Human Relations Education In Australian Schools:
A Review of Policies and Practices

Ilene Wolcott
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The Australian Institute of Family Studies is a Commonwealth Statutory Authority established under the Family Law Act 1975. The Institute, which began operations in February 1980, is a research and information dissemination organisation charged with conducting, encouraging and coordinating research into factors affecting marital and family stability in Australia. A major focus of its research program is the impact of public policies on the well-being of families.

The Policy Background Paper series is aimed at raising the level of public debate about policy areas affecting families in Australia. At times they will be commissioned papers written by leading experts in each field; at others, they will be papers developed within the Institute in an effort to identify areas in need of further research and action.

The Institute hopes the Policy Background Paper series will contribute to better understanding of the importance of a 'family perspective' in the development of policy. Papers in the series describe current arrangements in Australia, examine issues that arise as a result of their operation and canvass alternative policy options. These discussions of important policy areas do not necessarily advocate any one particular set of policy prescriptions. They are presented as contributions to informed debate and as reference points for those who wish either to contribute to or simply observe and understand the process of developing family policies.

Titles in the Policy Background Paper series are:
No. 1 Services to families: with many a slip
No. 2 Towards a national child care policy
No. 3 Marriage counselling services: priorities and policy
No. 4 Children in stepfamilies: their legal and family status
No. 5 Should families be a focus for policies?
No. 6 Human relations education in Australian Schools: a review of policies and practices

Copies of the above papers are available from the Distribution Officer, Australian Institute of Family Studies, 300 Queen Street, Melbourne 3000 Victoria, Australia. Telephone (03) 608 6888.
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Table 1  Subject areas in which selected Human Relations topics may be taught in State and Territory schools
2  Summary of the status of Human Relations Education in State schools
3  Grade levels at which selected Human Relations topics may be taught in State and Territory schools
The Australian Institute of Family Studies' charter is to research and publicly explain 'factors affecting marital and family stability'. We have done much to document how demographic trends, economic forces and legal-political structures affect family life. But we have also paid much attention to shifts in values and the ways in which conflicting attitudes contribute to structural change. Indeed, we would contend that much of the turmoil evident in Australian family life results from the reciprocal impact of new values and new circumstances. People have to make sense of what is happening around them and when old values no longer make sense they seek new meanings and insist on changes in the rules and structures that govern social life. The wrench from the old ways to the new can be socially disruptive and personally confusing.

For children, that struggle to understand is the very essence of growing up. Their ability to make sense of life and therefore to be in relative control of their environment depends upon the quality of interpretation available from others whose opinions matter to them. Obviously parents are the most 'significant others' for children; parents' 'readings' about right and wrong, about their family's place in the world, about their children's rights and responsibilities have the power to stick.

But today's children are exposed to alternative significant others and the task of working out how an individual can or should relate to others is more complex. The mass media, teachers in schools, major political, sport and other cult figures, plus prolonged exposure to an adolescent peer culture suspended between childhood and adulthood, all act as potential rivals to parental values and authority.

Neil Postman in his book *The disappearance of childhood* (1982) argues that the invention of print enabled the separation of children from the adult world whose 'secrets' they had been able to observe at first hand. With print, adult life could be made secret and the key to unlocking it — reading — further separated children into schools and a lengthy, more artificial, apprenticeship to adult life. In contrast, Postman holds, the invention of radio and television shattered the barrier of innocence. Children are once
again exposed to all the foibles, hypocracies, 'secrets' of adult life — this time with a vengeance, because the mass media span not just age but also time, space and cultural barriers. Few families, few parents, can combat these influences by holding children in isolation from competing values.

While Postman's analysis is not wholly convincing, it serves to make a point in relation to the need for human relations education in schools. As Ilene Wolcott describes in her introduction, today's children live in a world very different from the one their parents grew up in. More permissive attitudes, combined with contraception, abortion, the motor car and money, make early sexual experimentation more likely. Longer schooling, higher youth unemployment, high interest rates and general economic uncertainty lead to delayed marriage and a prolonged period of intermittent dependence on parents, more casual partnering and, increasingly, long-term de facto relationships. With better education, equal opportunity legislation, a desire for financial independence and, often, the sheer necessity of a second income, women are no longer in the same relationship to men as they were in the 'breadwinner-housewife' era of the post-War decades. The power balance inevitably shifts and new ways of thinking and behaving must be worked out.

Children themselves more frequently face the challenge of their parents' divorce, a new parent (whether de facto or step) and new family constellations that can generate conflict and confusion. Their own image of adulthood, of the desirability of marriage or having children, of commitment and responsibility must be affected in some way and the Institute's research on young people in Australia confirms this.

It is for these reasons that the Institute feels it is important to examine the state of human relations education in schools. We do not feel it is possible for parents alone to teach their children about human relationships. Nor has it ever been possible, since wider social forces and (usually) specific 'elders', 'wise persons', 'mentors', 'tutors', 'priests' and 'teachers' played some role in teaching the young what was expected of them in society and in their relationships to others.

The dilemma is, of course, that little consensus exists on what 'should' be taught. In an era of pluralism, the best we seem to be able to do is to offer 'values clarification' or exposure to alternatives so that individuals are 'free to choose'. This is not the place to examine such issues in detail, but it can be said that even in a pluralistic society, with 'only the self as moral guide' (Bellah, 1985, p.76), we must learn to relate to others in ways that are both personally satisfying and not socially destructive.

So human relations education becomes more, not less, important precisely because we must learn to relate to others who do not share our values or world-view and because our relationships are mediated by ever more complex structures of work and family life.

That is why the Institute adopted a broader definition of human relations education than the usual one of 'sex-education' or merely one-to-one interpersonal relationships. When the Institute undertook this review of human relations education, it was with the explicit aim of discovering to what extent
schools in the various States of Australia saw their role in this area within the context of wider social change.

The 1977 Royal Commission on Human Relationships called for schools to adopt a broad definition, covering not just 'sex information' but an 'integrated program covering related social and psychological matters'. The Commission saw this as leading to 'a community more open and tolerant in outlook', with men and women better able to understand 'their respective roles and responsibilities'. But the focus was on sexual relationships and the Report was badly treated by politicians and the media alike. Perhaps because of its attention to controversial sexual behaviour, but also because some school systems and teachers handled the introduction of such matters poorly, 'human relations education' suffered from a good deal of misrepresentation. As Ilene Wolcott’s report demonstrates, where the wider 'human relations’ aspects were included and where 'sex education’ was explained carefully to parents, problems did not arise. Excellent programs and curriculum materials of a non-offensive kind are the rule. The new threat of AIDS as a sexually transmitted disease makes sex education even more essential, but it too raises questions of social relationships as well as specific sexual practices.

The Australian Institute of Family Studies does not make any firm recommendations in this matter. We believe the teaching of human relations to be important in the light of changing social circumstances and the inherent need for a tolerant community of competent people able to relate humanely to one another. But the detail of what should be taught, and how, must be negotiated within school communities.

Three things can be said nevertheless. First, we believe human relations education should not be solely, or even mainly, about sex. Second, it should not focus only on one-to-one relationships, though the ability to relate equally, to listen and communicate, to handle conflict in a constructive way are essential for a satisfying personal life. Third, and by implication from the first two points, it follows that human relations education should include close attention to group and wider community relationships, to how power and influence operate, to the moral obligations of family and work, to why and how people live, linked together in societies rather than as isolated individuals pursuing their own ends. Human relations education is, in the end, a social matter, not a personal one and we would like to see more careful thinking through by school systems of how society structures, limits or expands the human potential of its multi-related members.

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Director
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References


Introduction

The curriculum should promote understanding of human relationships and the relationship between parenting and work in our society. (Commonwealth Schools Commission, 1984)

In its research into factors affecting marital and family life in Australia, the Australian Institute of Family Studies has found that many people are not prepared for the realities, dilemmas and demands inherent in the formation and maintenance of intimate relationships. Confusion generated by profound shifts in community attitudes to and expectations of family, work and gender roles has been identified in these studies (Glezer, 1984; McDonald, 1984; Wolcott, 1984).

The role of the education system in assisting young people to acquire the skills related to achieving satisfying lives as individuals, marriage partners and parents in a changing social context, therefore, is relevant. There is a widely held view that knowledge and skills subsumed under the broad term 'human relations education', which includes not only sex education but also the wide aspects of personal development and social dynamics, will enhance the future quality of family life for young people.

Support for this viewpoint is echoed in the final report of the Royal Commission on Human Relationships (1977):

It is generally agreed that there is a real need in schools for broad and comprehensive human relationships education, giving sex information and an integrated program covering related social and psychological matters. The successful implementation of such programs could help in developing a community more open and tolerant in outlook, and better able to form meaningful relationships. As men and women grow in understanding of their respective roles and their responsibilities in relationships, the quality of marriage and family life could improve. (p.74)

Scope and Limitations of the Review

The purpose of this review is to examine the status and nature of human relations education in primary and secondary schools throughout Australia. The focus is on Commonwealth and State education policies and programs:
information obtained from the Catholic and Independent school systems is also included. Issues addressed within this framework include: the nature and function of Commonwealth and State guidelines, regulations and policy statements; rationales, aims and objectives of programs; structural characteristics of courses; prevalence of courses in schools; curriculum content, materials, resources; teacher education; parent and community involvement; evaluation of programs.

The paper examines some of the major issues surrounding the definition, theory, content and implementation of human relations education in school settings. The relevance of educational responses to the changing nature of marriage and family life is explored and comments made on the role of schools in preparing young people for their futures as partners in marriage and family life.

The trend of decentralising educational administration and authority from the Commonwealth level to State, Territory and local jurisdictions increases the difficulty of obtaining an overall perspective of school policy and programs on a national scale. Responsibility for curriculum development and implementation is increasingly located at the local school level, but because of time and financial constraints it was beyond the scope of this review to undertake an extensive survey of individual schools within any of the States. The comprehensiveness of the review, which concentrates on Commonwealth and State initiatives and guidelines, is therefore reduced. However, despite devolution of authority to local communities, the States still play a critical role in setting standards, providing resources and monitoring the status of programs within each State.

Procedure and Methodology

A literature search (mainly post-1970) was conducted to identify the significant issues and parameters of human relations education. Australian and overseas educational indices were searched using the indicators 'family life education', 'human relations education', 'sex education' and 'personal development'. A preliminary search indicated that the descriptor 'health education' called up health topics (for example, first aid and safety) which were beyond the scope of this review. The search produced over 300 abstracts, the majority of which were descriptions of model curriculums and programs.

Australian education policy was then examined to place human relations education in the broader educational framework. A brief questionnaire (see Appendix) was developed to obtain information from the Department of Education, the Catholic Schools Commission and the Association of Independent Schools in each State and Territory. Surveys of health and human relations education in Australian and overseas schools were canvassed and pertinent questions adapted for this review. An accompanying covering letter explained the purpose of the study and requested the names of individuals within each organisation who could be contacted for additional information.
Another perspective was sought from the Equal Opportunity Units established in recent years in Departments of Education. Since sex role stereotyping in curriculum can affect the development of personal relationships and attitudes to family life, it was thought useful to obtain some indication of how Equal Opportunity Officers viewed the ways schools were meeting these concerns and where gaps existed.

National organisations (such as the Family Planning Association) known to be involved in providing programs and resources to schools in several States were asked to provide statistics on the number of schools visited and information about the structure and content of programs conducted. Statements of policy, guidelines, or comments on issues of concern about human relations education were also solicited from organisations with significant connections with school affairs. These included the Australian High Schools Principals Association, the Australian Primary Principals Association, the Australian Parents Council, the Australian Teachers Federation, and teacher unions in each State.

Once contact personnel had been designated, further discussions occurred via telephone or, where possible, in person. In most cases more detailed information was obtained from senior curriculum officers with responsibility for the subject areas of Health, Social Studies or Home Economics.

To gain further understanding of how human relations courses actually operate, a limited number of schools were visited on the basis of recommendations of innovative or established programs. Permission was requested from school principals to sit in on selected classes and to meet with the teachers involved. Individual teachers were then asked if they were agreeable to such visits. In all, 12 school visits were made.
The School in Society

Social Context: Changing Families

It is within the context of social change that the role of the school must be placed. Trends in society that impinge upon educational agendas are documented in current statistics describing contemporary Australian life, and foremost among these are changes in the structure and composition of families. Although a variety of family types other than the nuclear family has always existed (Shorter, 1976), today the diversity in composition, cultural background and life cycle experiences prevalent in Australian families is reflected in increased divorce rates, fewer children as a result of declining fertility, an increase in one-parent and remarried families, growing numbers of single-person households, a rising proportion of married women in the workforce, and an increase in migrant families (ABS Social Indicators, 1984).

Since World War II, Australian families have become marked by ethnic diversity. While many migrant families adapt to their new circumstances with a minimum of difficulty, some encounter problems in adjusting to different customs and value systems, and this may generate stress between the generations. The school often becomes a focal point for these differences. Among the aims of the Schools Commission grant program (Commonwealth Schools Commission, 1984) is the encouragement of ‘efforts to develop in students an understanding and tolerance of the different cultural traditions and associated values and lifestyles existing in Australian society’ (p.31).

In 1986, of families with dependent children in the household, 86 per cent were two-parent families and 14 per cent were one-parent families. Among two-parent families with dependent children, 46 per cent had husbands as sole providers with wives not in the labour force (ABS Labour Force Status, 1985). The single-person household is one of the fastest growing types of household, accounting for 19 per cent of households in 1984 (ABS Household Expenditures Survey, 1984). The proportion of such households has increased as a result of the splitting up of households due to divorce, the
capacity of older people to maintain their own residences with the assistance of pensions and other supports, and the tendency for young people to leave home before marriage.

Until recently young people usually did not leave the parental home until they were ready to marry, marriage traditionally being considered the bridge between dependence and attaining independence and entering the adult community. This phenomenon is changing; marriage is no longer the only road to independence and autonomy from parents. The advent of the contraceptive pill, the accessibility of abortion, and a more liberalised attitude to sexuality mean that marriage is not the only avenue for sexual activity (Carmichael, 1984). The AIFS Family Formation Survey reported that in the 1960s eight out of ten young people left home to marry, in contrast to the 1980s when four out of ten left home for that reason. Other reasons given for leaving home included a desire for independence, educational or vocational opportunities, and because of family conflict (Young, 1987).

Economic pressure exacerbated by high youth unemployment levels often forces young people to return home, and this pattern of leaving and returning home means a constant renegotiation of levels of dependence and independence among family members which can create stress and conflict between the generations (Institute of Family Studies, 1985).

Many people of marriageable age choose to live together rather than get married. The 1982 Families Survey (ABS Australian Families, 1984) reported that 5 per cent of all couples were unmarried couples living together, many of them young people under 30. Nevertheless, most surveys of young people agree that they intend to marry at some time (Glezer, 1984). Given the widening gap between the age at which sexual and social maturity is reached and the age of marriage, it becomes even more important for young people to acquire skills enabling them to evaluate decisions about the personal relationships they will enter into (Goldman and Goldman, 1984).

The trend towards smaller families is one of the most dramatic changes to affect the Australian family. Fertility rates have declined from 3.41 children per woman in the period 1955–1960 to 1.89 in 1985, the lowest ever recorded in Australia (Carmichael, 1984; ABS Births, 1985). One of the consequences of smaller family size is that children growing up will have less experience in caring for younger siblings and in learning about parenthood.

The belief that motherhood comprises a woman's only identity has also diminished in recent decades. A comparison of attitudes to motherhood of married women in 1971 with a similar sample of women in 1981 revealed that in 1981 only 30 per cent of women agreed that 'A woman is only really fulfilled when she becomes a mother', compared to 68 per cent of women who felt this way in 1971 (Glezer, 1984). Likewise, 78 per cent of women in 1971 agreed that 'Whatever career a woman may have her most important role in life is still that of becoming a mother', in contrast to 46 per cent of women in 1981 who accepted this tenet.

In 1985, 55 per cent of women aged 15–59 were in the labour force. The proportion of married women with dependent children in the labour force
increased from 14 per cent in 1954 to 49 per cent in 1986, although many of these mothers worked part time (ABS The Labour Force Australia, 1987). Of married women in the labour force, 50 per cent had children between ages 0–14 years.

The Commonwealth Schools Commission report, *Girls and Tomorrow: The Challenge for Schools* (1984), emphasised that the school curriculum should stress ‘...the importance of marketable skills for females and domestic skills for males... with an emphasis on parenting skills for both boys and girls’. The report also recommended that the curriculum should ‘increase students’ knowledge of work as a central human activity for women and men’. The challenge is how families will organise child rearing and domestic responsibilities when two parents work outside the home.

Although the incidence of divorce has declined somewhat in the last few years, the number of divorces increased from 10,984 in 1969 to 39,800 in 1985. (ABS Divorces Australia, 1985). The same social changes that have contributed to the decline in marriage and fertility rates are associated with the high levels of divorce. These changes include the increased economic independence of women, the social acceptability of divorce and of cohabitation, the greater availability of divorce through the *Family Law Act*, and the provision of welfare supports for single parents (Carmichael, 1984).

But more important, and perhaps because of such social changes, is the increased emphasis on marriage as a relationship to satisfy emotional and companionship needs rather than as a vehicle to provide sanction for sexual activity, economic security, status in the community and personal identity. If marriage does not seem to meet the sometimes unrealistically high expectations of intimacy and excitement then couples separate (Hartin, 1977).

Approximately 60 per cent of divorces involve children aged less than 18: in 1985, 46,800 children were involved in their parents’ divorce. While few question the notion that divorce generates stress and disorganisation for the families involved, it should be noted that parental discord and a conflictual home environment may be more detrimental to a child’s well-being than actual divorce (Amato, 1987; Dunlop and Burns, 1987; Smiley, Chamberlain and Dalgleish, 1987), and that conditions of financial stress and near poverty that often result from divorce may be more of a factor in negative adjustment than the situation of being in a one-parent family.

