THE DUSTON SCHOOL

PHSE Policy

Approved by: Board of Trustees

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THE DUSTON SCHOOL 4-19

www.thedustonschool.org

Relationships and Sex Education (RSE) policy

1: Introduction

The Duston School believes that in order to create a happy and successful adult life, children and young people need to have the self-confidence to make informed decisions about their wellbeing, health and relationships. Relationships and Sex Education (RSE) is about giving children and young people the information they need to help them develop healthy, nurturing relationships of all kinds, not just intimate relationships. Health Education is giving pupils information to make well-informed, positive choices about their own health and wellbeing. The school recognises that physical health and mental wellbeing are interlinked, and it is important that pupils understand that good physical health contributes to good mental wellbeing, and vice versa.

The school has a responsibility under the Equality Act 2010 to ensure the best for all its pupils irrespective of disability, educational needs, race, nationality, ethnic or national origin, sex, gender reassignment, pregnancy, maternity, religion or sexual orientation. As a result, RSE will be sensitive to the different needs of individual pupils and may need to adapt and change over time to reflect the needs of the particular cohort. The school may also take positive action, where it can be shown that it is proportionate, to deal with particular disadvantages affecting one group because of a protected characteristic.

The school is aware of the need to be mindful of and respectful to a wide variety of faith and cultural beliefs across the school, and will make every attempt to be appropriately sensitive; equally it is essential that children and young people still have access to the learning they need to stay safe, healthy and understand their rights as individuals. The school believes that its pupils deserve the right to honest, clear, impartial scientific and factual information to help better form their own beliefs and values, free from bias, judgement or subjective personal beliefs of those who teach them.

2: Aims

Through the delivery of high quality, evidence-based and age-appropriate RSE, Relationship and Health Education, The Duston School aims to help prepare pupils for the onset of puberty, give them an understanding of sexual development and the importance of health and hygiene, create a positive culture in relation to sexuality and relationships and to ensure pupils know how and when to ask for help and where to access support. By the end of their education, the school hopes pupils will have developed resilience and feelings of self-respect, confidence and empathy in preparation for the responsibilities and experiences of adult life.

The aim of RSE is to give young people the information they need to help them develop healthy, nurturing relationships of all kinds, not just intimate relationships. The curriculum aims to:

- Provide a framework in which sensitive discussions can take place
- Prepare pupils for puberty, and give them an understanding of sexual development and the importance of health and hygiene
- Help pupils develop feelings of self-respect, confidence and empathy
- Create a positive culture around issues of sexuality and relationships
- Teach pupils the correct vocabulary to describe themselves and their bodies

3: Statutory requirements

This policy complies with the statutory guidance for Relationships Education, Relationships and Sex Education (RSE) and Health Education (for introduction 1 September 2026).

Relationships Education, Relationships and Sex Education and Health Education guidance

We must teach relationships and sex education (RSE) under the Children and Social Work Act 2017, in line with the terms set out in statutory guidance

We must teach health education under the same statutory guidance

4: Policy development

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

1. Review – a member of staff pulled together all relevant information including relevant national and local guidance
2. Senior Leader consultation – all senior leaders were given the opportunity to look at the policy and make recommendations
3. Parent/stakeholder consultation – parents and any interested parties were invited to comment on the policy
4. Pupil consultation –a pupil voice group were invited to discuss what they wanted from RSE.
5. Ratification – once amendments were made, the policy was shared with governors and ratified.

The policy will be reviewed annually, and parents will be consulted in advance about significant changes.

5: Definition

RSE is lifelong learning about physical, sexual, moral and emotional development. It is about teaching sex, sexuality and sexual health in a way that gives pupils the confidence to make sound decisions when facing risks and other challenges. It includes teaching about friendship, the importance of caring, stable and mutually supportive relationships with another person, and how to control and understand feelings that come with being in a relationship.

RSE does not encourage early sexual experimentation. It teaches children and young people to understand human sexuality and to respect themselves and others, to build self-esteem and understand the reasons for delaying sexual activity so that they can develop safe, fulfilling and healthy sexual relationships, at the appropriate time.

