

Relationships and Sex Education Procedures

Drafted by: Kristopher Knight

Date of Approval by Governing Body:

27th November 2025

Review Date: November 2026

Person Responsible for Review:

Kristopher Knight

Person Responsible for Day-to-Day

Management: Susan Owen

Relationships and sex education procedures

Table of Contents

1. <i>Introduction</i>	3
2. <i>Statutory requirements</i>	3
3. <i>Delivery of RSE</i>	4
4. <i>Delivery of the curriculum</i>	4
5. <i>Terminology</i>	6
6. <i>Dealing with difficult questions</i>	6
7. <i>Working with parents</i>	6
8. <i>Working with external agencies</i>	7
9. <i>Withdrawal from lessons</i>	7
10. <i>Equality and accessibility</i>	8
11. <i>Safeguarding and confidentiality</i>	9
12. <i>Monitoring and review</i>	10
13. <i>RSE subject overview</i>	10
14. <i>Health education subject overview</i>	15

1. Introduction

These procedures aim to ensure that our Relationship and Sex Education (RSE) and our Health Education meet all legal requirements expected of an establishment delivering Secondary Education. Furthermore, there is a need for good and non-harmful relationships between our pupils, and an effective Relationship and Sex Education programme can encourage this.

The aims of RSE at our school are 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 sexuality and relationships.
- To ensure LGBTQ+ issues are discussed frequently, openly and to ensure that heteronormativity isn't the norm.
- Teach pupils the correct vocabulary to describe themselves and their bodies.
- Help pupils understand that healthy relationships are an important part of wellbeing.

2. Statutory requirements

Our procedures follow the statutory guidance given by the government (DfE). Aspects of RSE are infused within the day-to-day operation of our school; incorporated through the curriculum, both in content included in subject schemes of work, for example, science and religious studies, and through other planned learning opportunities in the school. They are captured in our written aims and expressed in the ethos and behaviours of everyone.

As a Secondary school, we must ensure that every registered pupil who is provided with secondary education at the school is provided with relationships and sex education.

Legal framework:

These procedures have due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

- Equality Act 2010
- 'The Relationships Education, Relationships and Sex Education (RSE) and Health Education (England) 2025'
- Children and Social Work Act 2017
- DfE (2023) 'Keeping children safe in education 2025'.
- DfE (2021) 'Teaching about relationships, sex and health'

3. Delivery of RSE

Our RSE and Health education is delivered through a variety of opportunities including:

- Designated lessons
- Use of external agencies and services
- School values
- Cross-curricular links
- Assemblies
- Drop-down days

The RSE and Health Education curriculum has been developed and will be monitored and reviewed, in consultation with teachers, pupils and parents, and in accordance with DfE recommendations.

We will gather the views of teachers, pupils, and parents in the following ways:

- Questionnaires
- Meetings
- Letters
- Training sessions.

The school will ensure that the curriculum remains in line with the DfE's 'Relationships Education, Relationships and Sex Education (RSE) and Health Education' guidance at all times.

The school will consider the context and views of the wider local community when developing the curriculum to ensure it is reflective of issues in the local area. The religious background of all pupils will also be considered when planning teaching, to ensure all topics included are appropriately handled. The curriculum is informed by topical issues in the school and wider community, to ensure it is tailored to pupils' needs, for example, if there was a local prevalence of specific sexually transmitted infections, our curriculum would be tailored to address this issue.

4. Delivery of the curriculum

Through effective organisation and delivery of the RSE and Health Education, we will ensure that:

- Core knowledge is sectioned into units of a manageable size.
- The required content is communicated to pupils clearly, in a carefully sequenced way, within a planned scheme of work.
- Teaching includes sufficient and well-chosen opportunities and contexts for pupils to embed new knowledge so that it can be used confidently in real-life situations.

RSE and Health Education complement several national curriculum subjects. Where appropriate, the school will look for opportunities to make links between the subjects and integrate teaching.

The RSE and Health Education curriculum will be delivered by appropriately trained members of staff. The curriculum will proactively address issues in a timely way in line with current evidence on pupils' physical, emotional, and sexual development. RSE and Health Education will be delivered in a non-judgemental, age-appropriate, factual, and inclusive way that allows pupils to ask questions in a safe environment.

Teaching of the curriculum reflects requirements set out in law, particularly in the Equality Act 2010, so that pupils understand what the law does and does not allow, and the wider legal implications of the decisions they make.

The school will integrate LGBTQ+ content into the RSE and Health Education curriculum – this content will be taught as part of the overall curriculum, rather than a standalone topic or lesson. LGBTQ+ content will be approached in a sensitive, age-appropriate, and factual way that allows pupils to explore the features of stable and healthy same-sex relationships.