Many children and their parents will not remain in one-parent families for the duration of their childhood. In approximately 31 per cent of all marriages which occurred in 1985, one or both partners had been previously married (ABS Marriages, 1985). Remarriage rates have been high throughout history: however, in earlier decades the cause would usually have been the early death of one partner rather than divorce. The continuing presence of another parent makes modern stepfamily relationships more complicated now than in the past (Conolly, 1983).

These demographic changes are set in an environment of proliferation in unemployment, particularly for young people aged 15–19, accompanied by uncertainty about future work opportunities and a disturbing growth in the number of families whose incomes are at or below the poverty line (Burbidge, 1984). Within this economic climate, many families are finding the
task of adequately providing for their members' needs more difficult, and this, in turn, can place additional stress on family relationships.

The Role of the School

Skilbeck (1980) observed that the school curriculum can be viewed as 'a kind of social-cultural map' with the design and development of curriculum a process of 'analysing and interpreting the social order' (pp.260-261).

In her review of major educational issues of the 1980s, Batten (1983) notes the following social trends that are influencing educational agendas and debate: the changing composition of the family unit, the changing role of women, the diversity of family lifestyles, the multicultural complexion of the population, and shifting work and leisure patterns. The Commonwealth Schools Commission Report for the Triennium 1982-84 (1981) calls for increased attention to areas of social development in the curriculum to combat problems created by youth unemployment, alienation, and family breakdown, and notes that '... the rapidity of social change in family patterns and expectations and in the workplace must be recognised and its impact assessed' (p.13). The report goes on to state:

In this context changes in the form of the family are of foremost importance. The increase in the number of single-parent families, the rising rate of marital breakdown, a tendency for marriage and child bearing to be postponed, the decreasing size of families, and the general diversity of domestic lifestyles call for a re-examination of the assumptions about living patterns on which much of schooling is based. (p.18)

The report emphasises that 'the Commission sees a continued need for schools to reflect the changing roles of women more directly in the curriculum' (p.123) and that schools should 'shed assumptions about the "normal" Australian family in favour of a more flexible definition that reflects the reality of students' lives'.

Student attitudes to their schooling were explored by Fawns and Teese (1980) who argue that students need guidance in forming health and life patterns and in determining social and sex role expectations through acquiring skills in decision making and problem solving. Their comments are echoed in the Commonwealth Schools Commission (1980) report, Schooling for 15-16 year olds, which concluded that young people require skills for coping with the changing meaning and patterns of work and the demands of family roles that incorporate dual careers and shared parenting. And in Mason's (1979) study of community expectations of education, students and parents placed surprising emphasis on skills in money management and family living — areas traditionally considered the responsibility of the home (in Batten and Girling-Butcher, 1981).

Added to structural changes in society is the shift away from a universal set of values entrenched in the Judaic-Christian moral code to a more secular philosophy of life and an individual approach to evolving value systems. The legal, moral and social climate today allows for greater choice with fewer community constraints or prescriptions on how individuals should
lead their personal lives. So perhaps more than ever before young people require opportunities to develop decision-making skills and the ability to discriminate between conflicting and divergent viewpoints to which they are inevitably exposed.

Crittenden (1978) acknowledges the challenge ‘moral pluralism’ poses for schools, and states: ‘Although a school may intend to preserve strict silence on conflicting moral values, it is virtually impossible to implement a curriculum — however fragmented and preoccupied with ‘facts’ it may be — without some reference to what are thought to be the standards of a worthwhile human life’ (p.6). And Macklin (1981) points out: ‘Preparing persons to deal constructively with the new pluralism and to make informed choices for themselves with regard to lifestyle is the challenge of family life education in the 1980s’ (p.568).

A number of Departments of Education (New South Wales, 1974; Victoria, 1984; Northern Territory, 1983) have addressed the question of pluralism of values in curriculum policy statements. For example, the New South Wales Statement cif Principles for Personal Development in Secondary Schools (1974) observes:

... greater diversity of lifestyles and the values associated with them are constantly thrust at young people, raising not only problems of right and wrong but also issues concerned with making judgements on social controversies and values. Young people are made acutely aware by the mass media of divergences from traditional beliefs and modes of behaviour. They need to be adaptable and discriminating, and part of the school’s task is to help them develop the necessary skills. (p.4)

Recognising these significant societal tremors as a major reason for confronting the issues of curriculum review and development, the Commonwealth Core Curriculum for Australian Schools (1980) asserts: ‘Changes of these kinds permeate the whole society and require us to reassess the content, structure, methods and outcomes of school curricula whose main outlines were worked out at an earlier period in our history, in and for a very different social order’ (p.6).

However, a note of reservation regarding the role of the school is sounded by the Victorian Ministry of Education (Ministerial Paper No.6, 1984) which cautions:

4.1 Our society is undergoing continuing and accelerating social, economic and technological change. These changes affect schools in several ways. Sometimes schools are blamed for causing some of the changes or for problems associated with them. It is important that schools not be expected to solve problems, such as youth unemployment, for which they are not responsible and which they are powerless to overcome.
What is Human Relations Education?

Historical Background

A common impetus for the introduction of human relations education in schools has been a desire to counter the incidence of certain social problems in the community — for example, teenage pregnancies, venereal disease and drug or alcohol abuse (Logan, 1980; Laird, 1981; Reiger, 1984; Sheek, 1984). Concern about the rising divorce rate along with the community’s heightened awareness of the extent of child abuse and domestic violence has added to the momentum.

Tracing the history of sex education in Queensland schools, Logan (1980) recounts that interest in the issue derived from unease over the increase in venereal disease and illegitimate births between the World Wars. Groups such as the White Cross League and Social Purity Movement in several States advocated the teaching of social hygiene to promote ‘purity of mind and body’. These movements were linked to the temperance and eugenics campaigns of the times which aimed to preserve family virtue and racial exclusiveness (Logan, 1980; Reiger, 1984).

Where taught, hygiene classes had as their main objective the discouragement of immorality and intemperance and the encouragement of self-restraint through graphic reference to the evils and dangers of ‘licentious behaviour’. Religious instruction and civics classes emphasised the reciprocal responsibilities of individuals, families and the State. As Laird (1981) points out in a historical review of sex education in Victorian schools, the role of the schools was that of ‘an agent of social control’ to improve the social hygiene of children from disadvantaged homes by inculcating the virtues of cleanliness and self-restraint.

After World War II, Laird records a shift in emphasis in health syllabus content from a focus on sexual vice and social hygiene to the ideal of maintaining healthy family relationships to counter the rising divorce rate. The scientific or ‘plumbing’ approach to imparting biological facts became more prominent and mothercraft courses were encouraged, doctors and nurses being invited to provide this information.
During the 1960s the terms ‘family life education’, ‘personal development programs’ and ‘human relations education’ emerged, broadening the focus from biology and physiology in health curricula and cooking and sewing in domestic science curricula to incorporate attitudes, values and behaviours inherent in personal and family relationships. These events occurred at a time of changing views of morality in an increasingly pluralistic society accompanied by the expanding and pervasive influence of the media which exposed children to non-traditional values and to sexually explicit content (Penland, 1981; Scales, 1981).

Prevention of Social Problems

Submissions made to the Royal Commission on Human Relationships (1977) during its inquiry into relevant school programs frequently referred to the role of the school in stemming the tide of a variety of social concerns such as teenage pregnancy, abortion, rape, child abuse and divorce.

Statements from a number of State Departments of Education reflect these same sentiments. The Victorian Ministry of Education (1980) Report of the Advisory Committee on Health and Human Relations in Schools states that ‘health education should be increasingly concerned with mental and social health, with topics such as family life, drugs, ... sexuality, marriage guidance and many others’ (p.5). Queensland’s Report of the Advisory Committee on Human Relationships (1983) states:

... We have also been concerned at what we perceive to be a great deal of confusion and/or ignorance about relationships between the sexes, procreative relationships and the range of controversial issues that pervade this area. We believe that this confusion and/or ignorance exists among young people contemplating marriage, and among parents who are striving to raise their children in ways which will best equip them for the future.

We have also concluded that this guidance should take the form of a program in human relationships to be incorporated into the curriculum of State primary, secondary and special schools. (p.2)

Support for these views comes from recent studies (Goldman and Goldman, 1984; Siedlecky, 1984; Family Planning Association, 1985) which suggest that sexual activity is initiated at younger ages and that among young people there is widespread ignorance of biological and physiological facts and a lack of concern about the consequences of pregnancy or sexually transmitted diseases.

After researching the extent of children’s sexual understanding in Australia and other Western countries, Goldman and Goldman (1984) raise the question of whether schools have adjusted to changes in society, and argue that the earlier physical maturity of girls, later age at marriage and exposure to sexual explicitness and violence should be reflected in the teaching of human relations. An article in The Age (11 April 1985) describes a pilot program in schools to ‘teach young children to cope with domestic violence, general maltreatment, sexual abuse, accidents and peer group violence’ that are seen as endemic in the community.
The provision of human relations education has been, and continues to be, perceived by many as a means of counteracting trends associated with the proliferation of social problems and family disruption. In other words, human relations education is considered a method of 'immunisation' against family breakdown and subsequent social problems. Pressure for changes in school curricula have therefore been sporadic and transient.

**Enhancement of Personal and Family Relationships**

A more positive interpretation of this 'prevention' approach is made by those who consider human relations education to be a means of enabling individuals to develop the skills essential for forming and maintaining satisfying personal relationships and to make informed and effective decisions about their future. The enhancement of self-esteem and the fostering of competence in young people is a key element in this approach: as Germain (1978) says, 'a realistic and extensive self-concept leads us to make appropriate choices in our lives'. The corollary to this is that low self-esteem can lead to decisions which are made under pressure without due consideration of the logical consequences or a clear sense of what one hopes to achieve. Poor self-esteem has been linked to anti-social behaviour, drug and alcohol abuse and the inability to form and maintain positive satisfying relationships (Edgar, 1974; New South Wales Department of Education Contact 21).

According to recent theories on stress and coping behaviours (McCubbin, Cauble and Patterson, 1982; Olson, 1983), the ability to cope with stress is associated with high self-esteem, a personal values system, competence to deal with ambiguity and change, and effective mobilisation of resources and supports when required. Human relations education in this context is viewed as:

... providing educational opportunities for students to develop skills and competence in areas such as problem solving, decision making and communication, so that they may become more autonomous and develop respect, tolerance and consideration for the needs, feelings and interests of others, as well as their own.

(Victorian Ministry of Education, 1982, p.15)

These comments are reinforced in the observations of marriage counselors and family sociologists (Hartin, 1977; Scanzoni, 1982; Kitson, Babri and Roach, 1985) who consistently refer to inadequate communication and problem-solving skills as contributing to marital breakdown. Equally, the lack of awareness about the realities of married life, of role expectations and the impact of having children and other life cycle events has been acknowledged as a major factor in marital failure or unhappiness.

The importance of the school's role in counteracting influences that encourage stereotyping and limit options for both sexes is acknowledged in the Commonwealth Schools Commission (1981) *Report for the Triennium 1982-84*. This report included recommendations relating to the development or revision of curriculum materials that should:
(b) increase mutual awareness among girls and boys about sex-linked expectations, and foster the desire for greater flexibility in roles between women and men; and (c) assist girls and boys to develop skills to communicate effectively with others and thus increase their capacity to establish and maintain satisfying personal relations. (pp.128-129)

More recently, the inclusion of human relations education in the curriculum has been linked with the changing nature of schooling in response to structural changes in labour market patterns (Ministerial Review, 1985). Such basic ‘life studies’ and ‘life skills’ courses are intended to provide students with experiences and skills for coping more effectively in a world where permanent work may not be an option, and to help them develop personal strengths and interests as well as an awareness of ways to actively contribute to community life. Subjects such as consumerism, environmental and peace studies, and career education exemplify this new point of view.

Bronfenbrenner (1979) argues that schools need to be more actively integrated into community life and its challenges, and to have as a necessary goal increasing student awareness of the connections and responsibilities existing between individuals and the community. This viewpoint hearkens back, with modern modifications, to the aims of previous decades’ civics and citizenship classes. Without such attention in the curriculum to values education, moral reasoning and the development of critical thinking skills, he warns, schools become ‘potent breeding grounds of alienation’, thereby limiting opportunities for young people to function satisfactorily in both areas of intimate relationships and community identification.

In summary, the justification for human relations education based on the belief that it will help prevent the occurrence of various social problems has been broadened to encompass the aim of encouraging positive personal relationships through self-understanding and sensitivity toward others. The acquisition of adequate communication and decision-making and problem-solving skills can be viewed as a means of enabling young people to cope with the practical problems of living in a complex pluralistic society and to make informed and efficacious life choices.

These rationales are set out clearly in various statements of objectives of specific courses in human relationships or related subject areas.

Today’s society confronts individuals with a vast and increasing range of information and with conflicting pressures to choose between a wide variety of options. Health Studies can develop skills needed for informed decision making and encourage the examination of attitudes and values.

(New South Wales Department of Education, 1984)

... [students] explore their relationships with their family, peers and the significant adults in their lives, and identify the common conflict situations which they encounter in these relationships. The students are encouraged to suggest alternative ways of responding to each situation, and the possible consequences of each. They are led to an appreciation of their responsibilities in relationships, from an awareness of their need for ‘others’.

(South Australian Education Department, 1978, p.14)
Definition, Scope and Objectives

That precise definitions of human relations education are difficult to find reflects the diversity of aims and connotations. In its review of educational programs, the Royal Commission on Human Relationships (1977) used the term human relationships education 'to include not only sex education and health education but all the wider aspects of human relationships and personal development' (p.1, Vol.2), while Queensland's Advisory Committee on Human Relationships (1983) referred to 'the patterns of behaviour adopted by individuals during interaction with others'.

In the lexicon of many educators human relations education is synonymous with sex education, which itself is defined broadly, as in the New South Wales Department of Education (1974) statement: 'Human sexuality rather than human reproduction should be the concern of sex education. Personal development rather than biology should define its scope' (p.5).

Sometimes the term 'sex education' is used interchangeably with that of 'family life education'. The following definition, taken from the United States of America State of New Jersey's mandated course, illustrates the confusion and ambiguity in defining what constitutes human relations education:

'Family life education program' means instruction to develop an understanding of the physical, mental, emotional, social, economic and psychological aspects of interpersonal relationships; the physiological, psychological and cultural foundations of human development, sexuality and reproduction, at various stages of growth; the opportunity for pupils to acquire knowledge which will support the development of responsible personal behaviour, strengthen their own family life now and aid in establishing strong family life for themselves in the future, thereby contributing to the enrichment of the community.

(Quoted in Darden, 1981, p.294)

It is the multidisciplinary nature of human relations education concepts that creates permeable boundaries and definitional imprecision. The terms of reference can and do encompass elements found across the whole curriculum and, as shown in Table 1, selected human relations topics may be found under a variety of subject headings.

A comment from the Victorian Ministry of Education in response to this review's survey questions illustrates the difficulty in isolating the definition and scope of human relations education:

In Victorian schools, the various subject areas tend to focus on different aspects of human relations/family life education. For example in Social Education and English the tendency is to teach about family as a cultural/social phenomena. But values relating to these are explored. Science tends to focus on the biological aspects of human growth and development, and Commerce on legal and consumer aspects of family living.
Table 1  Subject areas in which selected Human Relations topics may be taught in State and Territory schools

<table>
<thead>
<tr>
<th>States</th>
<th>Health</th>
<th>Social Studies</th>
<th>Science</th>
<th>Senior Biology</th>
<th>English</th>
<th>Home Economics</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>SA</td>
<td>1–19</td>
<td>1–7, 11, 13, 15, 19</td>
<td></td>
<td>13, 14, 15</td>
<td>1, 2, 7, 15 as themes</td>
<td>1–19</td>
<td>Transition Education Parenting Course</td>
</tr>
<tr>
<td>VIC</td>
<td>1–17, 19</td>
<td>1, 3–7, 11, 12, 15, 19</td>
<td>2, 3, 7, 8, 13–16</td>
<td>12–14</td>
<td>1, 2, 3, 7, 11, 15 as themes in lit. texts</td>
<td>1–16, 18, 19</td>
<td>Consumer Education</td>
</tr>
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<td></td>
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<tr>
<td>WA</td>
<td>1–19</td>
<td>1–6, 11, 18–19</td>
<td>2–3</td>
<td>2–3, 6–8, 11, 12–17</td>
<td>1–4, 6–7, 9–12, 15 as themes</td>
<td>1–4, 6, 8, 11–19</td>
<td>Parenthood Course</td>
</tr>
<tr>
<td>NT</td>
<td>1–19</td>
<td>1–8, 11, 19</td>
<td>13–14</td>
<td></td>
<td>1–5, 6–7, 11–13 as themes</td>
<td>1–4, 6, 8–13, 15–16, 19</td>
<td></td>
</tr>
<tr>
<td>QLD</td>
<td>1, 2–4, 7</td>
<td>13 (attitudes)</td>
<td>13–14</td>
<td>13–14</td>
<td>1–12 as themes</td>
<td>2–13</td>
<td>Personal Development After School Hours Program 1–17</td>
</tr>
<tr>
<td></td>
<td>11 (services focus)</td>
<td>15 (related to social development)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Parentcraft Program 3–5, 7, 8, 11, 19</td>
</tr>
<tr>
<td></td>
<td>12, 13, 15 (body image)</td>
<td>18–19</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>18, 19</td>
</tr>
<tr>
<td>NSW</td>
<td>1-6, 13, 19</td>
<td>2-4, 6-7, 11</td>
<td>2-3, 13-17</td>
<td>13-14</td>
<td>1-12, 15 as themes</td>
<td>1-9, 11, 12, 14, 18, 19</td>
<td>Personal Development 1-17</td>
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<tr>
<td>TAS</td>
<td>1-19</td>
<td>1-19</td>
<td>2, 13-14, 16, 17</td>
<td>2, 13-14, 16, 17</td>
<td>1-7, 9, 12, 15 as themes</td>
<td>1, 3, 4, 8-11, 13-19</td>
<td>Parentcraft 8</td>
</tr>
<tr>
<td>ACT</td>
<td>1-6, 13, 19</td>
<td>6, 11</td>
<td>13-14</td>
<td>13-14</td>
<td>1-4, 6-15, 18, 19</td>
<td>1-4, 6-15, 18, 19</td>
<td>Lifestyle Studies 6, 8, 9, 11, 13-14</td>
</tr>
</tbody>
</table>

**TOPICS:**

1. Peer relationships
2. Communication skills
3. Values and decision-making
4. Self-esteem
5. Stress management/conflict resolution
6. Family types and functions
7. Gender roles/stereotypes
8. Parenting
9. Marriage
10. Divorce/Remarriage
11. Community and family
12. Ageing and death
13. Growth and development in males/females
14. Human reproduction
15. Attitudes/Values about sexuality
16. Contraception
17. Sexually transmitted diseases
18. Money management
19. Consumer education
Divided Opinion on Human Relations Education

Any subject area that touches on social values and beliefs, family life and personal relationships is likely to evoke controversy. Human relations education, whether narrowly or broadly defined, contains these elements and has generated vigorous public debate. The Royal Commission on Human Relationships (1977) reported that the major issues which divide opinion in Australia are parental involvement, content of programs, age at which students are introduced to the subject, and selection and training of teachers.