RSE will outline that there are different types of committed, stable relationships, the characteristics and legal status of other types of long-term relationships, the importance of marriage as a relationship

choice and why it must be freely entered into, how relationships might contribute to human happiness and the their importance for raising children, as well as highlighting the roles and responsibilities of parents with respect to raising children, characteristics of successful parenting and how to judge when relationships have become unsafe as well as how to seek help or advice and report concerns about others

6: Curriculum

The personal, social, health and economic (PSHE) curriculum covers the range of topics that are set out by the DfE in the statutory requirements for the subject. These requirements can be found in Appendix 2

Further details on these topics can be found in the PSHE Curriculum Vision document in appendix 1.

A parent/carer may view the curriculum content in a face-to-face meeting at school. This is available upon request via email to the PSHE Coordinator. If a face-to-face meeting is not achievable, a discussion will be had regarding the sharing of curriculum content in the most suitable way at the time.

7: Delivery of RSE

RSE will be delivered in science, religious education, computing and Personal, Social, Health and Economic Education (PSHE) and will build on the foundation of RSE or Relationships Education delivered in primary school.

When sex and relationships education is taught as part of the National Curriculum Science course, it is treated in a factual way and deals with biological details of the reproductive system.

Trained health professionals will also be used to deliver content where appropriate.

RSE focuses on giving young people the information they need to help them develop healthy, nurturing relationships of all kinds including:

- Families
- Respectful relationships, including friendships
- Online and media
- Being safe
- Intimate and sexual relationships, including sexual health

These areas of learning are taught within the context of family life taking care to ensure that there is no stigmatisation of children based on their home circumstances (families can include single parent families, LGBT parents, families headed by grandparents, adoptive parents, foster parents/carers amongst other structures) along with reflecting sensitively that some children may have a different structure of support around them (for example: looked after children or young carers).

For more information about our RSE curriculum, see Appendices 1 and 2.

RSE will be delivered in a non-judgmental, factual way allowing scope for pupils to ask questions in a safe environment. Teachers will tailor the delivery of RSE to meet the specific needs of the pupils in that class, and to be responsive to their behaviour and development. Teachers delivering RSE are trained in distancing techniques. Classes will explore different attitudes, values and social labels, and develop skills that will enable pupils to make informed decisions regarding sex and relationships as well as being able to differentiate between fact, opinion and belief and an understanding of the law on various topics. Pupils will be taught the anatomically correct names for body parts, but slang or everyday terms used in certain social circles will be discussed; this will surround discussion about what is and isn't acceptable language to use.

8: Health Education: Physical health and mental-wellbeing

The school wishes to promote pupils' health and well-being by encouraging self-control, their ability to self-regulate and strategies for doing so. This will enable pupils to become confident in their ability to achieve well and persevere even when they encounter setbacks or when their goals are distant, and to respond calmly and rationally to setbacks and challenges. The school believes that an integrated, whole-school approach to the teaching and promotion of health and wellbeing will have a positive impact on behaviour and attainment. Health Education will be delivered in science, Physical Education (PE) and Personal, Social, Health and Economic Education (PSHE).

9: Pupils with special educational needs and/or disabilities

The school will endeavour to ensure that RSE and Health Education is accessible for all pupils. We are aware that some pupils are more vulnerable to exploitation, bullying and other issues due to the nature of their SEND and RSE and Health Education may be particularly important for such pupils, for example those with Social, Emotional and Mental Health needs or learning disabilities. Teaching will be sensitive, age-appropriate, developmentally appropriate, differentiated and personalised to meet the specific needs of pupils at different developmental stages. Staff will make reasonable adjustments to alleviate disadvantage faced by pupils with disabilities and will be mindful of the SEND Code of Practice and the school's SEND Policy when planning for these subjects. Staff will use a variety of different strategies to ensure that all pupils have access to the same information, which include modelling of written activities, careful scaffolding of activities and expert guest speakers where appropriate.

10: Roles and responsibilities

All members of the school community are expected to follow this policy. Roles, responsibilities and expectations of the school community are set out in detail below.

- The Local Governing Body
    - The Local Governing Body will monitor and evaluate the impact of the policy by reviewing pupils' progress in achieving the expected educational outcomes. They will hold the Principal to account for the implementation of the policy. They will scrutinise

relevant data, review any issues that might arise and act as a point of challenge for decisions taken by the Principal.

