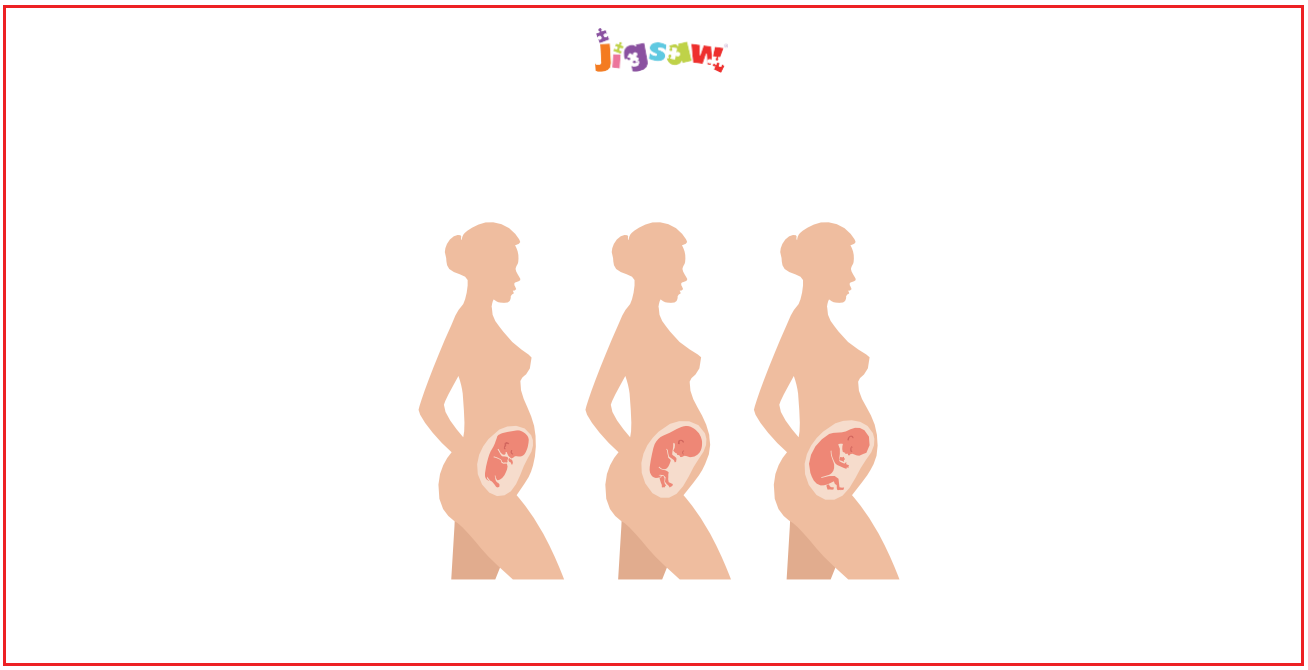
Changing Me

Baby Developing in the Womb PowerPoint Slides 1-3 - Ages 10-11 - Piece 3

Slide 1



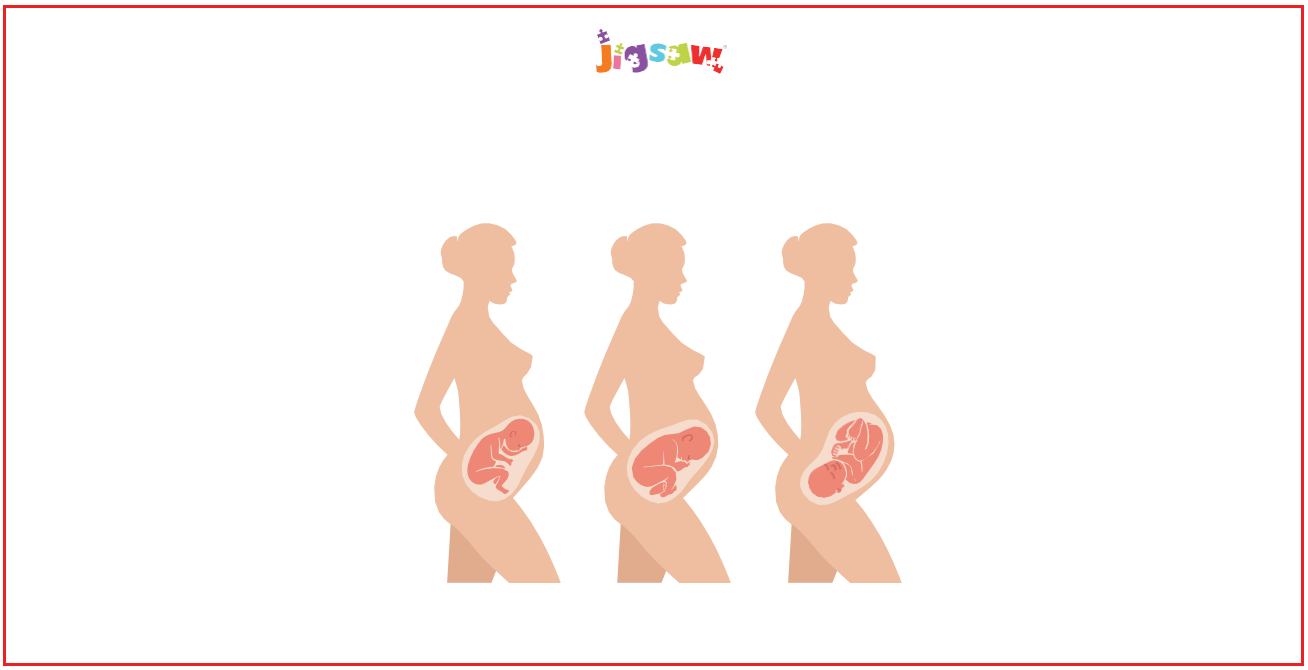
Slide 2