Community Controversy

Controversial issues are described in Tullock and Spring’s report ‘Handling controversial social issues in secondary schools’ as those which ‘divide individuals and groups within the community, involve a challenge to existing practices in the community, are rooted in values perceived to be in conflict’ (quoted Vol.2, p.77, Royal Commission on Human Relationships, 1977).

Community concerns coalesce around the sex education and family life components of health or human relations courses. It is there that personal values and the moral beliefs of the community intersect and may conflict with the objectives, content or teaching strategies schools adopt in implementing human relations courses. This is recognised by the ‘Controversial Issues Statement’ published each year in the Education Gazette:

It is recognised that in teaching over a wide range of areas in the school curriculum, teachers are faced with controversial political issues, religious beliefs, and moral problems. It would be improper for teachers to avoid or refuse discussion on these matters. On the other hand, the public must be assured that teachers will refrain from presenting as the only correct belief or practice their own personal preferences in these matters and that they will refrain from deliberate acts or words which attempt to impose upon children or to use children for propagation of their own beliefs and opinions.

(Victorian Ministry of Education, 1982, p.11)
The Australian Parents Council representing the affiliated Federation of Parents' and Friends' Associations in all the States affirms that 'parents... should know that all the values underpinning any human relations or family life education program taught in the schools conform to the values taught in the home' (Australian Parents Council, 1985).

Determining what constitutes 'the values taught in the home' in a pluralistic society like Australia generates the dilemma. The Queensland Advisory Committee on Human Relationships (1983) recommended that 'a human relationships program within a moral context which is in accordance with Judean-Christian principles be prepared and made available for use' (p.3), whereas the New South Wales Department of Education (1974) acknowledged that 'the school serves a community with divergent views on the significance of spiritual and religious matters' (p.18).

One argument commonly offered in opposition to the inclusion of sex education and family life topics in the classroom is that parents are and should be the primary educators of their children in these matters — the corollary being that lessons on sexuality or gender roles would pre-empt their rights and responsibilities as parents. However as Mendelsohn (1983) points out in her discussion of the opposition to sex education in Australian schools, few would argue that 'parents are the primary sex educators of their children, if they do it well or not' (p.99).

Opposition groups in the community protest that human relations education erodes the traditional views of marriage and family life by exposing children to humanistic and secular attitudes (Mendelsohn, 1983; McCarthy and Gordon, 1984). These groups claim that knowledge of sexuality will promote premature and promiscuous sexuality among young people. Mendelsohn quotes a Society to Outlaw Pornography (STOP) and Campaign Against Regressive Education (CARE) objection to a reference in a Western Australian syllabus unit on family relationships which, was claimed, enabled children ‘to gain new concepts of family relationships’:

What is wrong with the OLD concept of family relationships, the one God established — no fornication, no adultery, marital faithfulness until death, the husband the head of the family, the wife in subjection, and the children obedient and respectful to their parents and their elders.

Of course the old concept utterly precludes homosexual or lesbian relationships or wife swapping or communal upbringing of children. (Quoted in Mendelsohn, 1983, p.107)

Classroom strategies have also been the subject of attack. Objections are mainly related to the use of 'values clarification' strategies such as role playing or classroom discussion of private family lives which some parents regard as an invasion of privacy (Mendelsohn, 1983).

Influenced by the activities and support garnered by the STOP and CARE groups as well as the reservations of some Church elements, the Queensland State Cabinet in 1978 banned the use of 'Man: A Course of Study' (MACOS), and the Social Education Materials Project (SEMP) publications produced by the Commonwealth's Curriculum Development Centre, arguing that the SEMP materials on family life 'promoted ideas which could undermine family life and acceptable behaviour' (Logan, 1980, p.45). The Select Committee
agreed that some of the materials were ‘unsuitable for use in Queensland schools but recommended others be approved for use (Select Committee on Education in Queensland, 1979:13–14). MACOS and SEMP are used in many Catholic schools in the State.

According to a Queensland senior curriculum services officer, some of the materials distributed by the Human Rights/Sex Discrimination Commission are not to be used because of their role reversal and values clarification aspects.

Another example of the controversy engendered in communities by the issue of human relations education is provided by the State of Victoria. In the early 1980s a campaign was launched by the Concerned Parents Association (CPA) against the Education Department’s proposed sex education guidelines. The CPA argued for restricting sex education to only the biological and physiological aspects of human reproduction. This response appears to contradict a common objection to sex education courses that they are not placed in a more comprehensive human relations framework covering social, psychological and moral attitudes and behaviour (Royal Commission on Human Relationships, 1977; McCarthy, 1983; McCarthy and Gordon, 1984).

Through public meetings, pamphlets and the media, the CPA raised the spectre of teachers encouraging sexually provocative behaviour in the classroom and claimed school libraries displayed pornographic books (Robinson, 1982; Mendelsohn, 1983). At one point the group called for the closure of the Social Biology Resources Centre, a Melbourne organisation funded by the Health Commission to provide training for teachers and other health professionals in health and human relations education.

Supported by other groups such as the National Civic Council and Women’s Action Alliance, the CPA is credited with influencing the Department of Education to revise the Guidelines for Health and Human Relations Education in the direction of more parental control and involvement (TTUV Sexism Committee, 1982).

However, since devolution of control over curriculum and administration to school level occurred at the same time, it is difficult to assess or isolate the effect of opposition groups. Certainly where the CPA and other groups have been very vocal and attracted the attention of the media, some programs have been reconsidered. (Letter, Victorian Women’s Advisory Council to Premier, 1983).

The debates are not one-sided. Support for the introduction of human relations education, including sex education, in Queensland schools came from the Queensland Teachers’ Union, the Women’s Electoral Lobby and the Queensland Council of State School Organisations, which at its 1976 annual conference adopted the following policy statement: ‘Carefully prepared programs dealing with interpersonal relationships including sex education, suitably graded from pre-school to secondary levels [be introduced into schools]’ (Logan, 1980, p.41).

As in Queensland, there is strong support for including human relations education in the Victorian curriculum. The Victorian Women’s Advisory Council endorsed incorporating sex education and human relations edu-
cation into health education; the Teachers’ Federation of Victoria (1982) stated that ‘all students should have the opportunity to receive a comprehensive health education’; and the Technical Teachers’ Union of Victoria (1982) argued that ‘all schools should implement a human relations and sexuality course which should not be seen as only part of one subject area or form levels’.

Mendelsohn (1983) suggests that ‘controversy over sex education provides a microcosm for analysis of wider political-moral conflict’ (p.104), a comment reinforced in this extract from a CPA newsletter:

... the Concerned Parents Association is deeply concerned at the subversion of education by humanist educationists and teachers, determined to turn schools into behaviourist clinics and our children into illiterate young revolutionaries with no respect for parents, authority, morality or God.

(Quoted in Victorian Teacher, November 1982, p.20)

Despite the vocal and media-catching activities of opposition groups, there appears to be general community support for human relations education — a 1982 Australian Gallop Poll showed that 80 per cent of the public approved of sex education in schools (Victorian Teacher, November 1982).

Teacher unions in most States strongly support human relations education. For example, the Australian Teachers’ Federation (1984) declared: ‘There is a need for early and continuous human relations and sexuality education ... it is preferable to include comprehensive sex education programs within broad based health education curricula’ (p.4). The South Australian Institute of Teachers (SAIT) advocates comprehensive sex education programs within broad health education curricula which includes areas such as safety, environmental and consumer health.

Student Views

Most surveys of students have found that young people are concerned about family life and sexuality and think that schools should provide more information and discussion on these issues (Herold, Kopf and de Carlo, 1974; Yarber, 1979; Szirom, 1983; Goldman and Goldman, 1984). Szirom (1983) reports: ‘There was a resounding “yes” to the question, “Do you think that sex education should be introduced into schools?” with 94 per cent of the young people stating that it should be introduced’.

The Victorian Ministry of Education’s study of the health education needs, interests and concerns of Preparatory to Year 6 students (Ellis, 1984) concluded that ‘children want information about themselves, their health, their sexuality, about drugs, about family relations and peer relations before they leave primary schools’ (p.145). This study also asked regional health education consultants their opinions about how much importance students placed on health education. A majority of the regional consultants considered sex education, values and relationships to be important in terms of student interest and need (Peters, 1984).

Goldman and Goldman (1984) reported that 90 per cent of 13 year-old Australian teenagers whom they interviewed answered ‘yes’ when asked if they should have lessons in school on topics related to sex.
A small study of Australian Capital Territory secondary school students concluded that school programs were the preferred as well as main source of information on a variety of sex education topics, although parents were a close second for many (Kaye, 1981). Siedlecky (1979) observed that many young people would like their parents to be more comfortable in discussing issues of sexuality with them. Students in the Canberra study agreed that school-based programs would provide additional depth and objectivity that was desired by many teenagers.

Parents as Educators

Much has been written about the role of parents as the educators of their children in the areas of family life and sexuality (Royal Commission on Human Relationships, 1977; McCarthy, 1983; McCarthy and Gordon, 1984). All commentators agree that parents are the primary educators in these areas of values and attitudes and that schools should encourage parental involvement and provide opportunities to help parents communicate more effectively with their children about sexuality (Dickman, 1982; Sheek, 1984). However, Goldman and Goldman (1984) express the concern of other educators that, 'the majority of parents have not the resources nor sometimes the confidence to continue from random answering of questions to the more structured and sequential teaching the children need' (p.22).

The Koblinsky and Atkinson (1982) review of parental plans for children's sex education concluded that parents shared little information with their children, especially with their sons. Nearly all of the parents of adolescents interviewed by Alexander (1984) felt they should be the sex educators of their children; however the majority approved of schools teaching sex education and most would welcome the schools offering sex education discussions for parents to help them in their parental educating role.

Looking at the complementary role between parents and schools, the New South Wales Department of Education (1974) makes the following observation:

... the secondary school has an advantage in that it can meet the adolescent's needs to discuss development with responsible adults who are not too emotionally involved with him ... in its broad syllabuses of health, science, guidance, home science and social science, the school can provide the important integrating element which helps the youngster to understand himself and others and to apply that understanding to his daily life as a responsible mature adult. (p.7)

The Northern Territory Department of Education states:

The Education Department does not wish to intrude on parental responsibility and guidance in this area of Health Education. By drawing on expertise and resources which may not be available to parents, the school can supplement home discussions and teaching which will enable students to interact in a variety of ways to develop attitudes through discussion, activity and decision-making processes.

(Undated)

Most parent groups support the inclusion of human relations topics in conjunction with parental involvement and review (Australian Parents Council, 1985).
Parent and Community Participation

A common component in meeting community opposition and ensuring the successful implementation of human relations education in schools both in Australia and overseas has been the provision of processes to enable adequate parent and local community participation, particularly in the initial stages of planning and developing programs (Kenney and Alexander, 1980; Dickman, 1982; Lee, 1982; McCarthy, 1983; Sheek, 1984). Where policy guidelines have been issued by State Departments of Education (Table 2) parent participation has been mandated, encouraged or recommended.

In most States where local school communities have been given autonomy for curriculum development, the guidelines require that school councils provide for parent approval and review of programs. Ministerial guidelines for Victoria are typical:

... the School Council will need to give special attention to ensuring that parents are part of the information-sharing process on health curriculum. This should be done in meetings at which parents and other members of the school community are provided with information about the content and materials proposed for the health education program and given an opportunity to express their views.
(Victorian Ministry of Education, 1984, p.2)

Tasmanian schools wishing to introduce the Personal Relationship unit as part of the Social Science or Health Education program are instructed to:

(2) Inform School-Parent organisations and seek their support ... 
(4) Inform the parents of the children for whom the proposed unit is to be provided that it is planned and arrange for these parents to discuss the nature of the unit. Organisation of these discussions should include arrangements for parents to view and examine all materials to be used.
(Tasmanian Education Department, 1984)

Guidelines on human development courses published by the various State Catholic Education Commissions also advocate parental involvement:

In this program it is imperative that parents be informed, consulted and involved, facilitating open communication between teachers, parents and students. In this way, parents also are assisted in understanding their privileges and in accomplishing their tasks, thus enabling them to combine with teachers in carrying out the program in the schools.
(Catholic Education Commission, NSW, 1979, p.33)

Parent and community involvement can take several forms. Participation usually involves opportunities for discussion, preview and review of curriculum objectives, content and instructional materials. Sometimes a parent with professional expertise will act as a resource person in classroom activities. Parent education programs may be offered to help parents explore their own values and attitudes, or to brush up on their own knowledge as a means of increasing their effectiveness and degree of comfort as educators of their children.

Local schools and school councils in many districts have established steering or advisory committees to plan and develop initial programs. These committees may continue to have monitoring functions of reviewing curriculum and resource materials, recommending additions or modifications.
<table>
<thead>
<tr>
<th>States</th>
<th>Guidelines</th>
<th>Curriculums/Syllabuses</th>
<th>Optional or Required</th>
<th>Role of parents</th>
<th>Teacher training</th>
</tr>
</thead>
<tbody>
<tr>
<td>TAS</td>
<td>Health Education in Tasmanian Schools (1987)</td>
<td>Curriculum Framework for Health Education (in progress)</td>
<td>Personal Development required as component of Health Ed. core curriculum at primary and secondary levels</td>
<td>Consultative role in Program development, resource review Right to withdraw children from personal relationships component</td>
<td>Regional and School based seminars and workshops</td>
</tr>
<tr>
<td>Region</td>
<td>Description</td>
<td>Resources/Programs</td>
<td>Additional Details</td>
<td></td>
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<tr>
<td>NSW</td>
<td>Personal Development in Secondary Schools, The Place of Sex Education, A Statement of Principles (1974)</td>
<td>Personal Development Program optional Health Education required at primary level</td>
<td>Consultation before sex educ. components introduced Parental right to withdraw child from PD program Permission for Primary sex education Pre-service training in Home Economics and Health Education</td>
<td>4 days to 4 weeks course in Personal Development subject</td>
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<td></td>
<td>Pupil Welfare Policy and Principles, NSW (1985)</td>
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<td></td>
<td>Student Welfare Policy Statement (1986)</td>
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<tr>
<td>NT</td>
<td>Social and Cultural Educ. T-7 Urban Guidelines (1983) Growth and Development Years T-10 Health Education</td>
<td>Health and Social Studies are core curriculum subjects</td>
<td>Represented on subject area committees May withdraw child from Sex Educ. units</td>
<td>In-service</td>
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</table>
Committees are usually comprised of teachers, parents, students, administrators and community representatives such as the clergy, health professionals, police and local government officials.

Evening or daytime meetings for parents and interested community members are the most common way of offering information, soliciting suggestions, and gaining support for programs. After a course is established, these meetings are usually held at the beginning of each term to acquaint parents with course objectives: the curriculum is outlined, materials are displayed, and teaching strategies explained. Teachers are available to answer questions and parents are given the opportunity to express their views.

Regional consultants and classroom teachers interviewed indicated that these meetings are seldom well attended after the initial programs are developed and running in a school. Nevertheless, all references to setting up a human relations course emphasise how essential it is to involve the community at the outset and to provide open invitations for continuing review and comment.

Student participation in some human relations classes is associated with parent participation, as is the case with Queensland’s After School Hours Personal Development Program and with a number of Catholic school diocesan programs.

All State Departments of Education appear to make provision for parents to withdraw their children from participation in the sex education strand of any subject (Table 2).

All students have the opportunity to receive comprehensive health education. However a parent may decide not to allow his or her child to take up this opportunity.

(Victorian Ministry of Education, 1984)

Courses in personal relationships and sexuality will be provided by all schools and will be compulsory except where parents expressly request that their children do not participate. Any such request should be made personally to the principal or his nominee who should then endeavour to identify with the parents an alternative means by which their children can study these topics.

(Tasmanian Education Department, 1987)

In some schools parents may be required to give written permission for their children to participate in a particular program, whereas in other situations parents must specifically request that their children be excused from the program. Either procedure is based on the assumption that parents have had the opportunity to become acquainted with the nature of the program either through school-parent meetings or written information about the course.