- The Principal
    - The Principal is responsible for ensuring that RSE is taught consistently across the school, and for managing requests to withdraw students from [non-statutory/non-science] components of RSE (see section 6).
    - The Principal, with support from the Senior Leadership Team, will ensure that staff are supported, receive regular professional development training in how to deliver RSE and are up to date with policy changes.
    - They will ensure that RSE is well led, effectively managed and well planned across various subjects (to avoid unnecessary duplication of topics) and that the quality of provision is subject to regular and effective self-evaluation.
    - The Principal will ensure that teaching is age-appropriate, delivered in ways that are accessible to all pupils with SEND and that the subjects are resourced, staffed and timetabled appropriately.
    - They will ensure that teaching delivered by any external organisation is age-appropriate and accessible for pupils and will liaise with parents regarding any concerns or opinions regarding RSE and Health Education provision and will manage parental requests for withdrawal of pupils from non-statutory, non-science components of RSE.
- Staff
    - Staff are responsible for:
        - Delivering RSE in a sensitive way
        - Delivering RSE in a non-judgemental way
        - Modelling positive attitudes to RSE
        - Monitoring progress
        - Responding to the needs of individual students
        - Responding appropriately to students whose parents wish them to be withdrawn from the [non-statutory/non-science] components of RSE
    - Staff do not have the right to opt out of teaching RSE. Staff who have concerns about teaching RSE are encouraged to discuss this with the Principal.
    - Teachers of RSE, Relationships and Health Education will ensure that they are up to date with school policy and curriculum requirements regarding sex education and will attend and engage in professional development training. Teachers will encourage pupils to communicate concerns regarding their social, personal and emotional development in confidence, listen to their needs and support them seriously. If a pupil comes to a member of staff with an issue that that member of staff feels they are not able to deal with alone, they will take this concern to their line-manager.
- Pupils
    - Pupils are expected to take RSE, Relationships and Health Education seriously. They are encouraged to speak to their teacher or tutor regarding any concerns. Pupils are expected to listen, be considerate of other pupils' feelings and beliefs, comply with class-set confidentiality rules and support one another with issues that arise during class. Pupils who fail to follow these standards of behaviour will be dealt with under the school's behaviour policy.

- Parents
    - The school hopes to build a positive and supporting relationship with parents through mutual understanding, cooperation and trust. Parents are expected to share the responsibility of sex education and support their children's personal, social and emotional development. The school hopes parents will create an open home environment where pupils can engage, discuss and continue to learn about matters that have been raised through school. Parents are also encouraged to seek additional support from the school where they feel it is needed.

11: Parents' right to withdraw

education provided to their children as described in this policy. Before withdrawing or making a request, the school strongly urges parents to carefully consider their decision as sex education is a vital part of the school curriculum and supports child development.

Parents have the right to withdraw their children from the [non-statutory/non-science] components of sex education within RSE up to and until 3 terms before the child turns 16. After this point, if the child wishes to receive sex education rather than being withdrawn, the school will arrange this.

Requests for withdrawal should be put in writing using the form found in Appendix 3 of this policy and addressed to the principal.

A copy of withdrawal requests will be placed in the pupil's educational record. The principal will discuss the request with parents and take appropriate action.

If a pupil is excused from sex education the school will ensure that the pupil receives appropriate, purposeful education during the period of withdrawal.

12: Training

Staff training in the delivery of RSE will be provided by the PSHE lead and external visitors, such as the school nurse and sexual health professionals, where necessary.

There is a training programme in place so that staff are trained in Year Teams (relevant to their tutor group) so that this can be delivered in an age and stage appropriate manner.

13: Monitoring arrangements

The delivery of RSE is monitored by the PSHE lead through:

- Regular learning walks, work sampling and pupil voice panels
- Pupils' development in RSE is monitored by class teachers.
- PSHE is monitored though the school's routine quality assurance cycle.
- This policy will be reviewed annually.

14: Confidentiality and Child Protection

The school hopes to provide a safe and supportive school community where pupils feel comfortable seeking help and guidance on anything that may be concerning them about life either at school or at home. All teachers will receive training around confidentiality and should ensure that pupils understand that they cannot offer unconditional confidentiality. If a child protection issue is disclosed to a member of staff, that member of staff should follow the school's Child Protection and Safeguarding procedures.