Changing Me

Baby Developing in the Womb PowerPoint Slides 1-3 - Ages 10-11 - Piece 3

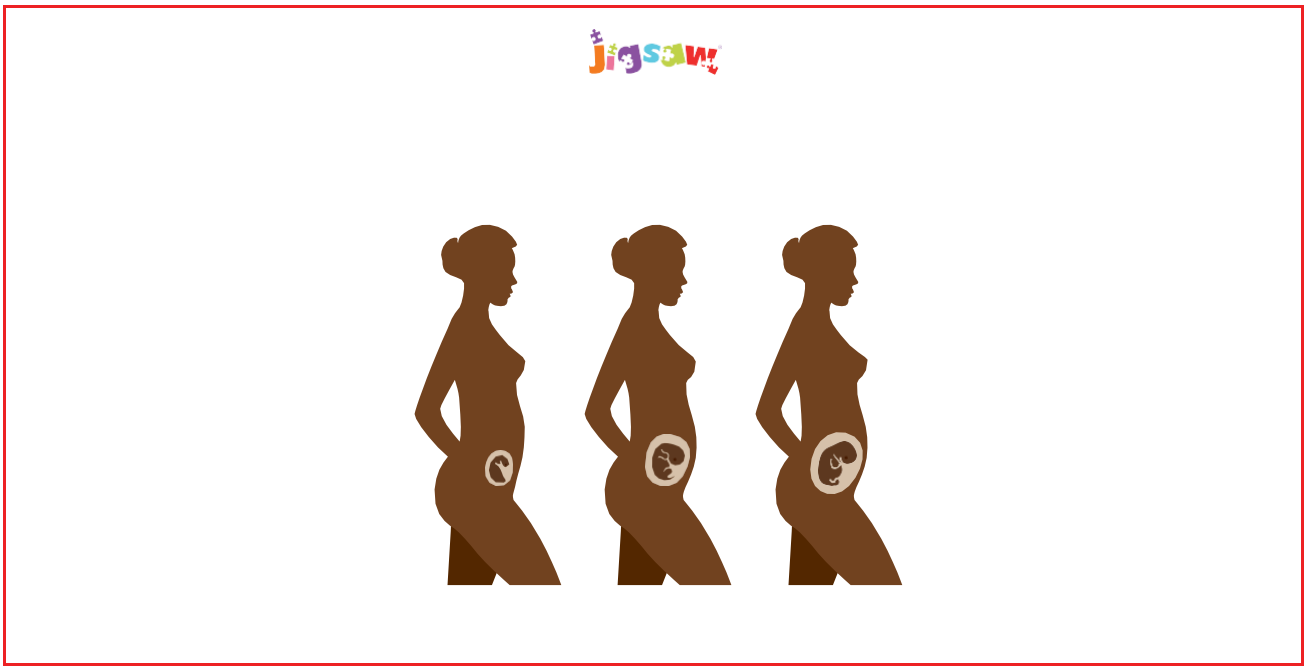
Slide 3



Changing Me

Baby Developing in the Womb PowerPoint