Several commentators claim that the procedure of requesting that a child be withdrawn from a subject indicates that the school considers the subject important enough to be a part of the general curriculum; whereas requiring prior consent reveals a degree of ambivalence on the school’s part (Kenny and Alexander, 1980; TTUV 1982).
Uniqueness of Human Relations Education

Whether human relations education should be treated differently from other subjects is debated (Goldman and Goldman, 1984). Certainly no other curriculum subject seems accorded so much attention or receives such public scrutiny. Seldom does one hear of parent meetings to introduce a history syllabus or suggestions that a maths teacher should be married, although most school systems have provisions for review of all curriculum materials and require that teachers meet certain academic qualifications.

Even acknowledging that topics within human relations education are controversial and touch sensitive areas of personal values and attitudes, the themes of English books and perspectives on history (for example, the Vietnam war) can be just as value laden, emotional, and threatening to the beliefs and opinions of some segments of the community. The debate over introduction of the ‘Peace’ curriculum is another example, while in Western Australia some materials produced by the Curriculum Development Centre and the Australian Heritage Commission were considered unacceptable in schools because they contained criticisms of the mining and woodchip industries (Skilbeck, 1983). Yet parents are not required to give permission for their children to take History or English, nor is the right of withdrawal so publicised.

The Commonwealth and State governments’ commitment to equal opportunity and the elimination of racism and sexism in school curriculum and practice is one instance where an educational mandate that is controversial and conflicts with the values of some community groups remains firm, at least in policy pronouncements. The Commonwealth Schools Commission (1981) makes the following observations:

For some, the attempt to widen the range of girls’ aspirations is seen as threatening their commitment to family relations or potentially denigrating to traditional family structures. (p.124)

Aboriginal families, those with non-English speaking parents, those whose children have special disabilities and those with school-aged daughters all may have expectations of schooling for their children which conflict in some respect with the dominant values in school. (p.127)

There is no suggestion, however, that students will have the option of being excused from classes where the associated activities will be carried out. In fact the Commonwealth Schools Commission (1981) states:

Developing new curricula or examining existing curriculum materials in subject areas such as art, history, literature, geography and sport, and ensuring that sex bias is eliminated and the contribution of women to ongoing events is incorporated, are major enterprises. (p.129)

However, the possibility exists that parents will exercise their rights to exempt their children from any such class that they believe conflicts with their values. This right exists in the Education Acts of many States, one example being the Northern Territory:
23. (1) A parent of a child enrolled at a government school may request the head teacher of the school to withdraw the child from the whole or a specified part of a specified course of instruction provided for the child at the school.

(2) The head teacher of a government school to whom a request under subsection (1) has been made may comply with the request and shall comply with it if:

(a) the course of instruction specified in the request is a course of religious instruction; or

(b) the parent claims to have a conscientious objection to the child's attending the course or part of the course, as the case may be.

(Education Act, Section 23, Northern Territory)

It has been suggested that in some States human relations education has become the convenient focus for a number of other contentious educational issues, specifically those centering around control and autonomy in curriculum and policy decision making. Who shall control the curriculum in a system moving towards decentralisation has, according to Skilbeck (1983), generated dissension and rivalry among the various interested groups comprising the educational community.

One reflection of this situation is the debate over which subjects will be classified as core curriculum areas to be mandated by the States for inclusion in schools, and which will be offered at the discretion of local school authorities. Human relations education is a case in point. For example, although there was strong teacher support for the inclusion of human relations education within the curriculum, the Queensland Minister of Education decided that the Personal Development program would be offered only as a voluntary after hours program to parents and children.

Further discussion of the advantages and disadvantages of centralised versus decentralised decision-making processes in schools is beyond the scope of this paper and has been covered elsewhere (Skilbeck, 1983; Ochiltree, 1984).
Teaching Human Relations in Schools

The key issues surrounding the introduction of human relations education can be summarised as: what should be taught, who should teach it, how it should be taught and what should be its impact (Royal Commission on Human Relationships, 1977; Logan, 1980; McCarthy, 1983; *Family Relations*, October 1984; Sheek, 1984).

Content: What Should be Taught?

The content of human relations education courses, units or themes within other subject areas reflects the inclusive and catholic nature of its aims and objectives. In a survey of 100 family life education programs in American schools, Sheek (1984) identified four common denominators underlying most of the goals of human relations education: 'a good self-image; effective and responsible interpersonal, family and social relationships; personal values and goals within a pluralistic society; life competency skills' (p.22).

Analysis of curriculum guides received from Australian State Departments of Education supports this conclusion. Table 1 illustrates the range of topics most frequently found in subject areas incorporating a human relations strand. However, State curriculum guidelines, even when detailed in their suggestions for topics and activities, are only guidelines, subject to local school interpretation and teacher modification.

In New South Wales, for example, the Health Studies primary syllabus states that the following 12 concepts are to be included in all programs: competition, consumer health, fitness, growth and development, interpersonal relationships, leisure, mental health, movement and dance, nutrition, play, safety, and social responsibility. However the syllabus continues: 'The twelve concepts, while mandatory, may not necessarily be given equal weight in programming'.

At the secondary level, the New South Wales Health Education syllabus 'recommends very strongly' the inclusion of some of the topics listed above plus the peer group, family life, and drug abuse and use. It also declares that 'health programs will vary from school to school'.
South Australia's Health Education Teachers' Handbook Years 8–10 stresses: 'It is not intended ... that teachers will use all the suggested activities, nor will all the aims and objectives be seen as relevant or valuable for all students'. Concepts similar to those of New South Wales are recognised as essential components of a health education program. These include sex and family life, ourselves and others, use and abuse of drugs, consumer health, mental and emotional health, disease and disability, food, rest and activity, environmental health, safety, work and leisure.

Western Australia's Health Education Kindergarten to Year 10 syllabus sets out four health streams: community and environment; mental and emotional; physical; and societal. Under the mental and emotional health strand, contents include:

- communication
- human sexuality
- family life
- parenthood and marriage
- self-concept
- human relationships
- work and leisure
- goal setting
- decision making
- values awareness
- stress and its management
- sexual assault
- individual needs and differences

The Victorian Ministry of Education (1985) document, *Decision-making in Health Education: A Guide to Curriculum Planning for Schools*, is careful to emphasise that 'neither the policy nor program is prescriptive; it is provided merely as an example ... each school community will have to determine what they will teach'. Eleven sub-concepts repeat the same content patterns as in the other States. Within the unit on 'family' in the Health syllabus, classroom discussion points include: How and why do the roles in families change?; How do family members communicate?; When your family situation is hard to handle — positive options.

A Growth and Development sequel in health education offered in the Northern Territory at both primary and secondary levels encompasses family structures, lifestyles and major events, physiological and physical changes in the human body, sexuality, reproduction, friendships and self-awareness.

Social Studies, particularly at the primary school level, incorporates many of the concepts of human relations education. For example, the general aims of the Social Studies curriculum in Queensland include the following:

To develop understandings of human relationships between individuals and groups in society as a whole ... To develop the social and academic skills, understandings and attitudes that will enable the individual to evaluate his own social growth in a changing society and to accept the responsibility of active participation in the life of the community.

(Queensland Department of Education, 1978)

Home Economics syllabuses in every State also encompass many of the topics basic to human relations education objectives and concepts. In addition to the traditional segments on textiles and nutrition, Home Economics usually incorporates units on management and consumerism, community, and personal and family relationships. South Australia labels one of its units...
'lifestyle', which explores decision-making strategies, influence of peers, media, family, community; technological impact; personal and social limitations on choices; varieties of lifestyle and options in the community; and changes at different stages of the life cycle. The 'personal and family relationships' unit of the Victorian Home Economics curriculum focuses on: personal development and needs; hygiene; relationships — peers, family and community; family roles and responsibilities, child care and child development; community resources; and topics such as unemployment and multiculturalism.

Other areas of the curriculum that incorporate relevant aspects of human relations education include the various Transition to Work and Participation and Equity programs, career education, drug and alcohol education courses, and consumer education courses. In these courses the development of self-esteem and the acquisition of adequate communication, decision-making and problem-solving skills are emphasised. For example, Tasmania's Transition Education programs comprise 'work experience programs, career counselling, leisure education courses, health education courses, development of job-seeking skills, personal development activities and the promotion of self-awareness' (Commonwealth Schools Commission, 1981, p. 97).

The Religious Instruction class is (still) often the area where values, decision making and family and peer relations are discussed. Although the religious context dominates most of these courses, this excerpt from a Religious Instruction syllabus unit on 'being a whole person' illustrates the human relations perspective of the content:

Ask the students to talk together in pairs to list ways of referring to other people which might be described as snobbish, pejorative or a 'put-down', e.g. 'Hey you!'; racist or sexist terms; and ways older students sometimes tease Year 8 students. What attitude is implied in such ways of speaking, e.g. about the dignity or worth of the people concerned?

(Queensland Department of Education, 1982)

It is important to note that the topics selected as representative of human relations concepts are not meant to be exhaustive. Drug and alcohol education could have been an additional topic since it is often discussed in relation to concepts of self-esteem, decision making and peer pressure.

Associated concepts and objectives are also an integral component of what is known as the 'hidden curriculum' which Middleton (1983) refers to as 'those social realities transmitted to students through the patterning of social relations in bureaucratic structures' (p. 185). The hidden curriculum manifests itself in the administrative and organisational functioning of the school, in discipline policy, classroom management and teaching practices, and the processes of interaction among the school population of students, teachers and administrators.

Another sense of the hidden curriculum described by Middleton refers to those areas of knowledge and assumptions which 'although not intentionally taught, are in effect learned' by the process of being omitted from curriculum, syllabi and classroom activities. This facet of the hidden curriculum was raised by the Commonwealth Schools Commission in its 1978 Report for the Triennium: 'The areas of personal relationships and sexual behaviour,
of occupational choice and of sex roles are largely excluded from the overt curriculum, leaving the influence of the hidden messages conveyed in school and society to work unexamined and unchallenged' (7.13).

Since the publication of the Commonwealth Schools Commission report, *Girls, Schools and Society* (1975), a number of State and Commonwealth initiatives have been undertaken to counter both covert and overt forms of sex discrimination which are reflected in curriculum content and school organisation. Most State and Territory education departments have appointed Equal Opportunity Officers responsible for monitoring and implementing efforts to eliminate sex discrimination in schools and to promote non-sexist activities and attitudes in administrative policy and curriculum. Projects to develop non-sexist resources and materials have been funded by the Commonwealth Schools Commission.

Pastoral care programs, introduced in many schools to achieve the objectives of human relations education, are designed to provide supportive structures and an environment of mutual respect to facilitate positive student–teacher and peer group interaction. Batten (1983) reported that among the aims of pastoral care programs in nine schools were: the development of trust, leadership training, the teaching of conflict and decision-making skills, and encouraging students to express concerns and feelings to adults and peers.

According to comments from teachers and principals, pastoral care programs can take the form of homeroom teachers setting aside time for classroom meetings and discussions that focus on the emotional and social needs of students, including peer relationships and self-esteem, or the assignment of individual teachers to small numbers of students to act in an advisory capacity. School guidance counsellors are often involved in orientation programs, forming camps or small group activities that teach relevant skills or explore concerns. Peer group counselling and tutoring are other examples of pastoral care activities. In some schools pastoral care programs were instituted as a way of strengthening students' feelings of belonging and reducing their feelings of isolation as they moved from primary school into the comparatively impersonal secondary school environment. Several teachers interviewed indicated that the human relations courses in their schools grew out of the recognition that the aims of the pastoral care program needed to be reinforced and expanded in the curriculum.

In summary, the most frequently encountered topics in curriculum guidelines incorporate the central concepts of:

- understanding self and development of self-esteem;
- achieving responsible and satisfying interpersonal relationships;
- dynamics of marriage and family life;
- human growth, development and sexuality;
- enhancement of life competency skills — for example, communication, decision making, problem solving;
- acquiring personal/home management skills of health, safety, consumer knowledge.
Provision of comprehensive human relationships curriculum guidelines does not guarantee that the aims and objectives will be implemented in any individual school. More sensitive or controversial themes may be ignored or brushed over lightly. Competing schedules for subject time, teacher confidence and competence or community pressures will affect how thorough and widespread programs are in any locality.

Organisation: Where Should it Fit in the Curriculum?

Separate or integrated curriculum

Because the components of human relations education encompass notions of personal development and interpersonal behaviour which defy easy definition or categorisation, aspects of human relations education can take a variety of forms in any school curriculum. They may be infused into any number of discrete subjects, or taught as a specific configuration of learnings under their own heading, or incorporated into the general dynamics of school policy and interactions between students and teachers.

'Personal Development is not a new subject field but rather an extension of other subjects. As such it is possible for many aspects to be dealt with within the framework of other curricula areas in a normal part of day-to-day work in those lessons' (New South Wales Department of Education, Contact 6). The Royal Commission on Human Relationships (1977) concluded: 'Education for human relationships should aim to be an integrated part of education in all subjects at every stage and level'.

Sheek's (1984) survey of family life education in the United States found that programs were both integrated into other subject areas and taught as separate courses. In the 44 States that offered family life education, it was taught most frequently as part of Health, Home Economics, Social Studies or Science. None of the 31 American state policy statements on family life/sex education analysed by Kenny and Alexander (1980) recommended that instruction be provided as a separate course, with the majority advising that a human relations component be integrated into the subject areas of Health, Home Economics or Science.

At the primary level in Australian schools, human relations topics generally appear to be integrated into Health or Social Studies. For example, the Queensland syllabus in Social Studies for Grade One unit on the Child as a Member of the Family Group ‘encourages classroom discussion on the changes that take place in a family when a new baby arrives or when grandparents come to live with the family’. Themes of change and decision making are incorporated in the Western Australian Social Studies syllabus, with changes over time in family size, composition and leisure activities forming part of this topic. The recommended Health Education syllabus in Victorian schools for Years 5–6 treats the issues of challenging traditional sex roles, crushes, infatuation, hero-worship and love, and dealing with emotional changes at puberty in the ‘myself and others’ category.

At the secondary level, human relations topics may be integrated into other curriculum areas or be dealt with as a separate subject called Personal
Development, or Life Skills, or Human Relations. Table 1 shows where topics are located in the various subject areas.

Connections between disparate subject areas and the themes of human relations are spelled out in several curriculum guidelines. The Personal Development curriculum in New South Wales lists points at which human relations topics can be introduced that are relevant to particular content of the subject itself. For example, sections of the Mathematics syllabus are related to the Personal Development program where statistics like the normal curve 'can initiate discussion of individual differences in size, weight, intelligence etc.'; or 'the use of English Literature to involve students making personal and social judgements coincides with the aims of Personal Development' (New South Wales Department of Education, Contact 6).

There are, however, a number of concerns associated with some definitions of an integrated approach. If the introduction of human relations topics is reliant on an issue 'coming up' in discussion during an English or History class, for example, it may never get addressed. Even when a topic is raised or reference made to the relevant issue, the pressure to cover the subject syllabus may be so great that the point could be glossed over or discussion limited. On the other hand, the point has been raised that traditional subject matter may be distorted to accommodate a human relations focus. If integration of human relations means that it is treated as a separate unit within a subject such as Health, which appears to be the common definition, these arguments are less valid.

Among the advantages of establishing a specific course in human relations education, is the greater assurance that essential learning content and processes would be treated in depth, and the greater likelihood of staff assuming this teaching responsibility of being able to obtain appropriate professional skills. Like any other subject, the content of human relations education requires specific knowledge and skills and cannot be taught effectively by 'any teacher'.

For these reasons, the Health Education Study Group Report (1978) concluded: 'Where time allocation is left to the discretion or whim of individual teachers, or as an adjunct to a social theme, or as a wet weather sports afternoon alternative, the health education of students is considered to suffer' (p.17). Indeed, it is not uncommon for schools to relegate human relations education to several sessions on sex education and peer relationships conducted by voluntary organisations like the Family Planning Association or Family Life Movement. These sessions may be part of an after-school program or connected with subjects of Science, Home Economics or Health.

The tendency for only girls to be involved in home economics and parenting courses was stressed in the recent review of Home Economics in Australia (1980): '... the traditional acceptance of child rearing and family life as largely female responsibilities has placed home economics education in an ambiguous position in Australia at this point in time. Teachers and students have been, until very recently, all female, and programs of study and resource materials have been directed towards female interests' (p.44). In 1984, 91.9 per cent of students taking HSC level Home Economics in Victoria were girls.
The recommendations of the Home Economics review emphasised the importance of ensuring that both boys and girls be provided with experiences in education for parenthood and family life: 'Submissions supported unanimously the inclusion of child development, human relationships and family life education programs for all children boys and girls in education programs ranging from pre-school through primary and secondary levels' (p.44). If, as noted earlier, young people are growing up in smaller families where there is little opportunity to experience the care of babies, then participation in child care courses could be an important educational requirement for both girls and boys.

Other schools consider human relations education is dealt with adequately in pastoral care programs where teachers are responsible for monitoring the social, emotional and academic needs of students on an individual or small group basis. Sometimes teachers take a regular 'home-room' period where discussions on student concerns are initiated. Guidance officers may also have responsibilities for organising programs or working with classes, teachers or small groups of students on peer relationship issues.

A distinction may also need to be made between specific human relations topics like sexuality or types of families, which are a component of a course or unit within a subject, and the broader aims of human relations education, such as the elimination of stereotyped attitudes toward men and women, which must be incorporated throughout the curriculum if there is to be the desired impact.

Arguments in favour of an integrated approach emphasise that the objectives, content and processes have an interdisciplinary base that, if ignored, would defeat the principles associated with human relations education. The following is another aspect of the integrated approach:

Human Relations Education is not limited to the formal teaching program of the school. Great importance is also attached to the opportunities for such learning experiences provided by the informal curriculum (extra curricula activities, clubs, sport, form activities, camps etc.) and the hidden curriculum — i.e. the whole ethos established by the atmosphere of the school, its code of discipline, the prevailing standards of behaviour, the attitudes adopted by staff towards students, the values implicitly and explicitly asserted by the school's mode of operation.