If a staff member is approached by a pupil under 16 who is having, or is contemplating having sexual intercourse, the teacher should:

- ensure that the pupil is accessing all the contraceptive and sexual health advice available and understands the risks of being sexually active;
- encourage the pupil to talk to their parent or carer. Pupils may feel that they are more comfortable bringing these issues to a teacher they trust, but it is important that children and their parents have open and trusting relationships when it comes to sexual health and the school will encourage this as much as possible;
- decide whether there is a child protection issue. This may be the case if the teacher is concerned that there is coercion or abuse involved. If a member of staff is informed that a pupil under 13 is having, or is contemplating having sexual intercourse, this will be dealt with under child protection procedures.

Pupils with special educational needs may be more vulnerable to exploitation and less able to protect themselves from harmful influences. If staff are concerned that this is the case, they should seek support from the Designated Safeguarding Lead to decide what is in the best interest of the child.

15: Equal opportunities

RSE and Health Education will be delivered equally to both sexes, normally in mixed classes. There are, however, certain topics that may be delivered in single sex groupings e.g. menstruation and personal hygiene.

The school has a commitment to ensure that RSE and Health Education is relevant to all pupils and is taught in a way that is age and stage appropriate. Pupils are encouraged to openly and freely discuss diversity of personal, social and sexual preferences. Prejudiced views will be challenged, and equality promoted. Any bullying that relates to sexual behaviour or perceived sexual orientation will be dealt with swiftly and seriously in accordance with the school's behaviour policy.

16: Links with other polices

This policy links to the following policies and procedures:

- Behaviour policy
- Suspensions and permanent exclusions policy
- Safeguarding policy

- Anti-bullying policy
- Equality, Diversity and Inclusion policy
- Online safety policy
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17: Complaints

If parents have any concerns or complaints over the application or implementation of this policy, they should raise their concerns with a staff member or the Principal in accordance with the school's complaints policy.

Appendix 1: PSHE Overview

Appendix 2: By the end of secondary school pupils should know

TOPIC	PUPILS SHOULD KNOW
Families	• That there are different types of committed, stable relationships. • How these relationships might contribute to wellbeing, and their importance for bringing up children. • Why marriage or civil partnership is an important relationship choice for many couples. The legal status of marriage and civil partnership, including that they carry legal rights, benefits and protections that are not available to couples who are cohabiting or who have, for example, undergone a non-legally binding religious ceremony. • That 'common-law marriage' is a myth and cohabitants do not obtain marriage-like status or rights from living together or by having children. • That forced marriage and marrying before the age of 18 are illegal. • How families and relationships change over time, including through birth, death, separation and new relationships. • The roles and responsibilities of parents with respect to raising children, including the characteristics of successful parenting and the importance of the early years of a child's life for brain development. • How to judge when a relationship is unsafe and where to seek help when needed, including when pupils are concerned about violence, harm, or when they are unsure who to trust
Respectful relationships	• The characteristics of positive relationships of all kinds, online and offline, including romantic relationships. For example, pupils should understand the role of consent, trust, mutual respect, honesty, kindness, loyalty, shared interests and outlooks, generosity, boundaries, tolerance, privacy, and the management of conflict, reconciliation and ending relationships. • How to evaluate their impact on other people and treat others with kindness and respect, including in public spaces and including strangers. Pupils should understand the legal rights and responsibilities regarding equality, and that everyone is unique and equal. • The importance of self-esteem, independence and having a positive relationship with oneself, and how these characteristics support healthy relationships with others. This includes developing one's own interests,