Slides 1-3 - Ages 10-11 - Piece 3

Slide 1



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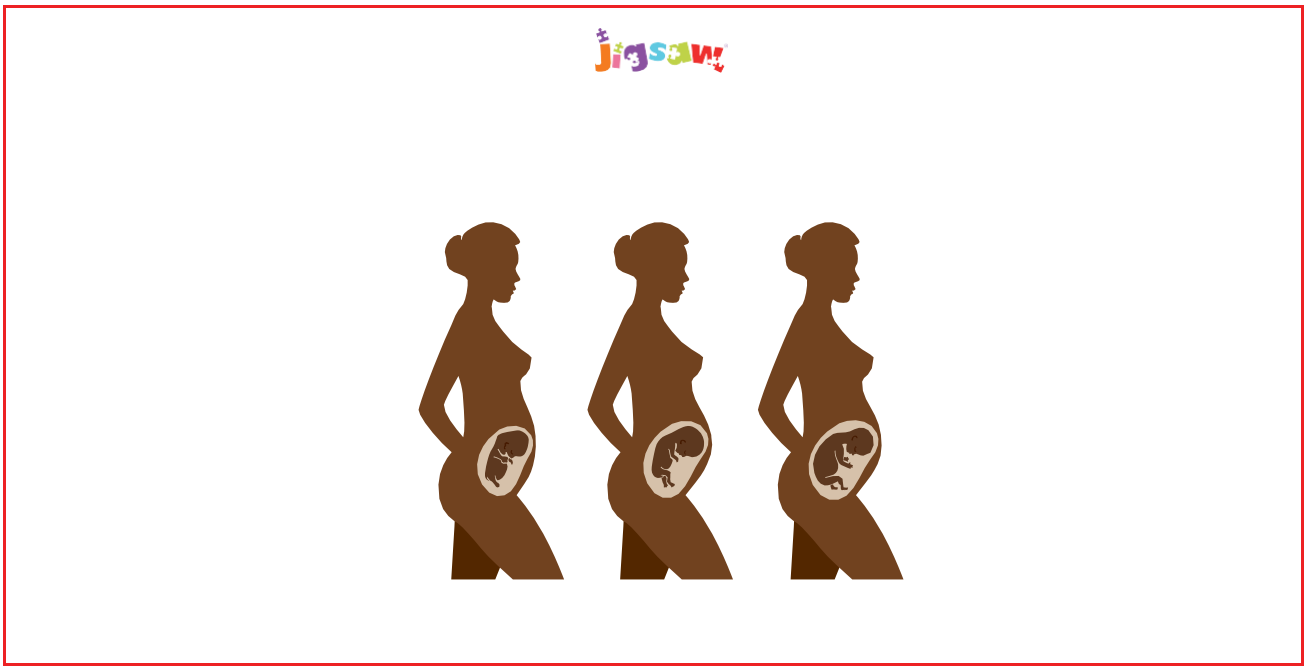
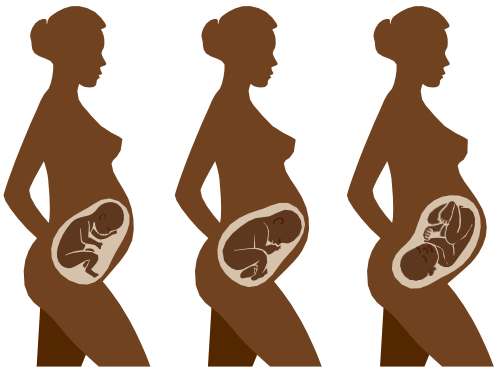