(Presbyterian Ladies College, Victoria, 1981)

As summarised in Table 1, analysis of responses to this survey and interviews with education department administrators indicate that schools generally combine both separate and integrated approaches to the teaching of human relations education.

Grade levels

Analysis of questionnaire results and curriculum guides reveals that most human relations topics are taught across all grade levels with the emphasis varying considerably depending on the age of students (Table 3). Many of the Health and Social Studies curricula followed a sequential Kindergarten to Year 12 format for introduction and focus of concepts.
<table>
<thead>
<tr>
<th>Topic</th>
<th>SA</th>
<th>VIC</th>
<th>WA</th>
<th>NT</th>
<th>QLD</th>
<th>NSW</th>
<th>TAS</th>
<th>ACT</th>
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<tbody>
<tr>
<td>1  Peer relationships</td>
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<td>2  Communication skills</td>
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<td>3  Values &amp; decision-making</td>
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<td>4  Self-esteem</td>
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<td>5  Stress management/conflict resolution</td>
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<td>6  Family types &amp; functions</td>
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<td>7  Gender roles &amp; stereotypes</td>
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<td>8  *Parenting</td>
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<td>9  Marriage</td>
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<tr>
<td>10 Divorce/remarriage</td>
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<td>11 Community &amp; the family</td>
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<td>12 Ageing &amp; death</td>
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<td>K-3 (incidental) 4-12</td>
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<td>13 Growth/development in males &amp; females</td>
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<td>5-12</td>
<td>K-12</td>
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<td>K-7 (general patterns) 8-12</td>
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<td>K-3 (incidental) 4-12</td>
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<td>15 Attitudes &amp; values about sexuality</td>
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<td>18 Money management</td>
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<td>19 Consumer education</td>
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* At secondary level refers to a course in parenting or parentcraft in most cases
Topics related to the development of self-esteem and interpersonal relationships skills are found across all grade levels in Australia as are references to family life, although some aspects of family dynamics (such as divorce) may not be discussed until the upper primary grades in Victoria, Northern Territory and Tasmania, or in secondary grades in New South Wales. Some aspects of sex education, such as contraception, sexually transmitted diseases and general sexuality, are not introduced until upper primary or secondary grade levels: guidelines in New South Wales state that human reproduction should not be introduced before Grade 5, while Queensland leaves all sex education to its secondary out-of-school hours Personal Development Program.

Some apparent anomalies may be related to semantics. Respondents showed obvious differences in their interpretation of what a topic could encompass. For example, while ‘ageing and death’ does not appear until later primary grades in some States, the loss of a pet and the presence or absence of grandparents are subjects found in primary Health and Social Studies syllabuses in those same States. As another example, ‘marriage’ and ‘parenting’ are not included until Grade 8 in several States, although the primary grade Social Studies and Health syllabuses show that the concepts of marriage and the roles of family members in child care are points considered. In this case ‘parenting’ and ‘marriage’ may have been considered to belong to a marriage preparation or practically oriented parent craft course rather than to general themes of family life and roles usually included in primary grade agendas.

Similarly, references to different family types and changes in family composition are mentioned in all primary Health and Human Relations or Social Studies syllabuses, although South Australia and New South Wales leave discussion of divorce and remarriage to secondary grades. Yet it is difficult to imagine that living in a stepfamily or single-parent family would be ignored in any discussion of family types with primary age children.

Again, although explicit sex education topics are usually located only at the upper primary or secondary grades, discussions about differences between girls and boys, the birth of babies and aspects of physical growth and development are integrated into many primary health syllabuses.

The policy of waiting until secondary level to introduce sex education is criticised by a number of researchers (Gordon and Gordon, 1983; Goldman and Goldman, 1984) who point out that many students leave school before they are able to take advantage of sex education courses. Other arguments put forward for providing age-appropriate sex education topics at primary levels are that some children mature physically and sexually by the upper primary grade, that children are exposed from an earlier age to sexual images via the media, and that sexual experimentation and sexual abuse occur at a young age.

A number of education theorists (Goldman and Goldman 1982; Sampson, Northfield, Leger and Sargeant, 1982; McCarthy and Gordon, 1984) argue that issues of sex roles and sex role stereotyping are an integral component of developing attitudes and values about sexuality. These are topics that usually do not appear until Grade 5 or above even though, as Goldman and
Goldman (1982) point out, young children frequently express negative and even hostile opinions of the other sex from an early age.

Because what constitutes specific learnings of many human relations concepts depends on variable definitions and interpretations, it is not possible to say with accuracy at what grade levels any particular topic is introduced or featured. All that can be said is that most of the designated topics, with the exception of explicit sex education, could be taught at any point in grades K–8, although the sequence and emphasis would vary grade by grade.

**Method: How Should it be Taught?**

**Strategies**

Content guidelines present a number of teaching strategies that can be used to explore human relations topics. The choice of approaches will be mediated by students’ ages and levels of ability, objectives and content of the lesson, teacher confidence and skill, and school policy and guidelines (New South Wales Department of Education, Contact 4).

Techniques frequently mentioned in curriculum guidelines and course outlines are: role play, simulation games, brainstorming sessions, interview and survey, constructing collages, debate, drama, situational or moral dilemma stories, and use of audio visual materials including film, overhead transparencies and audio tapes. Discussions in small or large groups, as the main strategy or in conjunction with all the other approaches, dominates.

Paper and pencil exercises in the category ‘I learned that I . . . ’, ‘Five things I like about myself . . . ’ or ‘My favourite things are . . . ’ appear in all compilations of classroom activities involving self-esteem. ‘Stimulus stories’ are often used in moral reasoning and problem solving lessons: each story poses a moral dilemma or difficult situation (for example, shoplifting or cheating) and students explore the consequences and possible alternatives available to the characters under the circumstances.

Role playing serves a similar function in that students have an opportunity to try out or practice different responses to problems from the perspectives of their own reactions and of the others involved. Situations that lend themselves to role playing could involve telling a parent you have failed a test, how to accept or refuse an invitation, going for a job interview, or being pressured by a friend to play truant from school or to try drugs.

Constructing collages from magazine advertisements is a technique commonly mentioned in lessons on sex roles. A class may be instructed to put together a picture showing how men and women are portrayed in different activities as a trigger to discussion of gender role stereotyping.

Teaching strategies, then, will be as diverse as the resources and materials available or teacher imagination and skills allow or are encouraged to be.

**Resources**

Education libraries and resource centres in all States are sources of instructional materials for use in human relations education. A number of teacher
journals (for example, *The Educational Magazine* and *The Australian Teacher*) contain suggestions for activities and advertise materials for use in the classroom.

The Commonwealth Schools Commission Curriculum Development Centre (CDC) in collaboration with teams of practicing teachers from all States developed the Social Education Materials Project (SEMP), themes of which include: people and change, family, social control and conflict, racial and ethnic relations, community study, the consumer in society, and decision-making processes and government. Within these units, topics explored include family conflict, gender role stereotyping and moral dilemmas relevant to teenagers. The materials lend themselves to incorporation in many subject areas and have been used as a basis for some human relations courses. Forthcoming projects from CDC include materials aimed at improving the education of girls and a course on decision making for 11-15 year olds.

The Australian Council for Educational Research (ACER) produces and reviews curriculum materials. It acts as sole distributor of American Guidance Service kits which include Systematic Training for Effective Parenting, Towards Affective Development and the Coping With series. These expensive kits have to be purchased by schools. ACER is developing a series of materials for parents to increase the avenues for parent-child-school involvement in learning.

In most States, a Curriculum Branch within the Department of Education publishes materials for use throughout that State's school system (Table 2). Most of the relevant human relations materials produced at State level emanate from the Health, Social Studies or Science curriculum branches, but other branches may be responsible for producing supportive materials requested by specific curriculum units. For example, South Australia's Educational Technology Centre produces audio-visual materials called Pic-A-Pacs, Pic-A-Prints and Pic-A-Projects which contain film strips, overhead transparencies and other auxiliary items. The set titled People and Emotions, for example, would be relevant to human relations topics.

Several States have established a separate curriculum unit that concentrates on human relations. In New South Wales the Personal Development Unit is responsible for developing curriculum materials and providing technical assistance to regional coordinators, schools and teachers. A series of 21 'Contact' booklets covers a wide range of concepts and activities beginning with information on initial planning of the unit, preparation of the school and the community with model letters to parents and outlines for holding parent meetings, ideas for allocating time within the total curriculum, and teacher techniques such as leading group discussions. Several volumes are devoted to annotated bibliographies of films and books. Detailed lesson plan suggestions in a theoretical context and background are contained in the series on the topics: self-esteem, the family, lifestyles, multiculturalism, effective communication, beliefs, values and attitudes, and strands of personal development. Recent additions to this series include Ideas for Education about Human Sexuality for Years 5 and 6, Ideas for Drug and Alcohol Education for Years 5-8, Stress Reduction with Young Children and Ideas for
Teaching About Non-violent Relationships. Additional resources such as transparencies and stencil masters accompany selected units in this series.

Several times a year the unit also publishes a Personal Development newsletter containing articles of general interest like 'Children's attitudes towards illness' along with selections of classroom activities and teaching strategies. This newsletter is distributed to regional personal development coordinators who duplicate them for distribution to high school principals.

Although there appears to be no dearth of basic curriculum guidelines and associated materials at the State curriculum department level, it is not possible to determine how effectively these materials are distributed to individual schools. Many of the recommended books and audio-visual resources are expensive and may be beyond the means of some schools. How well a regional lending library approach works is not known, nor whether exchange of materials on an interstate level is common. Presumably every school has a limited budget for materials which must be apportioned among competing subjects. Whether human relations resources are a priority item may depend on the enthusiasm of individual teachers and principals and the status of the subject within the school community.

Regional consultants are also an important resource. One Victorian health and human relations consultant produces a newsletter which contains suggestions for classroom activities and reviews of new materials. When his part-time schedule permits he also runs parent meetings and in-service workshops for teachers. Accessibility to a consultancy service may determine whether or not a school decides to initiate a program.

A number of teachers mentioned the lack of Australian materials. In this regard, the Australian Institute of Family Studies published a 'Directory of Australian Family Studies Films and Videos' that are available on loan from the National Film collection.

**Participation of outside agencies**

Any discussion of resources must include reference to community agencies which assist in planning and implementing programs, provide lecturers with expertise in the area of Personal Development (especially sex education aspects) to conduct classroom sessions, and which run parent participation evenings to help parents with the task of providing sex education to their children. The major agencies involved in these programs are the Family Planning Association, the Family Life Movement and Centrecare.

In 1984 the New South Wales Minister for Health gave a grant of $130,000 to the Family Planning Association (FPA) in that State to provide free programs to schools, including teacher training courses. Services were provided to 55 schools and 6,278 students. These programs consisted of four to six sessions covering the areas of relationships and decision making, sexuality, social and emotional aspects of puberty, pregnancy, contraception and sexually transmitted diseases, and the anatomy and physiology of reproduction. Included in this program was education of special school staff about the particular needs of young people with intellectual disabilities.
The Family Planning Association in all States encourages teachers and school administrators to include these topics in an overall curriculum on human relations rather than invite FPA to 'do' sex education. At the high school level in Tasmania, for example, FPA sessions are provided as part of Science, Health and Physical Education, Living Skills, Personal Development, Transition Education, English and Religious Studies. Teacher in-service education is a priority activity of all Family Planning Associations.

In Tasmania, all Catholic schools and 67 State schools in 1984 participated in Centrecare's Family Life Education Program which requires parent participation in the sessions. This program consists of one session a year for the various grade levels focusing at the primary level on Families and Human and Animal Beginnings, How Babies are Born and progressing to puberty and positive aspects of sexuality for the higher grades. Nationally, the Family Life Movement of Australia conducted 2266 programs for students in State and Independent schools in 1984. Parent participation is the keynote of many of these programs at the primary level. Sessions with parents focus on family fun and cooperation, communication and human reproduction. At the secondary level emphasis is on self-esteem, communication, relationships and human sexuality.

While some of these agencies receive funding for school programs from the Departments of Health or Education in their State, several organisations mentioned that schools are facing funding restrictions and cannot afford the fees charged to provide sessional educators.

The Childbirth Education Association, Nursing Mothers’ Association, Marriage Guidance Association among other organisations may contribute literature or participate in class discussions in courses.

Teacher Preparation: Who Should Teach it?

Community acceptance of school programs often depends upon assurances that the teachers of human relations education are qualified and experienced (Health Education Study Group, 1978; Sheek, 1984). The presence of qualified staff is also often the key factor in whether or not a school will introduce a human relations component into its curriculum. Typical remarks made by school principals were:

'We had a program until last year when the teacher who had been teaching the course left and there was no one else who was qualified to replace her.'

'Yes, next year we will begin a program because we will have two teachers who will be qualified — they're doing the in-service training course.'

'Yes, we have had a program going for three years now — the teacher who takes the course is very experienced and does a wonderful job.'

Other principals, mainly at the secondary level, complained that staffing restrictions precluded releasing teachers from their subjects to teach human relations. Sometimes the problem was finding a teacher confident or comfortable enough to accept the assignment even when training was offered.
'Qualified', however, appears to be more a subjective than an objective criterion as applied to human relations education teachers, with personal attributes often being considered as important as specific professional background (Kenny and Alexander, 1980). This viewpoint is summarised in the New South Wales Statement of Principles on Personal Development in Secondary Schools, 1974:

It is well-nigh impossible to define the qualities desirable in teachers to be involved in the program. To attempt to define requirements would almost inevitably exclude on some grounds people who would be valuable in the program. One would look for such qualities as social and personal maturity, sensitivity to the needs and problems of young people, a respect for their opinions and those of other concerned adults, a willingness to give serious thought to the most effective ways of meeting their responsibilities and a readiness to cooperate with other people also concerned with the education and welfare of young people. The program would be best served by teachers having the desired qualities who are also volunteers. (p.13)

While this statement recognises desirable personal qualities, it does not address the question of relevant academic background. Outside of the standard primary or secondary subject teaching certification requirements, State Education Department guidelines do not mandate specific professional qualifications for teachers of human relations education. Although all States make provision for in-service education in this area, few make it compulsory for teachers to take the courses as indicated by a Western Australian response to the survey question, 'Are teachers of human relations/family life programs required to undertake special training?': 'They should be, certainly. But it is not compulsory as part of teacher education and courses are only available during out-of-school hours'.

Queensland requires teachers of the out-of-school hours Personal Development Program to undergo six weeks of in-service education, with teachers who volunteer for the program working full time in that capacity. Victoria's 1982 Health and Human Relations Education Guidelines stated: 'The Education Department will require teachers of Health and Human Relations to undertake relevant in-service training' (p.7). A New South Wales (1981) policy statement, Personal Development in the Primary School, requires that 'the Principal ensures that the teachers are adequately prepared both personally and professionally, to teach these units' (p.2).

Provision is also made for teachers to receive in-service training under the auspices of volunteer agencies and external institutes. In most States, for example, the Family Planning Association (FPA) is active in providing teacher training. Overall, the 1983–84 Annual Report of the Australian Federation of Family Planning Associations reported conducting 49 specific teacher training workshops. This did not include consultations with individual or team teachers as part of the planning sessions for the 1576 school programs run by the FPA in 1983–84.

In Victoria, the Social Biology Resources Centre (SBRC), now funded through the Health Commission, has played a unique role in the training of teachers in health and human relationships education, conducting comprehensive workshops on curriculum planning and the development of per-
sonal skills and competence for teaching in this area. Between 1982-84, 952 primary and secondary school teachers and 562 school counsellors, consultants and other educational specialists participated in SBRC workshops.

In 1978, the Health Education Study Group highlighted the absence of 'courses in Australia offering at degree level (or indeed in most cases at any level) which specifically meet the needs of health educators' (p.30). Since that time a number of colleges of advanced education and universities have instituted degrees or post-graduate diplomas in Health Education, first pioneered in Western Australia. Melbourne College of Advanced Education, for example, has established a Graduate Diploma in Human Relations Education. Degrees or diplomas leading to certification in teaching Home Economics include several comprehensive units on family dynamics and human relationships.

Most teacher training institutions in Australia now offer units on health, family sociology and human relationships/interpersonal relations in their curriculum: these may be of an elective nature, or they may be a component of a Psychology or Social Studies unit. The Psychology Department at Melbourne College of Advanced Education runs a vacation program elective in human sexuality four times a year for credit as part of its Diploma in Education; Sydney College of Advanced Education undergraduate and graduate diplomas for primary and secondary teachers require a unit on health and personal development; a South Australian College of Advanced Education is currently reviewing its curriculum and anticipates a human relations strand covering issues of sexism, multiculturalism and interpersonal relationships to be part of its proposed core curriculum; and Canberra College of Advanced Education was among the first of the institutes to offer a Bachelor Degree in Health Education which includes a substantial study of communication skills in relationships.

Catholic institutions of teacher preparation also offer a broad range of courses in the human relations area. The Catholic College of Education, Sydney, offers nearly 20 courses with titles such as: Human Development Sexuality in Christian Education, Skills for Interpersonal Relationships, and Human Development.

Discussions with staff at selected institutions around the country revealed mixed opinions about how much priority would be given to subjects in human relations in overall pre-service teacher preparation. All staff contacted agreed that there wasn't enough space in the present allotted course structures to include the number of subjects now deemed essential for adequate teacher preparation, and that subjects in the human relations category do not have the same status as 'academic' subjects when it comes to scheduling decisions. However, interest is increasing as more social education demands are made on teachers in schools.