	hobbies, friendship groups, and skills. Pupils should understand what it means to be treated with respect by others. • What tolerance requires, including the importance of tolerance of other people's beliefs. • The practical steps pupils can take and skills they can develop to support respectful and kind relationships. This includes skills for communicating respectfully within relationships and with strangers, including in situations of conflict. • The different types of bullying (including online bullying), the impact of bullying, the responsibilities of bystanders to report bullying and how and where to get help. • Skills for ending relationships or friendships with kindness and managing the difficult feelings that endings might bring, including disappointment, hurt or frustration. • The role of consent, including in romantic and sexual relationships. Pupils should understand that ethical behaviour goes beyond consent and involves kindness, care, attention to the needs and vulnerabilities of the other person, as well as an awareness of power dynamics. Pupils should understand that just because someone says yes to doing something, that doesn't automatically make it ethically ok. • How stereotypes, in particular stereotypes based on sex, gender reassignment, race, religion, sexual orientation or disability, can cause damage (e.g. how they might normalise non-consensual behaviour or encourage prejudice). Pupils should be equipped to recognise misogyny and other forms of prejudice. • How inequalities of power can impact behaviour within relationships, including sexual relationships. For example, how people who are disempowered can feel they are not entitled to be treated with respect by others or how those who enjoy an unequal amount of power might, with or without realising it, impose their preferences on others. • How pornography can negatively influence sexual attitudes and behaviours, including by normalising harmful sexual behaviours and by disempowering some people, especially women, to feel a sense of autonomy over their own body and providing some people with a sense of sexual entitlement to the bodies of others. • Pupils should have an opportunity to discuss how some sub-cultures might influence our understanding of sexual ethics, including the sexual norms endorsed by so-called "involuntary celibates" (incels) or online influencers.
Online safety and awareness	• Rights, responsibilities and opportunities online, including that the same expectations of behaviour apply in all contexts, including online. • Online risks, including the importance of being cautious about sharing personal information online and of using privacy and location settings appropriately to protect information online. Pupils should also understand the difference between public and private online spaces and related safety issues. • The characteristics of social media, including that some social media accounts are fake, and / or may post things which aren't real / have been created with AI. That social media users may say things in more extreme ways than they might in face-to-face situations, and that some users present highly exaggerated or idealised profiles of themselves online. • Not to provide material to others that they would not want to be distributed further and not to pass on personal material which is sent to them. Pupils should understand that any material provided online might be circulated, and

	that once this has happened there is no way of controlling where it ends up. Pupils should understand the serious risks of sending material to others, including the law concerning the sharing of images. • That keeping or forwarding indecent or sexual images of someone under 18 is a crime, even if the photo is of themselves or of someone who has consented, and even if the image was created by the child and/or using AI generated imagery. Pupils should understand the potentially serious consequences of acquiring or generating indecent or sexual images of someone under 18, including the potential for criminal charges and severe penalties including imprisonment. Pupils should know how to seek support and should understand that they will not be in trouble for asking for help, either at school or with the police, if an image of themselves has been shared. Pupils should also understand that sharing indecent images of people over 18 without consent is a crime. • What to do and how to report when they are concerned about material that has been circulated, including personal information, images or videos, and how to manage issues online. For example, see Report Remove • About the prevalence of deepfakes including videos and photos, how deepfakes can be used maliciously as well as for entertainment, the harms that can be caused by deepfakes and how to identify them. • That the internet contains inappropriate and upsetting content, some of which is illegal, including unacceptable content that encourages misogyny, violence or use of weapons. Pupils should be taught where to go for advice and support about something they have seen online. Pupils should understand that online content can present a distorted picture of the world and normalise or glamorise behaviours which are unhealthy and wrong. • That social media can lead to escalations in conflicts, how to avoid these escalations and where to go for help and advice. • How to identify when technology and social media is used as part of bullying, harassment, stalking, coercive and controlling behaviour, and other forms of abusive and/or illegal behaviour and how to seek support about concerns. • That pornography, and other online content, often presents a distorted picture of people and their sexual behaviours and can negatively affect how people behave towards sexual partners. This can affect pupils who see pornographic content accidentally as well as those who see it deliberately. Pornography can also portray misogynistic behaviours and attitudes which can negatively influence those who see it. • How information and data is generated, collected, shared and used online. • That websites may share personal data about their users, and information collected on their internet use, for commercial purposes (e.g. to enable targeted advertising). • That criminals can operate online scams, for example using fake websites or emails to extort money or valuable personal information. This information can be used to the detriment of the person or wider society. About risks of sextortion, how to identify online scams relating to sex, and how to seek support if they have been scammed or involved in sextortion. • That AI chatbots are an example of how AI is rapidly developing, and that these can pose risks by creating fake intimacy or offering harmful advice. It is important to be able to critically think about new types of technology as they appear online and how they might pose a risk

