

Sex / Health

Ethical issues for health professionals arising from school policies on sexual assault, sexual behaviour and self harm

In general, school policies that dictate response to notification of sexual assault and significant self harm are clear and consistent with providing good care for a child. Response to reports of sexual behaviour that is against parents' expectations and school rules is sometimes less clear from the viewpoint of health professionals (nurses, counsellors and doctors in particular). The same is true for minor instances of self harm that is not intended to threaten life.

There are times where a nurse or counsellor or doctor at Kennedy or the San at Timbertop becomes aware or is approached by a student, and where the student makes it clear that they wouldn't have come at all if there was any question of not respecting confidentiality. Examples include :

- A girl says she may be pregnant and wants advice but refuses consent for anyone to be informed if she proves to be so. Would like information about termination.
- A girl says she is pregnant and refuses permission to inform parents or Head of House. Wants to know what to do.
- A 14 year old girl informs a counsellor in confidence that she is having sexual relations with a boy at school.
- A boy who has superficially lacerated his arm as an angry gesture of self harm but not intending to kill himself.
- A girl comes in with a headache and says she has taken excessive Panadol tablets in desperation but not enough to be of danger. Refuses permission to tell Head of House.
- A girl comes in for the morning-after pill a third time in the year. Admits having frequent unprotected sex at exeat or weekends at school while drinking or stoned.

In many such cases the nurse or counsellor or doctor has four considerations in providing care to the student.

The first is in the best interests of the child .

The second is in the best interests of the school community (including the effect a behaviour may be having on friends in the house, or the establishing of precedents that may be harmful to school discipline).

The third is the responsibility to the student's parents, who have entrusted their child to the school, expecting to be involved in anything that affects their child.

The fourth relates to the ethics of the professionals themselves.

When these considerations are, or may be, in conflict, or against school policy, the health professional should seek advice. Anyone working at the school, whether formally employed, under contract, in consultation or only using school facilities to provide a service, has a responsibility to the school which may override considerations such as

confidentiality in some instances. Such a person is providing care in conjunction and cooperation with the school.

Health professionals should recognise that informing HoH or Director of Pastoral Care about a student consultation does not necessarily involve giving all details of a confidential nature. Nor is this expected. But it must be recognised that it is the school that bears responsibility to parents if there is an adverse outcome and it is the school who will have to defend litigation if there are legal consequences.

John M Court
Senior Medical Officer
August 6 2005.