Teachers of human relations education do not presently have any typical educational background. For the most part, a willingness to take on the assignment combined with a sense of confidence in handling sensitive issues seems to be the essential requirement to become the human relations teacher in most school systems. Either prior to or after assuming this responsibility most teachers take advantage of opportunities for in-service training.
Bakalars and Petrich (1984) explore the relationship between characteristics of primary school teachers and the extent of time devoted to family life education in the classroom. They conclude that teachers with course work in human development and family studies, in conjunction with higher levels of education and teaching experience, were more likely to include family life concepts in their teaching. These findings, together with comments of principals and curriculum coordinators on the necessity of having qualified staff, lend support to the idea that increasing the requirements for human relations subjects at the teacher education level would improve the chances of having related topics taught in primary schools.

Courses in Psychology, Sociology, Biology, Health and allied subjects are recommended background for teachers of human relations (Health Education Study Group, 1978; Sheek, 1984). In-service training would be a valuable adjunct but not sufficient qualification for teaching a human relations course.

Evaluation: What Should be its Impact?

Few schools incorporated formal evaluation in their programs. Where evaluations did occur they took the form of student self-report exercises which asked what aspects of the course were most interesting or helpful and what components were least appreciated. Teachers invariably reported that the relationships and sex education segments of the subjects were rated the highest.

Many of the teaching syllabuses for health education contain a section on evaluation strategies. These range from traditional tests to recall facts, dramatisation to demonstrate concepts learned, and the more popular student checklists of how they assess their own behaviour — for example: 'How often do I . . . share materials with others, take my share of responsibility, consider the feelings of my classmates?' Similarly, models are provided for teacher assessment of the same social and behavioural learnings, but are based on observation.

Evaluation of health education programs carried out by Departments of Education (Victorian Ministry of Education, 1979, 1981; Queensland Department of Education, 1984) have concentrated on the prevalence and format of health education courses in schools, the adequacy of curriculum guidelines and the scope of course content. In 1984, the Victorian Ministry of Education canvassed the health interests of students (Ellis, 1984).

Rivett (1979) poses the dilemma inherent in evaluating objectives that 'embody thought, feelings, actions . . . or outcomes that may not be apparent for another five or ten years' (p.9), and Kirby (1980) acknowledges the 'formidable task' of documenting change in attitudes about self-perceptions, decision making and interpersonal skills in sexual and social behaviours.

Some measure of whether the objectives of human relations education courses have been met may occur in external observations of general student behaviours and attitudes. Rivett (1979) offers several examples: diminution of sexist or pornographic grafitti on school property, reduced
incidence of teenage pregnancy or venereal disease in the student population, and greater sensitivity and awareness in discussing sex-related topics in other subjects. Other teachers have added to this list an overall impression of a more positive atmosphere in relationships between students and between students and teachers, a result difficult to measure.

A number of overseas studies have attempted to evaluate the effects of school sex education programs (Kirby, 1980; Parcel and Luttman, 1981; Kahn and Richardson, 1983). Kirby (1980) found that for high school students sex education courses substantially increased knowledge about sexuality, increased the tolerance of students toward the sexual practices of others, but did not appear to change students' beliefs about their own sexual behaviours.

These studies do not support the contention of those who believe that sex education courses encourage teenage sexual activity; on the other hand, Kirby (1980) points out the studies also fail to prove that sex education reduces sexual activity. There is evidence, however, that the provision of units on contraception within a sex education program will increase contraceptive use on the part of those who do engage in sexual activity which can lead to a reduction in teenage pregnancy (Kirby, 1980; Goldman and Goldman, 1984).

Provision of sex education within a human relations context usually has the goals of providing accurate information, making students aware of the consequences of sexual activity and enhancing students' self-esteem to enable them to better resist peer and media pressure and to avoid engaging in behaviours that may be contrary to their values or feelings (Dickman, 1982; McCarthy, 1983; McCarthy and Gordon, 1984). A review of 100 family life courses in American schools (Sheek, 1984) reported that almost all the schools believed their programs had the following positive effects on students, cited in order of frequency:

1 Increased student awareness
2 Helped students establish and/or maintain healthy personal relationships
3 Increased students' knowledge/information
4 Increased students' understanding of themselves as unique
5 Helped students learn to communicate openly
6 Aided students in learning to clarify values and establish personal codes of ethics
7 Contributed to the postponement of adolescent marriage and to a reduction of teenage pregnancies.

These results are similar to the aims and objectives of human relations education described in Australian curriculums.
Status of Human Relations Programs

Because of its heterogenous character it is difficult to determine the prevalence of subjects, or components of subjects that encompass the content and processes related to human relations. A survey of common themes or topics included in a syllabus does not provide a definitive picture of how schools address the complex dimensions of human relations education. Neither can a checklist of topics ascertain the extent or depth of coverage a specific concept may be given in any individual classroom.

Previous Surveys

Ten years ago when the Royal Commission on Human Relationships (1977) investigated the extent of human relations education in State and Territory schools, it concluded that ‘formal education in human relations is in its infancy’. At that time, New South Wales estimated that 40–60 per cent of the school population received sex education before the leaving age; Victoria, 20 per cent; South Australia, 40 per cent; Tasmania, 60 per cent; Northern Territory, under 10 per cent; and Queensland, nil. Western Australia and the Australian Capital Territory did not provide figures. As the Royal Commission observed, coverage could mean one or two lectures or a more integrated program; emphasis could have been on biological and physiological aspects only, or have included personal development and interpersonal relations; and controversial subjects could have been treated or ignored.

A 1979 survey of Health and Human Relations in Victorian High Schools (Victoria Ministry of Education, 1979) revealed that 83 per cent of schools covered some aspects of health education in a range of subject areas, while 22 schools had a specific subject titled Human Relations.

A study for the Family Planning Association of Victoria on the status of sex education in Victorian post-primary schools (Szirom, 1979) found there was little factual data available on subjects or aspects of the topic offered in schools. Of the 134 schools surveyed, 92 per cent reported that some aspects of sex education, mainly physiological and biological rather than emotional, were covered normally as part of Science subjects.
A response to a 1981 Victorian Education Department survey of adherence to Health and Human Relations Education guidelines after one year of operation disclosed that 63 per cent of the 41 per cent of schools responding offered some form of health and human relations education. At levels 7-10 between 33-49 per cent incorporated elements of sex education, 30-39 per cent family life and 32-42 per cent personal relationships.

Nationally, the Health Education Study Group (1978), convened by the Curriculum Development Centre to advise on priorities in health education, reviewed submissions from all State Departments of Education and reported that ‘if they exist at all, health education programs are irregular, superficial, fragmented and often lack continuity or depth’ (p.17).

Similar inadequacies are reported overseas. In their comprehensive survey of the availability of sex education in all large city school districts in the United States, Sonenstein and Pittman (1984) found that 80 per cent of the districts provided sex education in some form: however, only 26 per cent of the sample touched upon interpersonal topics. Sheek’s (1984) review of family life education at State level in the United States, based on an 82 per cent response rate, showed that the majority of State school systems (96 per cent) taught some form of family life education, with 68 per cent including aspects of interpersonal relationships and family dynamics. Again, the time devoted to instruction and breadth of coverage was not discussed. In addition, because many courses are optional, there is no guarantee that all students in a school are exposed to such instruction.

Current State Practices

Information for the following State profiles was derived from responses to the study questionnaire, interviews with education department officers and consultants, and analysis of policy documents. Additional information was obtained from agencies involved in providing services to schools. Table 2 summarises some of these results.

Australian Capital Territory

The ACT Schools Authority does not yet have a specific policy on health and human relations education. A Working Party is developing a curriculum framework for health education from pre-school to Year 10 which will emphasise ‘attitudes and values around skills of decision making, inquiry, communication and assertiveness’ across broad subject and issue areas. According to a senior curriculum consultant, health education is now receiving greater attention by the Schools Authority, although staff resources are still inadequate. Improved teacher education is considered a vital link to implementing health and human relations programs.

General curriculum guidelines state that schools have a responsibility to provide students with ‘interpersonal skills necessary for getting along with others, establishing social networks, dealing constructively with conflict and taking part in the world of work, leisure and post school life’ (ACT, 1984). Within these broad guidelines each school is expected to determine its own philosophy, emphasis and curriculum.
There is no specific health consultant within the Schools Authority itself although there is one Home Economics consultant. There are no published curricula in health education. The Youth and Schools Section within the Health Promotion Branch of the ACT Health Authority has provided assistance to schools and teachers in the development and implementation of the health curriculum and offered a series of professional development courses through the Schools Authority — for example, Classroom Strategies and Methods of Teaching Health Education. The ACT Health Authority is also developing drug education and AIDS education resources for classroom use. It is the feeling of Health Authority officers that they are sometimes called into the schools in response to a crisis such as drug use or teen pregnancy, whereas their objective is to encourage schools to develop an integrated approach to health and human relations education.

In primary schools health and human relations education topics are generally integrated into the whole curriculum; at secondary level topics such as Lifestyle Studies or Living Skills may be covered in Home Economics or Social Science subjects. Several schools have applied for Curriculum Development Project grants to develop innovative programs such as a Personal and Social Development through Literature course in primary grades and Care Education for Years 7–10. No statistics are available on the overall extent of programs in the schools.

New South Wales

New South Wales introduced a Personal Development Program in 1974. Its concepts, content and processes may be taught as a separate course, integrated into other subjects or even be the focus of a 2–3 day camp program. Usually it is taught 1–2 periods a week at Years 7–10. At the primary level it is more frequently part of the Health or Social Studies curricula. Because it is an optional subject area, no accurate figures on the numbers of schools that include Personal Development are available. Whether it is included in a school’s curriculum depends, according to consultants in the Personal Development Unit, on the priority of individual school principals, staffing requirements and the scheduling of other subjects.

At the secondary level, guidelines on Personal Development in Secondary Schools, The Place of Sex Education were issued in 1974. This Statement of Principles endorsed the recommendations of the Department’s ‘Interim Report on Sex Education’ published in 1972. The guidelines emphasised that sex education should be incorporated into a comprehensive health and personal development program and not be limited to the ‘facts of life’. Cooperation between the school and parents is mandated and parental permission to withdraw a child acknowledged. These guidelines are still operative.

In 1981 the Department of Education circulated guidelines for the introduction of Personal Development Programs in the primary schools. While encouraging the teaching of the broad range of human relations concepts contained in such programs, the guidelines required parent consultation and permission for the inclusion of the human reproduction and sexuality units.
These units were not to be introduced before Years 5-6 and had to be approved by the Regional Director. The role of the teacher and restrictions on the use of external resource persons were detailed.

Personal Development programs are now included as a subject of a total pupil welfare policy. The Discussion Paper, *Pupil Welfare Policy and Principles* (NSW, 1985) emphasises the relationship between personal development concepts and pupil welfare as it is reflected in school organisation and processes. The Student Welfare Policy Statement (1986) and supporting documents emphasise the personal development processes of decision making, valuing and communication.

When the Personal Development Program was introduced into the schools in 1974-75 there was little concerted opposition to the program. This was attributed to the process of extensive consultation with church and community groups. Some resistance was expressed by the teachers’ unions at taking on a social education role and by other groups who objected to the alleged lack of academic content of the program.

Before the sexuality component of a program is implemented in any school, parents must be involved and a consensus reached on the curriculum to be offered. Nevertheless this comment from the questionnaire response is revealing:

Ten years after the introduction of the Personal Development Program, sex education remains controversial. Family breakdown and death are also sensitive issues. The need for teachers to be aware of the sensitive nature of such programs is significant. Parent involvement/consultation is very important — parents see sex education in particular as their prerogative.

The Personal Development Unit produces the comprehensive curriculum guides, *Contacts* (described in an earlier section), as well as publishing a newsletter sent to regional consultants to be duplicated and distributed to schools. In 1974-75 when the program was introduced, the Personal Development Unit had more staff and extensive resources. Consultants were available at the high school level. In 1981 when the program was introduced to primary schools there were regional consultants in each region. Over 1000 primary teachers took in-service training courses in 1982. Now the Unit is smaller; some regions still have consultants, but others just a contact person. Still, staff maintain the Unit receives recognition and plays an active role in contributing to the Department’s orientation toward school policy in the area of pupil welfare.

The Health Education curriculum now contains several units in the human relations area, examples being Growth and Development, Interpersonal Relationships and Mental Health. The Health studies syllabus is being reviewed and will include the areas of sport, dance, physical education, recreation and health education. Health education is a required subject at the primary level. In 1987, approximately 60 per cent of Years 7-10 had some form of health education ranging from two and a half periods a week to several lectures a year. In Years 11-12 health education would be taught as part of other subjects such as Science.

The introduction of the preliminary K-12 health syllabus in 1984 generated interest in in-service education. There are eight regional consultants for
ten regions who also have responsibility for the physical education area. The New South Wales Health Department and the Commonwealth have funded five consultants to the Education Department in 1986 to develop health promotion activities in the areas of drugs, smoking etc. In 1984 the Minister for Health gave a grant to the Family Planning Association to provide schools with free sex education sessions within a human relations framework and for the training of teachers. Starting in the 1970s teacher training institutions offered health education as a major concentration or as a required course in a general accreditation. In recent years Colleges of Advanced Education have offered a human relations component in their education course.

Health Education is considered to be a fast growing subject area, with additional impetus coming from concern over AIDS, drugs and child protective behaviour issues. There is some overlap with the Personal Development Program and combined policy meetings are held between the two curriculum areas.

**Northern Territory**

Guidelines are in the form of aims and objectives set out in the recommended syllabuses for the Unit on Growth and Development within the Health Education curriculum and in the Social and Cultural core curriculum. Growth and Development, a core unit taught in all schools through grades K–10, covers biological, social and emotional aspects of human reproduction and family and peer relationships. Parents may request withdrawal of students from the sexuality component.

Although the main focus of the required Social and Cultural Education curriculum is on social, environmental and geographical history, there are sections on families and interpersonal relationships. Some aspects of the curriculum are taught at all grade levels in all schools although the focus on topics varies considerably from school to school.

Curriculum officers stated that discussion of non-traditional family types is still a sensitive area for primary teachers despite the presence of different family constellations in every classroom. At the secondary level the family and personal relationships segments of the curriculum are considered less relevant by many teachers who are more oriented towards the history and geography content. For example, the section dealing with conflict and conflict resolution is less often related to family and peer relationships than to international relations. The syllabus, revised in 1986, places less overall attention on family and personal relationships as a specific unit, but encourages a thematic approach to multiculturalism and personal relationships.

According to the Northern Territory Secondary Principals Association, the introduction of the Social and Cultural Education curriculum has had the effect of squeezing out Human Relationships courses which several high schools offered at Years 9 and 10 as alternatives to History or Geography.

There has been little community opposition to the curricula described. Curriculum officers, however, believe that inadequate teacher education has
detracted from the effectiveness of the curriculum. In-service training in this area has not received priority in time or funding. In response to the AIDS publicity, there has been a strengthening of the health education component of the curriculum and in-service education. Materials and resources are being developed in cooperation with the Health Department.

Queensland

As described earlier, human relations education in Queensland has a volatile history (Logan, 1980) and debate continues. One Liberal Party survey showed that 19 000 members voted in favour of students receiving sex education during school hours (Brisbane Sun, 2 July 1985), while National Party members have also called for courses on sex education within school hours to combat the increase in abortion, out of wedlock pregnancies, incest, venereal disease and pornography. Supporters of sex education in schools advocate it as part of a broader health course (Brisbane Courier Mail, 22 May 1985).

The current status of human relations education in this State is based on a 1984 Cabinet decision to limit human relations education, particularly sex education aspects, to a voluntary out-of-school hours Personal Development Program for parents and children at Years 8–10. This decision was made despite recommendations of the majority members of a Cabinet-appointed Advisory Council on Human Relations that human relations education be integrated into the total school curriculum in conjunction with an out-of-school hours family education component (Advisory Committee on Human Relations, 1983). The Male Committee recommended a human relations program from grades 4–12 comprised of 30 per cent personal development, 60 per cent interpersonal relations and 10 per cent sexual relationships education.

In response, the Queensland Teachers’ Union has discouraged its members from participation in the program. The Union endorses an in school hours, compulsory and more in-depth human relations course being incorporated into the curriculum in addition to the after hours program. Several Personal Development coordinators claimed that while teachers do nothing to publicise the program or encourage participation they do not actively interfere with a program being introduced. Attendance is voluntary, children taking part must have permission of parents to attend, and parents are strongly encouraged to attend with their children. Each year consists of a preliminary session with parents to introduce the program and provide an opportunity for comments and suggestions followed by three two hour sessions designed for parents and children. The aim of the program is to ‘deal with areas of human sexuality and personal development not normally covered by the existing school curriculum’ (Draft Guidelines for Personal Development Out-of-School Hours Program, 1984).

Year 8 concentrates on physical characteristics and changes in adolescence and human reproduction. Relationships to peers and family are discussed in relation to these physical and emotional changes, but the emphasis is on the physical. Year 9 focuses on the emotional changes of adolescence
and its relation to development of personal and sexual identity. Year 10 emphasises the social development aspects, major issues and concerns in relationships with peers, responsible and irresponsible sexual behaviour, contraception, and moral and legal issues (for example, rape, incest and abortion).

Programs are initiated at the request of the local Parents and Citizens Association in consultation with the school principal. Sessions are conducted by a team comprising males and females. Team members have a teaching background and undergo an intensive four week training period which includes background and theory on adolescent development, family dynamics, and behavioural, social and legal dimensions of sexuality. By 1987, 32 full-time teachers were involved in the program. The Education Department coordinates training and produces materials.

One concern is getting previous year’s students to attend next year’s program. Some students and parents think they have already done ‘sex ed’ and do not see the need to repeat the process.

The Personal Development program is considered a pilot project subject to continuing evaluation. So far, one half of secondary schools have participated with only 25 per cent of eligible students attending the courses. Several regions have waiting lists of schools wanting to participate when teaching teams are available.