Being safe	• How to recognise, respect and communicate consent and boundaries in relationships, including in early romantic relationships (in all contexts, including online) and early sexual relationships that might involve kissing or touching. That kindness and care for others requires more than just consent. • That there are a range of strategies for identifying, resisting and understanding pressure in relationships from peers or others, including sexual pressure, and how to avoid putting pressure on others. • How to determine whether other children, adults or sources of information are trustworthy, how to judge when a relationship is unsafe (and recognise this in the relationships of others); how to seek help or advice, including reporting concerns about others, if needed. • How to increase their personal safety in public spaces, including when socialising with friends, family, the wider community or strangers. Pupils should learn ways of seeking help when needed and how to report harmful behaviour. Pupils should understand that there are strategies they can use to increase their safety, and that this does not mean they will be blamed if they are victims of harmful behaviour. Pupils might reflect on the importance of trusting their instincts when something doesn't feel right, and should understand that in some situations a person might appear trustworthy but have harmful intentions. • What constitutes sexual harassment or sexual violence, and that such behaviour is unacceptable, emphasising that it is never the fault of the person experiencing it. • That sexual harassment includes unsolicited sexual language / attention / touching, taking and/or sharing intimate or sexual images without consent, public sexual harassment, pressuring other people to do sexual things, and upskirting. • The concepts and laws relating to sexual violence, including rape and sexual assault. • The concepts and laws relating to harmful sexual behaviour, which includes all types of sexual harassment and sexual violence among young people but also includes other forms of concerning behaviour like using age-inappropriate sexual language. • The concepts and laws relating to domestic abuse, including controlling or coercive behaviour, emotional, sexual, economic or physical abuse, and violent or threatening behaviour. • That fixated, obsessive, unwanted and repeated behaviours can be criminal, and where to get help if needed. • The concepts and laws relating to harms which are exploitative, including sexual exploitation, criminal exploitation and abuse, grooming, and financial exploitation. • The concepts and laws relating to forced marriage. • The physical and emotional damage which can be caused by female genital mutilation (FGM), virginity testing and hymenoplasty, where to find support, and the law around these areas. This should include that it is a criminal offence for anyone to perform or assist in the performance of FGM, virginity testing or hymenoplasty, in the UK or abroad, or to fail to protect a person under 16 for whom they are responsible. • That strangulation and suffocation are criminal offences, and that strangulation (applying pressure to the neck) is an offence, regardless of whether it causes injury. That any activity that involves applying force or

	pressure to someone's neck or covering someone's mouth and nose is dangerous and can lead to serious injury or death. • That pornography presents some activities as normal which many people do not and will never engage in, some of which can be emotionally and/or physically harmful. • How to seek support for their own worrying or abusive behaviour or for worrying or abusive behaviour they have experienced from others, including information on where to report abuse, and where to seek medical attention when required, for example after an assault.
Intimate and sexual relationships, including sexual health	• That sex, for people who feel ready and are over the age of consent, can and should be enjoyable and positive. • The law about the age of consent, that they have a choice about whether to have sex, that many young people wait until they are older, and that people of all ages can enjoy intimate and romantic relationships without sex. • Sexual consent and their capacity to give, withhold or remove consent at any time, even if initially given, as well as the considerations that people might take into account prior to sexual activity, e.g. the law, faith and family values. That kindness and care for others require more than just consent. • That all aspects of health can be affected by choices they make in sex and relationships, positively or negatively, e.g. physical, emotional, mental, sexual and reproductive health and wellbeing. • That some sexual behaviours can be harmful. • The facts about the full range of contraceptive choices, efficacy and options available, including male and female condoms, and signposting towards medically accurate online information about sexual and reproductive health to support contraceptive decision making. • hat there are choices in relation to pregnancy. Pupils should be given medically and legally accurate and impartial information on all options, including keeping the baby, adoption, abortion and where to get further help. • How the different sexually transmitted infections (STIs), including HIV, are transmitted. How risk can be reduced through safer sex (including through condom use). The use and availability of the HIV prevention drugs Pre-Exposure Prophylaxis (PrEP) and Post Exposure Prophylaxis (PEP) and how and where to access them. The importance of, and facts about, regular testing and the role of stigma • The prevalence of STIs, the short and long term impact they can have on those who contract them and key facts about treatment. • How the use of alcohol and drugs can lead people to take risks in their sexual behaviour. • How and where to seek support for concerns around sexual relationships including sexual violence or harms. • How to counter misinformation, including signposting towards medically accurate information and further advice, and where to access confidential sexual and reproductive health advice and treatment.
Mental wellbeing	• 1. How to talk about their emotions accurately and sensitively, using appropriate vocabulary. • The benefits and importance of physical activity, sleep, time outdoors, community participation and volunteering or acts of kindness for mental wellbeing and happiness. • That happiness is linked to being connected to others. Pupils should be supported to understand what makes them feel happy and what makes them