Changing Me

Baby Developing in the Womb PowerPoint Slides 1-3 - Ages 10-11 - Piece 3

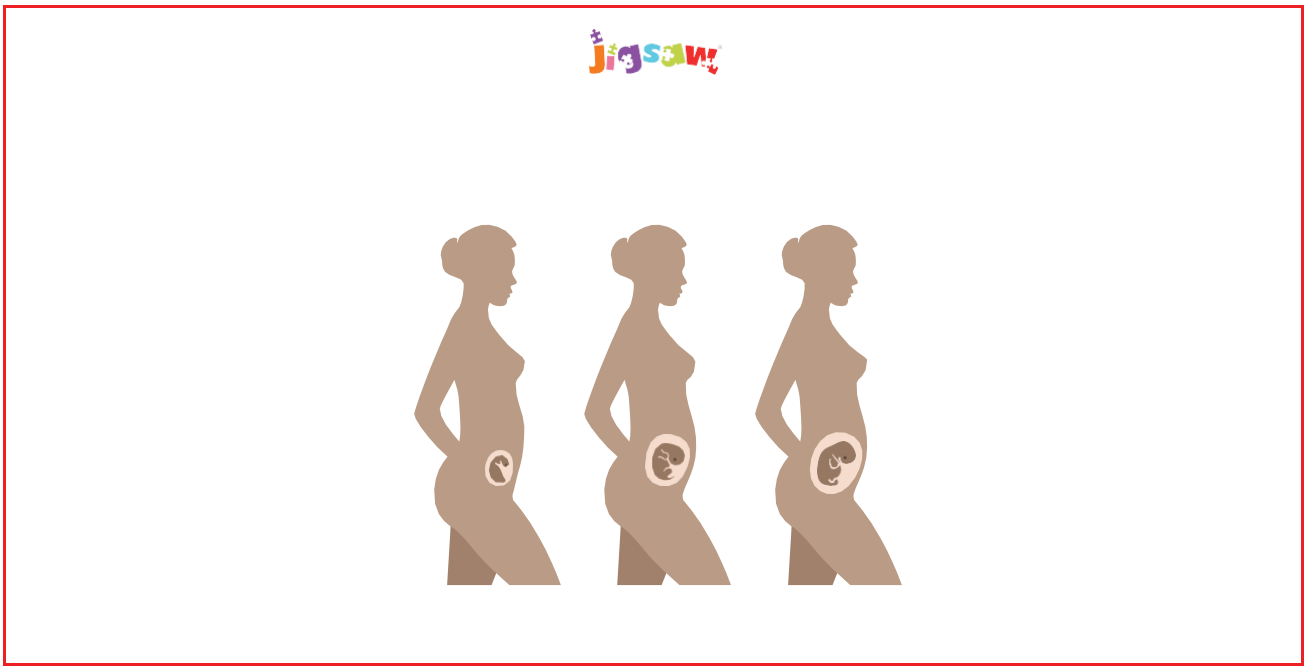
Slide 3



Changing Me

Baby Developing in the Womb PowerPoint Slides 1-3 - Ages 10-11 - Piece 3

Slide 1



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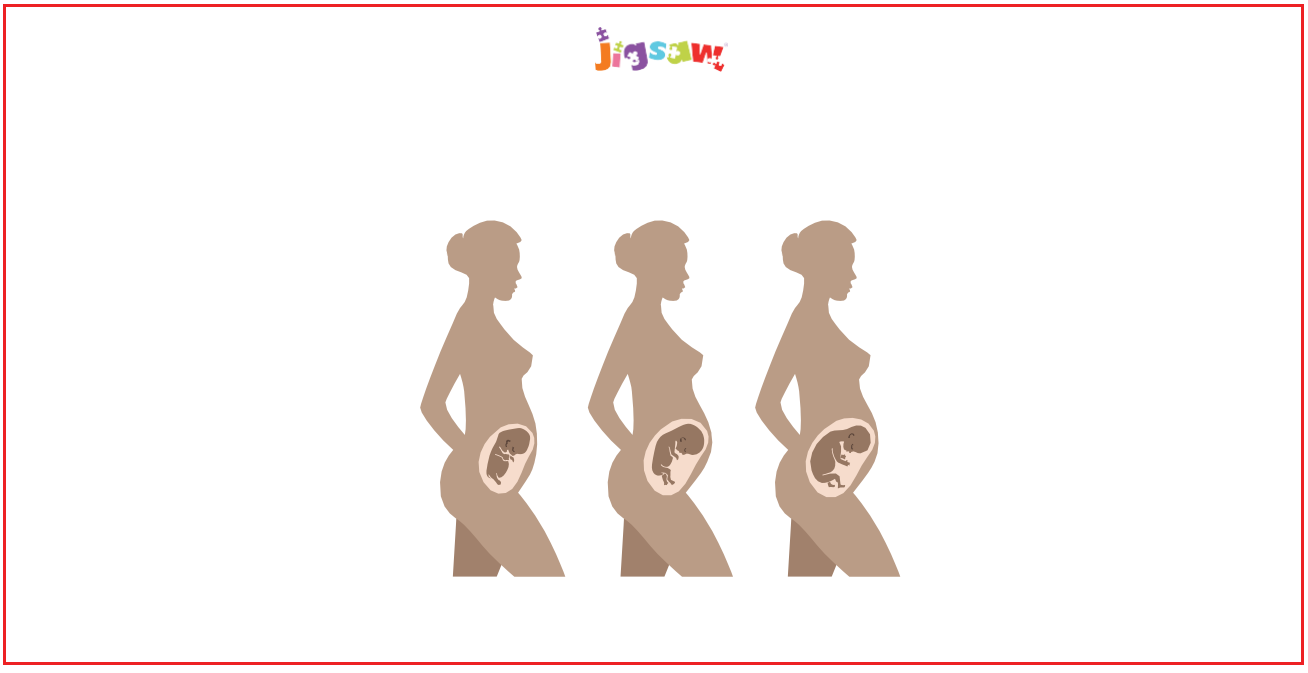
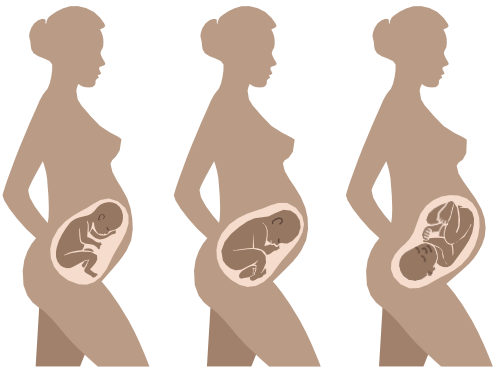


Changing Me

Baby Developing in the Womb PowerPoint Slides 1-3 - Ages 10-11 - Piece 3

Slide 3



Changing Me

'Baby Can...' Cards - Ages 10-11 - Piece 3

When I was a baby in the womb I could wave my hands about **TRUE**	When I was a baby in the womb I could smile and laugh **FALSE**
When I was a baby in the womb I could kick my feet **TRUE**	When I was a baby in the womb I could breathe **FALSE**
When I was a baby in the womb I could suck my thumb **TRUE**	When I was a baby in the womb I could make gurgling noises **FALSE**
When I was a baby in the womb I could get hiccups **TRUE**	When I was a baby in the womb I could cry **FALSE**
When I was a baby in the womb I could wriggle around **TRUE**	When I was a baby in the womb I could pick my nose **FALSE**

Changing Me

'Baby Can...' Cards - Ages 10-11 - Piece 3

When I was a baby in the womb I could go to sleep and wake up

TRUE

When I was a baby in the womb I could bite my nails

FALSE

When I was a baby in the womb I could have a drink

TRUE

(You would swallow some of the fluid you were floating in)

When I was a baby in the womb I could swallow food

FALSE

When I was a baby in the womb I could stand on my head

TRUE

(You were probably head down when you were ready to be born)

When I was a baby in the womb I could watch TV

FALSE

When I was a baby in the womb I could float underwater

TRUE

(You were floating in a bag of fluid)

When I was a baby in the womb I could play games

FALSE

When I was a baby in the womb I could listen to my Mum talking

TRUE

(You could hear her voice - although you couldn't understand it)

When I was a baby in the womb I could sing

FALSE

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'Baby Can...' Cards - Ages 10-11 - Piece 3

When I was a baby in the womb I could hear my Mum's tummy rumble

TRUE

When I was a baby in the womb I could smell the flowers

FALSE

When I was a baby in the womb I could take in food

TRUE

(But you got nutrients through the cord, not by eating anything)

When I was a baby in the womb I could count on my fingers

FALSE

When I was a baby in the womb I could listen to music

TRUE

(You could hear sounds from outside)

When I was a baby in the womb I could read a picture book

FALSE

When I was a baby in the womb I could open my eyes

TRUE

When I was a baby in the womb I could tell whether it was light or dark outside

FALSE

When I was a baby in the womb I could have a wee

TRUE

(The fluid would pass through you and back out again!)