Discussions with subject area education officers confirm that many of the topics associated with human relations education outside the human sexuality component could be found in other subjects of the school curriculum. Attitudes and decision making skills are incorporated into the Social Studies curriculum to enable a student to ‘evaluate his own social growth in a changing society and to accept responsibility of active participation in the life of the community’ (Syllabus in Social Studies for Primary Schools Grades 6–7). Family types and the relation of the family to the community are major concepts.

At the primary level Health Education is a required subject and allotted approximately a half hour a week. While the recommended curriculum explores issues of self-esteem, social interaction, coping, and decision-making skills, the curriculum officer remarked that teachers are wary of the themes of self-esteem and personal relationships. At the secondary level Health Education is a component of the combined Health and Physical Education curriculum required at Year 8 and offered in most schools as an elective in Years 9–12. In 1986, 44 315 students took this subject. Family relationships and the place of the family in society are covered in a range of secondary social science electives — for example, 28 190 Year 9–10 students took Citizenship and 3221 students took the Study of Society electives.

A one-semester subject, Family and Society, is a required part of the Home Economics Senior syllabus in most schools: Human Development units occur in Grades 8–10 in Home Economics. In 1986, 33 583 students took Home Economics.

A Parentcraft course taught by the Maternal and Child Health Section of the Health Department is offered as an elective in Years 9–10. The name of the course was changed from Mothercraft to Parentcraft after passage of the
Sex Discrimination Act which required that boys as well as girls should be able to take the subject.

Religious Education is a compulsory subject at primary level for a half hour a week. Within a religious context attitudes, values, decision making and personal relationships are explored.

Senior curriculum officers mentioned the 'hidden curriculum' of behaviour and attitudes, philosophy and practice as a most important element, difficult to quantify in determining the orientation to and priority of human relations education in a school system. They observed, too, that social education courses will never have the status attached to literacy and numeracy subjects although human relations themes are receiving greater consideration in all subject areas.

South Australia

Although the South Australian Education Department has no specific policy on human relations education, policy guidelines are found in the suggested and recommended curricula in health education. The principal curriculum officer for Health/Social Studies estimated that 100 out of 145 high schools and 500 out of 600 primary schools have implemented some aspects of a health education syllabus which includes units on Ourselves and Others, Growth and Development (Years 6–7), Sex and Family Life (Year 10) and Mental and Emotional Health. The Health curriculum, which contains comprehensive suggestions for activities and teaching strategies, is used as a resource by several other States.

Home Economics, with its family life focus, is a common subject at Years 8–9; approximately 600 students, 75 per cent of them girls, took Year 12 Home Economics in 1986. A Child Studies option is a component of the course. A Parenting course for Year 10 has been developed in conjunction with the Child, Adolescent and Family Health Service.

A Social Learning policy document introduced in 1986 sets out guidelines for teachers to examine the development of their own social skills and to reflect on their teaching practices as a model of social learning skills to students. The emphasis of social learning is on group skills such as conflict resolution, communication and decision making. Accompanying the interest in formal programs is a general growth in all schools in pastoral care programs in which teachers meet with 5–15 students to discuss personal and school concerns.

Approximately 80 in-service training sessions for health education teachers are conducted each year. There is a high demand for workshops on social learning skills, pastoral care and AIDS education. Protective behaviours workshops on issues of sexual abuse are frequently requested at the primary level. Staff resources are not adequate to meet this demand. The Family Planning Association and Family Life Movement provide programs at both the primary and secondary level in many schools.

The South Australian Institute of Teachers (SAIT) endorses the provision of sex education, 'on an on-going basis to all primary, secondary and tertiary students' and recommends, 'comprehensive sex education programs within broad health education curricula', along with adequate in-service education for teachers.
Overall, there has been little community opposition to incorporating human relations topics into the curriculum. Parents are involved in steering committees and may be used as resource persons.

Although Department of Education curriculum officers believe health and human relations education is receiving increased attention, staff resources are considered inadequate to meet the demand for teacher in-service education and classroom teaching. The health curriculum officers also have responsibilities for other subject areas. They also believe more schools would implement health and social learning curricula if trained teachers were available. Concern was also expressed that these programs would become a stable aspect of the curriculum rather than a one time response to a crisis in the community.

Tasmania

Personal Development was first introduced as a strand in the secondary Social Science curriculum in 1976. In 1981 a heavy demand by primary schools for Centrecare’s Family Life program resulted in the establishment of an Education Department Committee to explore the introduction of Personal Development in primary schools.

Procedural guidelines were issued in 1984 for the teaching of the Personal Relationships section of the Social Sciences program in secondary schools and for a Personal Relationships unit in Health Education at primary school level. These guidelines left the decision of whether to include the sex education component to individual school principals. Parental permission was required.

In 1987, guidelines for the ‘Teaching of Personal Relationships and Sexuality Education’ were issued as part of the policy document, *Health Education in Tasmanian Schools*, (Tasmanian Education Department, 1987). The guidelines mandate the teaching of a Personal Relationships unit within a broadly-based health education program. They replace the 1984 non-compulsory guidelines for the teaching of Personal Relationships within the secondary Social Sciences course and the Health Education unit at the primary level. Although the provision of personal relationships and sexuality components will be compulsory, parents will still have the option of withdrawing children from these aspects of the health education program and teachers will have to obtain approval from principals before introducing these components.

A Health Education Office within the Division of Educational Programs is developing a curriculum framework for health education to be available in late 1987. Under the Guidelines each school will nominate a health education coordinator who will receive in-service training. A 20-day health education leadership training program will be offered to 22 guidance officers and teachers who will become regional training and support resources in health education for other teachers.

Approximately one third of primary and secondary schools now include a Personal Development strand in Health or Social Science subjects. About 80 schools offer a Year 9-10 elective, The Individual and Society, which covers
factors in social maturity, peer pressure, mate selection, adolescent lifestyles, values, responsibility and sexuality. The entire secondary curriculum is in the process of being revised including the issue of how the new health education curriculum will be integrated.

A Self-Esteem Project, funded under the Commonwealth Participation and Equity Program, was introduced in 1986 to increase the skills of teachers in incorporating self-esteem strategies across all subject. The Self-Esteem Project replaces the WINGS Project developed in 1984 to raise girl's self-esteem as a means of improving their opportunities to make positive personal and career choices. Although time had to be carved out of guidance, homeroom, or classroom periods which created scheduling conflicts, over 240 Year 7-10 girls participated in 1984.

Staff resources for carrying out these new initiatives are limited. Within the Health Education Office there is one curriculum officer for health education and two drug education officers. Program development and teacher training will be mainly through regional and school-based workshops.

The Tasmanian Teachers Federation believes that teachers need additional training if they are to assume responsibility for providing children with learning experiences in the area of decision making (Tasmanian Teachers Federation, 1985). By mid-1987 an in-school teacher training program will begin in the form of a 15 day intensive course for all guidance officers and teachers who will then become the Health Education coordinators in their schools and conduct courses for other teachers.

The Tasmanian Council of Parents and Friends supports the Personal Development program given that adequate school-community consultation takes place. The Tasmanian Teachers Federation has commented that teachers are 'more and more expected to provide children with learning experiences in the values areas, effectively subsuming the role that was previously the domain of the family' (Tasmanian Teachers Federation, 1985).

Victoria

The first Victorian guidelines (Policy for the Promotion of Health and Human Relations Education in Schools) were issued in 1980 and mainly 'encouraged' schools to 'provide appropriate education in Health and Human Relations'. Parent and local school council involvement were basic facets of this policy. A Ministerial Advisory Committee on Health and Human Relations was established to develop guidelines consistent with the then stated government policy on health and human relations.

A Consultative Council for Health and Human Relations Education was established in 1980 to advise the Minister on all aspects of health and human relations education, to promote curriculum development, and to make recommendations on standards for in-service courses for teachers and parents. A Health and Human Relations Unit was set up within the Education Department to provide support services to the Council and to be responsible for implementing the policy and guidelines.

A revised set of Guidelines for Health and Human Relations Education was issued in 1982 and operated until 1984. These applied only to schools that
wished to provide a Health and Human Relations program. Schools were required to establish a school council sub-committee on Health and Human Relations representative of the school community. The guidelines described the functions of the committee, teacher training requirements and suggested curriculum concepts and outcomes for Years 1-12.

The initial introduction of policy statements and guidelines was accompanied by community debate and controversy which centred around the balance in decision-making powers among teachers, parents, school councils and principals. Teacher unions objected to health and human relations subjects being subjected to prescriptions not affecting other curriculum areas (The Victorian Teacher, 1982).

In 1983 the Health and Human Relations Education Unit was replaced by the Health Education Curriculum Committee, and a Curriculum Officer for Personal Development was appointed to develop objectives and strategies.

A statewide review of health education was conducted in 1984 by the Education Department (Ellis, 1984; Peters, 1984). The study explored what students knew or wanted to know about health issues, the views of community groups about the importance of health education, qualities of teachers and the role of parents in health education in the school, and the opinions of regional health education consultants on the implementation of health education.

This was part of the Education Departments' 'curriculum frameworks' review of major curriculum areas from primary to secondary levels. The curriculum framework for Personal Development incorporates six components: Health Education, Physical and Outdoor Education, Textiles and Clothing, Home Economics and Traffic Safety. The Social Education Framework also includes concepts related to human relations. It is up to individual schools to determine how they will integrate the Personal Development and Social Education frameworks into the curriculum.

No mention is made of human relations education in the 1984 Guidelines on Health Education, but reference is made to the school councils' responsibility to 'assess the needs and interests of its students and parent expectations in the area of health and to decide on curriculum policies which reflect that assessment'. The school council must establish procedures for parent and community review of the contents and materials proposed for the program, although the staff and principal of a school are responsible for implementation of school council policy. Although the guidelines state that all students should have the opportunity to receive comprehensive health education, 'a parent may decide not to allow his or her child to take up this opportunity'. Parents are required to give written notification if they wish to withdraw a child from the program.

The guidelines are supported by the 1985 curriculum guide Decision-making in Health Education which contains suggestions on how school councils can assess community and student opinion and describes health concepts and outcomes for Years K-12. Family roles and functions, peer relationships and growth and development in males and females are among the issues addressed. The health education component of the Personal Development
Frameworks document, will be distributed by 1988. It sets out the rationale, recommends teaching strategies, program development, and provides sample activities and materials.

Health is considered a core primary level subject, but Education Department curriculum officers were unable to provide estimates of how many schools had a health and human relations program. The recent survey of Health Education did not assess the occurrence of programs.

A number of regional consultants thought that approximately one third to one half of the primary schools in their regions taught family life and human relations themes as part of health education. In some regions one half to three quarters of the secondary schools would offer a formal health education/human relations subject. Other consultants felt far fewer schools had adequate programs.

Since Home Economics was granted Higher School Certificate status, the number of students taking the subject has increased. In 1986, 7290 students took the subject, 90 per cent of them girls. At this level the syllabus contains extensive units on family dynamics. The course will lose its HSC status after 1988.

Human relations education is also the concern of the Equal Opportunity Unit of the Education Department which runs in-service workshops in schools to encourage the use of materials and curriculum to eliminate sex role stereotyping in all subjects. However, statistics on the number of workshops and requests for materials are not kept.

According to curriculum officers, human relations themes would be integrated into a number of subject areas as well as taught as a separate unit under a variety of names. With the publication of Decision-making in Health Education and Health Education Guidelines, increased interest in the area is predicted with schools initiating or expanding health education programs.

A Senior Curriculum Officer for Personal Development was appointed along with five curriculum officers responsible for each of the Personal Development sub-areas. However, the number of regional consultants in health education has been reduced from nine full-time consultants in 1982 to one in 1987.

Consultants interviewed as part of the Education Department’s health education review (Peters, 1984) agreed that programs at the K-12 level were not well coordinated or sequentially developed because of the low status of the subject in the minds of administrators, teachers, and the school community which results in inadequate allocation of both personnel and material resources.

All the consultants thought students rated health education highly, specifically human relations aspects of sex education, peer relationships and values clarification. Most consultants thought that while parents supported health education, the ‘3 Rs’ were considered more important. In addition parents were perceived to be wary of the controversial relationships issues rated so important by the students.

Curriculum officers and consultants highlighted the need for more pre-service and in-service training for teachers.
Western Australia

Department of Education guidelines on health and human relations education take the form of objectives contained in the Health Education, Social Studies and Home Economics curricula, all of which have been extensively revised in the past few years.

In 1986 a Health Education syllabus, piloted in 100 schools in 1984, was implemented in Years K–10. At the primary level health education is a required subject. At the secondary level health and human relations education is a component of the Department of Education’s recommended Personal and Vocational Education core curriculum strand which is integrated into several subject areas. Implementation is left up to local school communities; however, curriculum officers indicated that the area was a top priority and the Department of Education would encourage schools to incorporate the comprehensive health syllabus into their school curriculum.

In-service training and consultation is available to teachers and schools. The Education Department has consulted tertiary teacher training institutions to ensure that the new curriculum will be considered in teacher training. At present, however, one education department officer volunteered that ‘teachers are not given sufficient training in the specific areas required’.

The Health Education syllabus contains a comprehensive strand on Mental and Emotional Health, with contents covering self-esteem, family dynamics, value awareness, decision-making, human sexuality and parenthood, and marriage. It incorporates the previous Growth and Development unit in use in approximately 80 primary schools. This unit contained the sex education strand which had generated some adverse comment from conservative members of the community (O’Donnell, 1979). Parental permission was required for children to participate in the Growth and Development Unit; now parents may withdraw children from the human sexuality, drug education or ‘other controversial issues’ segment of the new syllabus.

In 1986, Home Economics was taken by 1555 girls and 103 boys at Years 11–12. A Marriage and Family Life course was taken by 2691 girls and 1265 boys at Years 8–10. Approximately 3436 girls and 25 boys took the Child Care elective offered at Years 9–10, while 2639 girls and 30 boys took the Early Childhood Studies course at Years 11–12.

Western Australian education officials consider the priority given to a comprehensive K–10 health education program with its strong human relations component to be a model for other States.
Case Studies

To gain some first-hand understanding of how policy may be translated into practice, human relations classes were observed in 12 State and Independent schools. Classes in four of these schools are described in this section. Because classroom confidentiality is an important component of the class process, schools are identified by numbers.

In all the schools visited, human relationships programs had been initiated by individual teachers who felt the school was not meeting the social or emotional needs of students. For the programs to be implemented, the support of the school principal was critical as he or she often had the responsibility of presenting the program to the school council or Parents and Friends Association. Enthusiasm of the teacher was the main ingredient since all teachers volunteered to teach the subject in addition to responsibilities for other subjects such as Art, Home Economics, or English.

Few teachers had specialised training in Health, Science or Human Relations Education, although all had taken advantage of in-service education programs offered either by the Department of Education or a resource outside the school system. While skills varied considerably, it was apparent that these teachers were committed to the idea that human relations education was an essential element of student education.

Generally, standard curricula were not used — teachers either developed their own outlines or borrowed successful guides from other schools or States. Films were used extensively and values clarification exercises and work sheets from recommended commercial texts were very popular. Speakers and printed materials from agencies such as the Family Planning Association, Anti-Cancer Council, Health Commission and Police Department were important resources.

Support from other teachers on the staff was not universal. In some instances colleagues were reported to be pleased that 'someone was doing it'. Principals were characterised as 'very supportive' to 'I'm left to do my own thing'. For the most part teachers believed students were enthusiastic, although this depended somewhat on what issues were discussed. Personal
relationships and sex education attracted more interest than health-related topics such as nutrition.

Evaluation generally consisted of asking students to write a summary of most and least useful aspects of the subject and of quizzes on factual units (such as reproduction). If more than one teacher was involved, they would meet to exchange ideas or concerns.

School One

School One is a modern coeducational State high school in Victoria located in a pleasant ‘new suburb’. Most of the 800 students come from working class families, among them a substantial proportion from migrant backgrounds.

The Human Relations course has been offered for three years as a compulsory unit in Year 7, and as an elective in Years 9–10. It has its roots in the pastoral care program begun eight years ago when the emphasis was on development of self-esteem and assisting students to acquire the social skills to adjust to a high school environment. The administration supports the program which was approved by the School Council without controversy. Parent involvement is minimal with little interest taken in the Parent Night held each year to acquaint parents with the course outline and materials.

Year 7 Human Relations meets once a week for the entire school year. Course content concentrates on building self-esteem, maintaining positive peer and family relationships, human sexuality and use of recreation and leisure time. Values clarification exercises and films are used extensively.

The topics of Year 7 are continued in Years 9–10 with more in-depth discussion of peer relationships and human sexuality. These classes meet three times a week for the year. Videos and films are among the resources used to extend class discussion, as are current events from the media — for example, articles on incest and rape.

The two teachers involved in the program had participated in in-service education at the Social Biology Resources Centre and Family Planning Association. One teaches English and the other History. They meet regularly to exchange ideas, but there is no formal evaluation of the program.

Class Observation: Year 9 Human Relations

The group consisted of 25 students, two thirds of whom were girls. Class began with a decision-making exercise around the topic of teenage sexual experience, contraception, and attitudes towards sexuality. A story with a moral dilemma component was passed out and read, and students were asked to rank characters from most to least honest.

Students then discussed their reasons for ranking the characters, with the teacher drawing out other elements missed by the class. For example, she pointed out that the doctor in the story, ranked high by students for giving the contraceptive pill to his teenage patient, hadn’t talked to her about venereal disease or explored whether she was emotionally ready for intercourse. The ensuing discussion on ‘readiness’ evoked comments on attitudes
of boys and girls towards the loss of virginity and the need to be financially ready to marry if the girl became pregnant. At the end of the session the teacher distributed a cartoon on the subject of venereal disease and in this context talked briefly about the problem of casual sexual contact.