	feel unhappy, while recognising that loneliness can be for most people an inevitable part of life at times and is not something of which to be ashamed. • That worrying and feeling down are normal, can affect everyone at different times and are not in themselves a sign of a mental health condition, and that managing those feelings can be helped by seeing them as normal. • Characteristics of common types of mental ill health (e.g. anxiety and depression), including carefully-presented factual information about the prevalence and characteristics of more serious mental health conditions. This should not be discussed in a way that encourages normal feelings to be labelled as mental health conditions. • How to critically evaluate which activities will contribute to their overall wellbeing. • Understanding how to overcome anxiety or other barriers to participating in fun, enjoyable or rewarding activities – that it's possible to overcome those barriers using coping strategies, and that finding the courage to participate in activities which initially feel challenging may decrease anxiety over time rather than increasing it. • That gambling can lead to serious mental health harms, including anxiety, depression, and suicide, and that some gambling products are more likely to cause these harms than others. • That the co-occurrence of alcohol/drug use and poor mental health is common and that the relationship is bi-directional: mental health problems can increase the risk of alcohol/drug use, and alcohol/drug use can trigger mental health problems or exacerbate existing ones. That stopping smoking can improve people's mental health and decrease anxiety.
Wellbeing online	• About the benefits of limiting time spent online, the risks of excessive time spent on electronic devices and the impact of positive and negative content online on their own and others' mental and physical wellbeing. • The similarities and differences between the online world and the physical world, including: the impact of unhealthy or obsessive comparison with others online (including through setting unrealistic expectations for body image); how people may curate a specific image of their life online; the impact that an over-reliance on online relationships, including relationships formed through social media, can have. • How to identify harmful behaviours online (including bullying, abuse or harassment) and how to report, or find support, if they have been affected by those behaviours. • The risks related to online gambling and gambling-like content within gaming, including the accumulation of debt. • How advertising and information is targeted at them and how to be a discerning consumer of information online, understanding the prevalence of misinformation and disinformation online, including conspiracy theories. • The risks of illegal behaviours online, including drug and knife supply or the sale or purchasing of illicit drugs online. • The serious risks of viewing online content that promotes self-harm, suicide or violence, including how to safely report this material and how to access support after viewing it.
Physical health and fitness	• The characteristics of a healthy lifestyle, including physical activity and maintaining a healthy weight, including the links between an inactive lifestyle and ill-health, including cardiovascular ill-health.