All pupils are expected to learn about LGBTQ+ content, and parents do not have a statutory right to withdraw their children from lessons that include LGBTQ+ content.

The curriculum will be designed to focus on pupils of all gender identities and expressions and activities will be planned to ensure all are actively involved.

The school will ensure it delivers teaching on sensitive topics, e.g., the body, in a way that is appropriate and sensitive to the various needs of the school community, e.g., cultural background.

All teaching and resources are monitored by the curriculum leader for RSE and Health Education to ensure they are appropriate for the age and maturity of pupils, are sensitive to their religious backgrounds, and meet the needs of any SEND, if applicable.

Throughout every year group, appropriate diagrams, videos, books, games, discussions and practical activities will be used to assist learning. Inappropriate images, videos, etc. will not be used, and resources will be selected with sensitivity given to the age and cultural background of pupils.

Teachers will establish what is appropriate for one-to-one and whole-class settings and alter their teaching of the programmes accordingly. Teachers will ensure that pupils' views are listened to and will encourage them to ask questions and engage in discussion. Teachers will answer questions sensitively and honestly.

Teachers will focus heavily on the importance of marriage and healthy relationships when teaching RSE, though sensitivity will always be used to avoid stigmatising pupils on the basis of their home circumstances.

In teaching the curriculum, teachers will be aware that pupils may raise topics such as self-harm and suicide. When talking about these topics in lessons, teachers will be aware of the risks of encouraging these behaviours and will avoid any resources or material that appear as instructive rather than preventative.

Teachers will ensure lessons focus on challenging the perceived views of pupils based on protected characteristics through exploration of, and developing mutual respect for, those different to themselves.

5. Terminology

Pupils will be taught the anatomically correct names for body parts; the school will dispel myths and will also understand other names of body parts that can sometimes be used to replace the correct terminology. Lessons around keeping safe and how certain parts of the body should be private must be addressed to ensure pupils are not left vulnerable.

6. Dealing with difficult questions

It is important that all school staff feel comfortable taking RSE and Health Education classes and answer questions from pupils. If the teacher does not feel confident leading discussions, then that is likely to be reflected by the pupils, and their learning will be compromised.

The school provides regular professional development training in how to deliver sex education; this includes sessions on confidentiality, setting ground rules, handling controversial issues, responding to awkward questions and an introduction to the rationale of why teaching RSE and Health Education is so important. Staff training will include sessions on how to deal with difficult questions. There may still be times when staff are faced with a difficult question in class that they feel uncomfortable or ill-equipped to answer. In this case, they may wish to put the question to one side and seek advice from the Curriculum Leader for RSE and Health Education.

7. Working with parents

The school understands that parents' role in the development of their children's understanding of relationships and health is vital and will, therefore, engage parents as far as possible in their children's learning. This will include providing parents with frequent opportunities to understand and ask questions about the school's approach to RSE and Health Education.

The school will consult closely with parents when reviewing the content of the school's RSE and Health Education curriculum and will be given regular opportunities to voice their

opinions and concerns. The school will use the views of parents to inform decisions made about the curriculum content and delivery; however, parents will not be granted a 'veto' on curriculum content, and all final decisions will be the school's to make.

When in consultation with parents, the school will provide:

- The curriculum content, including what will be taught and when.
- Examples of the resources the school intends to use to deliver the curriculum.
- Information about parents' right to withdraw their child from non-statutory elements of RSE and Health Education.

The school will remain aware that the teaching of some aspects of the curriculum may be of concern to parents. If parents have concerns regarding RSE and Health Education, they may submit these via email to office@bb-hs.co.uk, or contact the school office to arrange a meeting with the curriculum leader for RSE and Health Education or the senior leader line managing RSE and Health Education.

8. Working with external agencies

Working with external agencies can enhance our delivery of RSE and Health Education and brings in specialist knowledge and different ways of engaging pupils.

External experts may be invited to assist from time to time with the delivery of the RSE and Health Education curriculum but will be expected to comply with the provisions of this procedure.

When working with external agencies, the school will ensure:

- A teacher is present throughout these lessons.
- The lesson the external expert has planned fits with the school's planned curriculum.
- The expert's credentials are checked before they are able to participate in delivery of the curriculum
- The expert's lesson plan is age-appropriate and accessible for the pupils.
- That the materials the expert intends to use, meets all pupils' needs, including those with SEND.
- That procedures for confidentiality are in place; this includes ensuring that the expert understands how safeguarding reports should be dealt with.

9. Withdrawal from lessons

The school will always recognise that parents have the right to request that their child is withdrawn from some or all of sex education delivered as part of statutory RSE.