Students were quiet and serious. They tended to give brief answers to the questions until their teacher drew them out and expanded the interpretation. Then the class seemed comfortable about expressing their feelings and there was little 'baiting' or embarrassment between the sexes, something which the teacher was careful to identify and clarify throughout the lesson. The teacher's skill in handling sensitive issues in a non-threatening manner enabled the students to relate the objective situation to their personal attitudes.

School Two

School Two was a modern State coeducational high school situated in a pleasant tree lined middle class Victorian suburb. Teachers characterised the students and the community as basically conservative in outlook. A substantial proportion of the student body come from migrant backgrounds; single-parent families and stepfamilies are well represented.

The Human Relations course, in existence since 1979, grew out of the concerns of a few teachers who were disturbed by prevailing student misinformation and attitudes towards sexuality and how this was expressed in relationships between the students, particularly in the stereotyped and often derogatory attitudes of the boys towards girls and women.

Human Relations is a separate unit taught twice a week for the Years 7 and 9. The two teachers have taken several in-service training courses and one is completing a Graduate Diploma in Human Relations Education.

Class Observation: Year 7 Human Relations

The lively group of 25 boys and girls settled down quickly. The first minutes were devoted to a brief review of some of the lessons on puberty that had taken place in preceding weeks, then the lesson focused on families. Posters with various photos of assorted groups of people were distributed to students who formed four small discussion groups. The pictures were ambiguous: a woman and lots of children, a naked man and woman embracing, two women, two men and an assortment of children and adults arranged in large and small groups. Students were asked to identify which groups were families. All discussion groups had a lot of difficulty deciding which were families because they couldn't determine whether or not people depicted were married. Discussion was lively with lots of arguments over why and why not groups could or could not be considered a family.

In the brief general classroom discussion questions centred on whether one could be a family if not 'legally' married. The class tended to think not, although single parents and children were considered to be family.

The teacher finished the lesson by reading a list of questions on which the class voted whether they agreed strongly or disagreed strongly: for example,
‘All children worry that their parents will divorce’, ‘Adopted children aren’t really members of the family’, ‘A family always has to have two parents’. This lesson clearly aroused interest in pursuing the topic, ‘What is a family?’

School Three

School Three is a rambling coeducational inner suburban Victorian State high school in a working/middle class area. Approximately 40 per cent of the student body is of Greek origin and there is a fair proportion of single-parent families and stepfamilies.

A Pastoral Care Program at Year 7 and a Health Education Course at Year 8 were introduced in 1985 at the behest of teachers who had seen the need for such a course to help students make a better adjustment to school life. The School Council is supportive and provides funds for materials and for teachers to attend in-service training at the Family Planning Association. None of the three teachers involved has any special background in health or human relations education. A regional health and human relations consultant is available to help in establishing the program. Parents were involved in the preliminary discussions.

Resources used include many exercises from standard books on communication skills and interpersonal relations and use is made of drama groups and puppet shows which travel around the schools presenting contemporary life events.

Lack of preparation time and materials is the major problem mentioned by the teachers who meet weekly to exchange ideas and plan curricula. In-service education outside the Education Department is too costly and all would prefer more centralised provision of training and resources.

The Year 7 Pastoral Care course is a separate class taught once a week by form teachers; it is compulsory and focuses on self-esteem and peer relationships. Year 8 Health Education examines the same topics as well as sex education and family relationships. It, too, is compulsory and meets once a week.

Class Observation: Year 8 Health Education

The class of 25 boys and girls were holding a discussion on a play seen the day before dealing with family breakdown. Discussion centred around the dilemma of the main character, a 14 year old boy, who was asked to choose which parent he wanted to live with when his parents divorced. The teacher asked whether anyone in the class had experienced a similar situation or knew of a friend that had. Several of the children talked of their personal situations, how they felt about the decision and how they were feeling now. Others talked of friends’ experiences. While most of the comments were matter of fact, some of the children were obviously speaking of a difficult time in their lives.

A general discussion took place on ways of coping with divorce, joint custody, living with relatives, running away or maintaining access to both
parents. The class was divided between the feeling that parents should try harder to solve their problems and think more about the children and the belief that if parents were fighting all the time it was better that they separate. The lesson concluded with a brief discussion about friction in the family and constructive ways to cope with it.

School Four

School Four is a coeducational State high school in Queensland with 500 students situated in a mainly working/middle class suburb. This was the first year the Personal Development Program was in operation although the principal said the school had a strong Pastoral Care program that had been in place for a number of years.

Observation: Year 8 Personal Development Out-of-School Hours

For this first two and a half hour evening session with parents and children, about 30 students out of a class of 180 attended with their parents. In many cases both fathers and mothers attended. Participants were welcomed to an evening of 'facts, feelings and friendships'. In an introductory ice-breaking exercise everyone answered three questions and discussed their answers with others in their family. The three questions were: My favourite time of year is...?; A pleasant memory from my childhood is...?; and I am looking forward to...?

Then one of the three team leaders went straight into a discussion of the physiology of boys and girls using explicit diagrams, clinical terms and a matter-of-fact tone of voice, now and then engaging the audience in answering questions. It was emphasised that differences in the size and shape of body parts (for example, breasts and penises) was quite normal. Parents helped their children complete a self-test on knowledge of body parts. A film on changes during puberty and adolescence, Perhaps You Have Noticed You Are Changing, was shown. Girls in the film were portrayed as active in science and woodworking classes and in sport.

Boys, girls and parents divided into separate groups. Boys talked about embarrassments, erections, wet dreams. Girls were shown hygiene equipment for menstruation. Parents talked about self-esteem using a Charlie Brown cartoon and ways to make kids feel needed. Self-esteem questionnaires were passed out. Finally parents filled in forms about how they had been taught about sex and their level of ease or differences in approach with their own children. The evening ended with giving everyone a 'hug' card to exchange for a hug.

The general tone was of close comfortable feelings between families, most of whom knew each other. The sessions set the stage, according to the leaders, for further discussion at home of the topics presented.
Conclusion

Continued trends towards devolution of educational authority in curriculum decision making to local school communities hampers obtaining an overall perspective on human relations education on a national or even State level. Despite the existence in several States of Health and Human Relations Advisory Committees and special curriculum units in the Departments of Education, little documentation or monitoring of what is actually taught occurs. Only a State-by-State survey of individual schools would provide an accurate profile of the occurrence and comprehensiveness of human relations programs in Australian schools.

Human relations education is not a discretely defined entity but encompasses content and concepts found across the entire curriculum, both formal and informal. Aims such as 'to develop understanding and skills in communication and interpersonal relationships' or 'to develop an understanding of one's own and other peoples' attitudes and values' are not confined to one subject area. Such goals are incorporated into the overall policy of most State Education Department and Catholic and Independent systems.

An analysis of State Education Department guidelines and subject syllabuses in conjunction with interviews with curriculum coordinators, revealed that aspects of what is commonly labelled human relations education are taught in some form in a number of subject areas at different grade levels in most schools. Most frequently, human relations content is incorporated as a unit into Health, Social Studies or Home Economics subject areas.

Innovative programs exist in all State, Catholic and Independent systems at the individual school level. Successful implementation of programs appears dependent on the availability, enthusiasm and background of individual teachers and on encouragement and support from the principal. If a teacher leaves a school, the program often disappears from the curriculum. Teachers frequently mention inadequate in-service training opportunities, vagueness of curriculum guidelines and limited teaching resources.

The overall impression is one of a fragmented and uncoordinated approach to incorporating human relations education into the curriculum. Similarly the human relations aspects of the 'hidden curriculum' inherent in
school organisation and classroom atmosphere, while recognised, are not necessarily practised. In some States, increasing attention is being paid to the effect of the ‘hidden curriculum’ on social learning through an emphasis on pupil welfare and the activities of Equal Opportunity Officers.

Where they exist for health and human relations education, State guidelines are broad, and each school has some autonomy in implementing the suggested curriculum. Even where a health or human relations course is recommended or mandated, parents in all States have the right to have their child excused from the sex education or any other component deemed controversial.

The sex education components of human relations courses have sometimes generated antagonism and created distrust or tension between schools and parents. Opposition has come from parents committed to conservative values towards sexuality and the family, and concerned about the multiplicity of views on these topics that would be presented in a classroom situation.

Only when adequate parent and community involvement has been achieved have courses been accepted and programs supported. Almost all the States have established procedures for review of materials and curriculum by parents and other community members. Commonwealth Schools Commission studies and State Education Department reviews of the general aims of education endorse increased attention to social education. As the following quote illustrates, support for the introduction of life skills subjects is seen as one response to the confusion in young people caused by the changing environment of family life, unpromising employment prospects, shifting sex role expectations and emerging pluralism in community values and attitudes:

5.154 The Commission believes that key aspects of human development programs in school curricula should provide opportunities for girls and boys to communicate more effectively with one another around a wide range of topics, thereby gaining in understanding of self and others, developing living skills and self-esteem, understanding and accepting sexuality and understanding the consequences of sex-role stereotyping for boys and girls.


Nevertheless, social education courses which include health, social studies and personal development/life skills subjects have to complete with the traditional curriculum emphasis on the ‘three Rs’. Conflicting community expectations about the purpose of education generate confusion in priorities.

If young people are to cope competently with the challenges of the changing social and economic environment in which they are coming of age, then they should be exposed to the understanding and skills inherent in human relations education objectives and aims as stated in curriculum syllabuses and ministerial statements regarding educational goals. These learnings are essential — how, where and when they are taught may be debatable.

As one respondent observed, what is needed is sufficient educational status to be assigned to the area: ‘No more guidelines, no new curricula, no
more resource packages need to be developed for the next 20 years; the implementation of the ones already developed is what is required'. It is not suggested that education will solve all problems, but that schools should acknowledge the future into which its students will enter, and adjust the school experience to help students succeed in that environment. Neither should human relations education in schools exist in isolation from the community in which students live; classroom activities should be linked to experiences of caring for others in the community. Working in creches or nursing homes, for example, could be an extension of the precepts underlying human relations education.

If the community takes the position that schools have a central role in providing Human Relations Education — that is, learning experiences enabling young people to acquire knowledge and skills to form and maintain effective personal, family and community relationships — as the Australian Institute of Family Studies believes it should, then the practical difficulties identified in this report would need to be addressed. Educational policy makers should, therefore, consider the following points:

• according the same status to Human Relations Education as other essential core subjects and ensuring the content and concepts are incorporated into primary and secondary curricula;

• the possibility of the Commonwealth's Curriculum Development Centre, in consultation with State Departments of Education, endorsing model guidelines, curricula and materials for a Kindergarten to Year 12 Human Relations Course;

• ensuring that where a human relations unit is taught alone or as a unit within another subject such as Home Economics or Child Development, this subject is equally accessible to boys and girls;

• developing Human Relations Education curricula and materials which reflect contemporary family life and the changing nature of work and family life as it affects the roles and expectations of men and women;

• including core human relations subjects in teacher pre-service training courses;

• State Departments of Education providing adequate resources for in-service training and consultation to teachers of human relations;

• the possibility of the Commonwealth's Curriculum Development Centre or The Australian Council for Educational Research undertaking collaborative research with State authorities to monitor the implementation of Human Relations Education and assess its effectiveness;

• establishing links between schools and community organisations providing services and activities for the young and old to extend the principles underlying Human Relations Education taught in the classroom into the community.
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Appendix: Questionnaire

Human relations/family life education may include a diversity of components and content areas taught at different grade levels. Topics may be taught as a separate course, as a unit within another subject, or integrated into two or more subject areas. The aim of this questionnaire is to gain an understanding of the scope and location of human relations education within the various school systems.

1. Is there a suggested human relations/family life education curriculum at the state level?

   YES ☐ NO ☐

   If yes, what is planned or actual title of this curriculum subject or unit?

   ..........................................................

2. When were the most recent guidelines on human relations/family life education issued by your education system?

   ..........................................................

   (Would you please enclose a copy of these guidelines with this questionnaire)

3. Is there a suggested list of materials and resources for use in the human relations/family life programs in the schools?

   YES ☐ NO ☐

   (Would you please enclose copies of these manuals, syllabuses, materials with this questionnaire)

4. If human relations education optional or required at the local school level?

   PRIMARY: Optional ☐ Required ☐

   SECONDARY: Optional ☐ Required ☐
5. Following are examples of some topics pertinent to this study which could be included under human relations/family life education. Please indicate, by placing a tick (✓) in the appropriate column, where in the curriculum these topics could be found.

<table>
<thead>
<tr>
<th>TOPICS</th>
<th>SUBJECT AREAS</th>
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<tbody>
<tr>
<td></td>
<td>Health</td>
</tr>
<tr>
<td>Gender Roles &amp; Stereotypes</td>
<td></td>
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<tr>
<td>Family Types &amp; Functions</td>
<td></td>
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<tr>
<td>Parenting</td>
<td></td>
</tr>
<tr>
<td>Marriage</td>
<td></td>
</tr>
<tr>
<td>Divorce/Remarriage</td>
<td></td>
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<tr>
<td>Community &amp; the Family</td>
<td></td>
</tr>
<tr>
<td>Ageing &amp; Death</td>
<td></td>
</tr>
<tr>
<td>Life Skills</td>
<td></td>
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<tr>
<td>Communication Skills</td>
<td></td>
</tr>
<tr>
<td>Values &amp; Decision-making</td>
<td></td>
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<tr>
<td>Stress Management/Conflict Resolution</td>
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<tr>
<td>Money Management</td>
<td></td>
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<tr>
<td>Consumer Education</td>
<td></td>
</tr>
<tr>
<td>Human Reproduction</td>
<td></td>
</tr>
<tr>
<td>Growth/Development in Males &amp; Females</td>
<td></td>
</tr>
<tr>
<td>Attitudes &amp; Values about Sexuality</td>
<td></td>
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<tr>
<td>Contraception</td>
<td></td>
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<tr>
<td>Sexually Transmitted Diseases</td>
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<tr>
<td>Peer Relationships</td>
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</table>
6. Could you indicate by placing a tick (✓) in the appropriate column at what grade level these topics would be taught.

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<thead>
<tr>
<th>TOPICS</th>
<th>GRADE LEVELS</th>
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<tbody>
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</tbody>
</table>

7. Are teachers of human relations/family life education programs required to undertake special training?

- YES, IT IS COMPULSORY: Pre-service
  - □
  - In-service
  - □
- YES, IT IS OPTIONAL: Pre-service
  - □
  - In-service
  - □
- NO SPECIAL TRAINING REQUIRED

If yes, what is the nature of the training? (qualifications, subject pre-requisites, types of course, etc.)

- □
- □
- □
- □
8. What is the role of parents in the development of human relations/family life programs?

9. What is the role of parents in the implementation of human relations/family life programs?

10. Do parents have to give permission for their child to participate in any aspect of these programs?
    
    YES □ NO □
    
    If yes, what aspect of the program?

11. What is the role of local school authorities (e.g. school councils, regional offices) in the planning and development of any school-based programs?

12. Have any recent reviews or evaluations of human relations/family life programs been conducted?
    
    YES □ NO □
    
    (Would you please enclose copies of the questionnaire and reports with this questionnaire)

13. Are there any other comments you wish to make about human relations/family life education in the school system?

Thank you for your cooperation.

Please forward your completed questionnaire and any materials to: Ilene Wolcott, Research Fellow, Australian Institute of Family Studies, 766 Elizabeth Street, Melbourne 3000 Victoria.
Australian Institute of Family Studies

The Australian Institute of Family Studies, established under the provisions of the Family Law Act 1975, commenced operation in February 1980. The Institute functions as a statutory authority of the Australian Government, from which it derives its financial support. The founding Director is Dr Don Edgar. The Institute has a Board of Management of appointed members and a permanent staff of professional and support personnel. In addition, specialist assistants and consultants in appropriate fields are engaged to assist the Institute in its work when necessary.

Functions of the Institute

The functions of the Institute as defined by the Family Law Act 1975, are:

- to promote, by the conduct, encouragement and coordination of research and other appropriate means, the identification of, and development of understanding of, the factors affecting marital and family stability in Australia, with the object of promoting the protection of the family as the natural and fundamental group unit in society; and
- to advise and assist the Attorney-General in relation to the making of grants, and with the approval of the Attorney-General to make grants out of moneys available under appropriations made by the Parliament, for purposes related to the functions of the Institute and the supervising of the employment of grants so made.

To meet those functional responsibilities, the Institute performs four broadly defined roles:

Research To study and evaluate matters which affect the social and economic wellbeing on all Australian families

Advice To advise Government and other bodies concerned with family wellbeing or issues related to Institute findings

Promotion To promote the development of improved methods of family support, including measures which prevent family disruption and promote marital and family stability
Dissemination  To disseminate the findings of Institute and other family research
In particular, the following activities are carried out in order to fulfil these roles:

- monitoring the demographic and social changes in Australian families and identification of the implications of such changes for social policy;
- conduct of research on the operation and effects of the Family Law Act and other legislation affecting the legal status of family members;
- conduct of research on factors influencing how families function, with the objective of recommending relevant means of promoting family well-being and stability;
- evaluation on a continuing basis of the economic status and well-being of Australian families;
- conducting research, consulting and reporting on the effects of Federal and State legislation and programs on the ways families function;
- dissemination, via media information, publications, public seminars and other means, of the findings of Institute research, with the objective of improving understanding of factors affecting marital and family well-being;
- coordination and encouragement of wider research on Australian families by the making of grants;
- acting as a national centre of information about Australian families.

Thus the objectives of the Institute are essentially practical ones, concerned primarily with learning about real situations through research on Australian families.
The teaching of human relations is important in the light of changing social circumstances and the inherent need for a tolerant community of competent people able to relate humanely to one another.

The Australian Institute of Family Studies presents this review of human relations education in Australian schools so that it can be seen in context and in order to provide pointers for future development in this area. The review sets out human relations education activity to date in the various States of Australia, and raises issues to do with course content, parental and community participation, and students’ views. Community leaders and educators will benefit from reading this review on the need for human relations education and the associated controversies.