	• Factual information about the prevalence and characteristics of more serious health conditions. • That physical activity can promote wellbeing and combat stress. • The science relating to blood, organ and stem cell donation.
Healthy eating	• How to maintain healthy eating and the links between a poor diet and health risks, including tooth decay, unhealthy weight gain, and cardiovascular disease. • The risks of unhealthy weight gain, including increased risks of cancer, type 2 diabetes and cardiovascular disease. • The impacts of alcohol on diet and unhealthy weight gain.
Drugs, alcohol, tobacco and vaping	• The facts about which drugs are illegal, the risks of taking illegal drugs, including the increased risk of potent synthetic drugs being added to illegal drugs, the risks of illicit vapes containing drugs, illicit drugs and counterfeit medicines, and the potential health harms, including the link to poor mental health. • The law relating to the supply and possession of illegal substances. • The physical and psychological risks associated with alcohol consumption. What constitutes low risk alcohol consumption in adulthood, and the legal age of sale for alcohol in England. Understanding how to increase personal safety while drinking alcohol, including how to decrease the risks of having a drink spiked or of poisoning from potentially fatal substances such as methanol. 4. The physical and psychological consequences of problem-use of alcohol, including alcohol dependency. • The dangers of the misuse of prescribed and over-the-counter medicines. • The facts about the multiple serious harms from smoking tobacco (particularly the link to lung cancer and cardiovascular disease), the benefits of quitting and how to access support to do so. • The facts about vaping, including the harms posed to young people, and the role that vapes can play in helping adult smokers to quit.
Health protection and prevention, and understanding the healthcare system	• Personal hygiene, germs and how they are spread, including bacteria and viruses, treatment and prevention of infection, and about antibiotics. • Dental health and the benefits of good oral hygiene, including brushing teeth twice a day with fluoride toothpaste and cleaning between teeth, reducing consumption of sugar-containing food and drinks, and regular check-ups at the dentist. • How and when to self-care for minor ailments, and the role of pharmacists as knowledgeable healthcare professionals. • The importance of taking responsibility for their own health, and the benefits of regular self-examination and screening. • The facts and scientific evidence relating to vaccination, immunisation and antimicrobial resistance. The introduction of topics relating to vaccination and immunisation should be aligned with when vaccinations are offered to pupils. • The importance of sufficient good-quality sleep for good health, the importance of screen-free time before bed and removing phones from the bedroom, and how a lack of sleep can affect weight, mood and ability to learn. • The importance of healthy behaviours before and during pregnancy, including the importance of pre-conception health, including taking folic acid. The importance of pelvic floor health. Information on miscarriage and pregnancy loss, and how to access care and support. • How to navigate their local healthcare system: what a GP is; when to use A&E / minor injuries; accessing sexual health and family planning clinics; the role of

	local pharmacies; and how to seek help via local third sector partners which may have specialist services. • The concept of Gillick competence. That the legal age of medical consent is 16. That before this, a child's parents will have responsibility for consenting to medical treatment on their behalf unless they are Gillick competent to take this decision for themselves. Pupils should understand the circumstances in which someone over 16 may not be deemed to have capacity to make decisions about medical treatment.
Personal safety	• 1. How to identify risk and manage personal safety in increasingly independent situations, including around roads, railways – including level crossings- and water (including the water safety code), and in unfamiliar social or work settings (for example the first time a young person goes on holiday without their parents). • How to recognise and manage peer influence in relation to risk-taking behaviour and personal safety, including peer influence online and on social media. • How to develop key social and emotional skills that will increase pupils' safety from involvement in conflict and violence. These include skills to support self-awareness, self-management, social awareness, relationship skills and responsible decision making, as well as skills to recognise and manage peer pressure. • Understanding which trusted adults they can talk to if pupils are worried about violence and/or knife crime. • The law as it relates to knives and violence. Content and examples should relate to the local context and avoid using fear as an educational tool. Children should be taught that carrying weapons is uncommon, and should not be scared into the perception that many young people are carrying knives (which can lead to the misconception that they need to carry a knife too). • The risks and signs that they may be at risk of grooming or exploitation, and how to seek help where there is a concern.
Basic first aid	• 1. Basic treatment for common injuries and ailments. • Life-saving skills, including how to administer CPR.11 • The purpose of defibrillators, when one might be needed and who can use them.
Developing bodies	• 1. The main changes which take place in males and females, and the implications for emotional and physical health. • The facts about puberty, the changing adolescent body, including brain development. • About menstrual and gynaecological health, including: what is an average period; period problems such as premenstrual syndrome; heavy menstrual bleeding; endometriosis; and polycystic ovary syndrome (PCOS). When to seek help from healthcare professionals. • The facts about reproductive health, including fertility and menopause, and the potential impact of lifestyle on fertility for men and women.

Appendix 3: Parent form: withdrawal from sex education within RSE

TO BE COMPLETED BY PARENTS			
Name of child		Class	
Name of parent		Date	
Reason for withdrawing from sex education within relationships and sex education			
Any other information you would like the school to consider			
Parent signature			

TO BE COMPLETED BY SCHOOL	
Agreed actions from discussion with parents	