When I was a baby in the womb I could blow bubbles

FALSE

Changing Me

From Conception to Birth - Ages 10-11 - Piece 3

Find the right words in the box below to fill in the gaps in the story

1. Life begins when a sperm joins with an egg in the fallopian tube and _____ it so that it starts to grow into a baby.

2. The fertilised egg starts to divide from one cell to two, then four, then eight and so on, and the growing cluster of cells travels down the tube towards the mother's _____.

3. The ball of cells settles into the soft lining of the womb, which has thickened with an extra supply of _____ to provide oxygen and food for the baby.

4. As the cells continue to divide some of them form into the tiny beginnings of the baby, and some form a fleshy plate called the _____ which attaches the baby to the wall of the womb.

5. The placenta collects oxygen and food from the mother's blood and passes them to the growing baby through the _____.

6. After a month the baby is about the size of a grain of rice; while it is very tiny the baby is called an _____.

7. For the first 12 weeks the baby grows slowly but it gradually forms all its body parts: after only 6 weeks it already has a tiny _____ which is beating.

8. While it grows the baby is kept safe and protected from bumps and knocks by floating in a bag of _____.

9. After 12 weeks the baby is fully formed and has all its essential _____ but it is still very small, about the length of your thumb.

10. After 6 months the baby is growing fast, it has begun to grow eyelashes and _____ on its head, and its mother can feel it sometimes moving and kicking.

11. In the final months of _____ the baby fattens up, has periods of waking and sleeping and can hear and react to sounds from the outside.

12. By the eighth and ninth months the baby is probably big enough to be able to survive if it was born early, and the mother has a very large, heavy _____ to carry around.

13. In the ninth month the baby is getting quite squashed and doesn't have much room to move: it settles with its _____ down ready to be born.

14. Birth begins when muscles in the womb start to press down on the baby in a series of powerful pushes called _____.

15. Over a period of several hours these contractions get stronger and more frequent, pushing the baby's head against the entrance from the womb to the vagina, which is called the _____, and gradually opening it up.

16. When the cervix is fully open the baby starts to move head first down through the vagina: this is known as the second stage of _____.

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From Conception to Birth - Ages 10-11 - Piece 3

17. Now the mother can use muscles that she can control to help the contractions and push the baby down and out of the _____ : it's very hard work and a big strain for the mother and the baby.

18. Finally the baby's head is born – this is the largest part and the rest of the body quickly follows: the mother is normally helped through all of this by a specially trained nurse called a _____ .

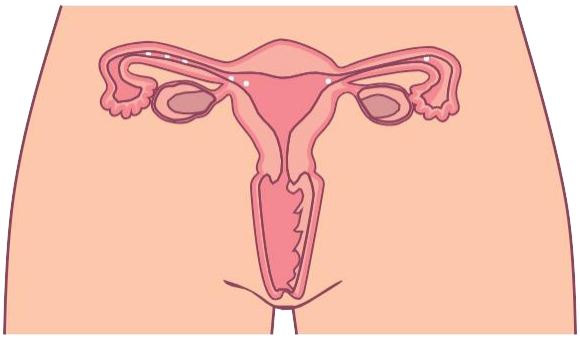
19. The baby is still attached to its mother by the cord, but once it starts breathing for itself (and crying!) the cord can be clamped and cut – the remains of it will eventually shrivel to form the baby's _____ _____.

20. The other end of the cord is connected to the placenta, and a few more contractions help the mother to push this out; now a new, independent life has begun and mother and baby can relax and start getting to know each other. Can you add one more word to describe how you think the mother might be feeling at this stage? _____

head	**body parts**	**umbillical cord**		**vaginal opening**	
fertilises	**labour**	**belly**	**fluid**	**placenta**	**midwife**
contractions		**hair**	**embryo**	**womb**	**belly button**
cervix	**pregnancy**	**heart**	**blood**		

Changing Me

Conception to Birth Card Sort Template - Ages 10-11 - Piece 3



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Changing Me

Conception to Birth Card Sort Template - Ages 10-11 - Piece 3

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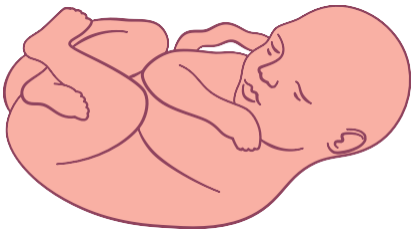

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