The school will uphold that parents do not have a right to withdraw their child from the relationships or health elements of the programmes.

Requests to withdraw a child from sex education will be made in writing to the Headteacher. Before granting a withdrawal request, the Headteacher will discuss the request with the parents and, as appropriate, the child, to ensure their wishes are understood and to clarify the nature and purpose of the curriculum. The Headteacher will inform parents of the benefits of their child receiving RSE and any detrimental effects that withdrawal might have.

Following discussions with parents, the school will respect the parents' request to withdraw their child up to and until three terms before the child turns 16. After this point, if the child wishes to receive RSE rather than be withdrawn, the school will make arrangements to provide the pupil with RSE.

Pupils who are withdrawn from RSE will receive appropriate, purposeful education during the full period of withdrawal.

For requests concerning the withdrawal of a pupil with SEND, the Headteacher will liaise with the SENDCo and will take the pupil's specific needs into account when making their decision.

10. Equality and accessibility

The school will comply with the relevant requirements of the Equality Act 2010 and will ensure the curriculum does not discriminate against pupils because of any of the protected characteristics:

- Age
- Sex
- Race
- Disability
- Religion or belief
- Gender reassignment
- Pregnancy or maternity
- Marriage or civil partnership
- Sexual orientation

The school will consider the backgrounds, gender, age range, and needs of its pupils and determine whether it is necessary to put in place additional support for pupils with the above protected characteristics.

The school will design the RSE and Health Education curriculum to be inclusive of all pupils.

The school will be aware that some pupils are more vulnerable to exploitation, bullying, and other issues due to their characteristics, e.g., SEND or being LGBTQ+.

Teachers will understand that they may need to liaise with the SENDCo and be more explicit and adapt their planning or work to deliver appropriately the curriculum to pupils with SEND.

Where there is a need to tailor content and teaching to meet the needs of pupils at different developmental stages, the school will ensure the teaching remains sensitive, age-appropriate, and developmentally appropriate and is delivered with reference to the law.

The school will take steps to foster healthy and respectful peer-to-peer communication and behaviour between all pupils and provide an environment that challenges perceived limits on pupils based on their gender or any other characteristic.

The school will be actively aware of everyday issues such as sexism, misogyny, homophobia, and gender stereotypes and take positive action to build a culture within which these are not tolerated. Any occurrences of such issues will be identified and tackled promptly.

Sexual violence and sexual harassment are not acceptable and will not be tolerated. Any reports of sexual violence or sexual harassment will be handled in accordance with the school's Child Protection and Safeguarding.

11. Safeguarding and confidentiality

All pupils will be taught about keeping themselves safe, including online, as part of a broad and balanced curriculum.

To meet DfE's best practice advice, the DSL will be involved in the formulation of safeguarding related areas of the curriculum, as the knowledge and resources may help to address safeguarding issues more appropriately and effectively.

When teaching issues that are particularly sensitive for pupils of all ages, e.g., self-harm or suicide, teachers will be made aware of the risks of inadvertently encouraging, or providing instructions to, pupils.

Teaching of these subjects will always prioritise preventing harm to pupils as a central goal.

Confidentiality within the classroom is an important component of RSE and Health Education, and teachers are expected to respect the confidentiality of their pupils as far as is possible.

Teachers will, however, understand that some aspects of RSE and Health Education may lead to a pupil raising a safeguarding concern, e.g., disclosing that they are being abused, and that if a disclosure is made, the DSL will be alerted immediately. The teacher will upload the disclosure onto My Concern in line with the Safeguarding procedures.

Pupils will be made aware of how to raise their concerns or make a report and how their report will be handled – this includes the process for when they have a concern about a peer.

12. Monitoring and review

The curriculum leader for RSE and Health Education and senior leader line managing RSE and Health Education will be responsible for monitoring the quality of teaching and learning for the subject which will include a mixture of the following:

- Self-evaluations
- Surveys
- Topic reviews
- Learning walks
- Work scrutiny

13. RSE subject overview

RSE will continue to develop pupils' knowledge on the topics taught at a primary level, in addition to the content outlined in this section in line with the DfE's 'Relationships Education, Relationships and Sex Education (RSE) and Health Education' guidance

13.1 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 (Age of Marriage Act 2023).
- 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.

13.2 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.

13.3 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.
- 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.

13.4 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.

13.5 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.
- That 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.

14. Health education subject overview

The physical health and mental wellbeing curriculum will continue to develop pupils' knowledge on the topics taught at a primary level, in addition to the content outlined in this section.

14.1 Mental wellbeing

- 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.

14.2 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.

14.3 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.

14.4 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.

14.5 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.
- 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.