

# PSHE education

## What it covers and why it works

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KS1-2

## **PSHE education: what it covers and why it works**

There is compelling evidence that PSHE education — when taught well — helps keep children and young people safe, mentally and physically healthy and prepared for life and work. Yet there's sometimes a lack of understanding, or a misunderstanding, of what the PSHE education curriculum actually covers, and why.

We have therefore put together this handy breakdown of the PSHE education curriculum, to highlight why it is so important for schools to address each area. We've included key prevalence statistics for various issues, alongside relevant research and impact evidence to show how PSHE education can help and why all aspects of the PSHE education curriculum are there for good reason.

This will have a variety of uses. For example, you can use it in school to explain the rationale behind PSHE education content to parents or colleagues. Or it can be shared with anyone who is curious about what schools are doing, and can do, to support children and young people with these real-life challenges and opportunities through the curriculum.

We've broken down the curriculum into PSHE education's three core themes — Health and Wellbeing; Relationships; and Living in the Wider World (which includes a focus on economic wellbeing and careers) — and you will see which parts of each theme are currently covered in the [DfE's Statutory guidance for relationships, sex, and health education \(RSHE\)](#).

*PSHE education: what it covers and why it works* will be updated regularly to include new evidence and research and to reflect developments such as updates to statutory requirements.

## **Using this resource to support engagement with parents and carers**

Parents<sup>1</sup> are overwhelmingly supportive of PSHE education, and even more so when they fully understand its content and rationale. So effective communication with parents is crucial. This way parents can fully understand what is taught, why it's taught and how it's taught; and schools can ensure a partnership with parents that supports the best possible PSHE education for their child.

The PSHE Association has produced separate guidance to help schools communicate and meet with parents, but this summary will help you to share your rationale for each area of the curriculum when speaking to parents or explaining your approach. Sharing teaching materials with parents is also a key part of illustrating the 'what, why and how' — and we provide parent copies of all member materials — but on its own, this does not paint a full picture. So, we hope this guidance helps to further explain your school's approach to PSHE education.

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<sup>1</sup> Henceforth we will use the term 'parents' to signify parents and carers

## Health and Wellbeing: Key stages 1 and 2

The Health and wellbeing core theme of PSHE education includes food choices and exercise (and the impact this has on physical and mental health); drugs and alcohol; healthy sleep behaviour; first aid and emergency life-saving skills; mental health; puberty; and personal safety. This education directly supports children to be mentally and physically healthy, which in turn supports their education outcomes (research evidence shows that educational outcomes and health are closely linked ([Public Health England, 2014](#))).

The government introduced a statutory requirement for schools to teach this Health Education content alongside Relationships Education at key stages 1 and 2 in 2020. Here we break down aspects of physical and mental health education covered in PSHE education, including what is covered in the [statutory relationships, sex and health education \(RSHE\) guidance](#). We also include links to appropriate sources of evidence and encourage people to use sources such as the '[Youth Health Data](#)' tool from the Association for Young People's Health and the '[Smoking, drinking and drug use among young people](#)' survey data for further research and statistics.

### What we cover

### Why we cover it

Physical health  
(food choices,  
exercise, dental  
health, sleep)

There are concerns about food related health issues, such as obesity, in children and young people. Education gives young people an understanding of nutrition, influences on food choices, diet and exercise which can support healthier lifestyles. There are of course a number of contributory factors outside of individuals' control — not least the cost of living and easy access to cheap, unhealthy, fast and ultra-processed foods — so education can only do so much but still has a crucial part to play.

#### **Food choices:**

##### *Benefits of maintaining a healthy, balanced diet*

- There is strong evidence to suggest that maintaining a healthy, balanced diet is beneficial to the health and development of children, adolescents and adults ([Centers for Disease Control and Prevention, 2021](#)).

##### *Ultra-processed food and food choices*

- Children in the UK are consuming a large amount of ultra-processed foods, increasing their risk of experiencing poorer health (Chang et al., 2021), and need to be supported to make well-informed choices about what to eat (e.g. [NHS](#), date unknown).

##### *How PSHE education can help:*

- PSHE education can help children to develop healthier food habits and make informed choices about what food they eat, for example in the school canteen or when choosing lunch box items.

- [A 2014 evidence review](#) suggests that teaching about food choices in the PSHE curriculum, as part of a whole school approach, can have a positive impact on child health outcomes, in particular increasing their fruit and vegetable intake.
- Our '[Health Education' pack for key stage 1 and 2](#) will help schools cover all aspects of healthy food choices and physical activity, including those outlined in the statutory RSHE guidance.

*The RSHE statutory guidance states that, by the end of primary school, pupils should know:*

- what constitutes a healthy diet (including understanding calories and other nutritional content).
- the principles of planning and preparing a range of healthy meals.
- the characteristics of a poor diet and risks associated with unhealthy eating (including, for example, obesity and tooth decay) and other behaviours (e.g. the impact of alcohol on diet or health).

### **Physical exercise:**

*Children have insufficient physical exercise:*

- Less than half (47%) of 5-16-year-olds in England participate in sport or physical activity for an average of 60 minutes per day, as recommended by the Chief Medical Officer; approximately a third (30%) do less than an average of 30 minutes per day ([Sport England, 2022](#)).
- Physical activity levels are lowest among children aged 7-9-years-old ([Sport England, 2022](#)), suggesting that primary school pupils in lower-KS2 may benefit from greater encouragement and support to exercise.

*Benefits of physical exercise:*

- There is strong evidence to suggest that physical exercise is beneficial to the health and development of children, and that active children are less likely to become inactive adults ([Great Ormond Street Hospital \[GOSH\], 2023](#)).

*How PSHE education can help:*

- PSHE education can begin to tackle some of the barriers to physical exercise, including: broadening young people's understanding of exercise and where/when it can take place, challenging stereotypes relating to exercise which may prevent some from participating, and promoting greater understanding of the associated benefits.
- Teaching about physical activity in the curriculum — as part of a whole school approach — can have a positive impact on child health outcomes, including their willingness to engage in physical activity ([see 2014 evidence review of health promotion in schools](#)).

- Our ['Health Education' pack for key stage 1 and 2](#) will help schools cover all aspects of healthy food choices and physical activity, including those outlined in the statutory RSHE guidance.

*The RSHE statutory guidance states that, by the end of primary school, pupils should know:*

- the characteristics and mental and physical benefits of an active lifestyle.
- the importance of building regular exercise into daily and weekly routines and how to achieve this; for example, walking or cycling to school, a daily active mile or other forms of regular, vigorous exercise.
- the risks associated with an inactive lifestyle (including obesity).
- how and when to seek support including which adults to speak to in school if they are worried about their health.

### **Sleep:**

*Sleep requirements for children:*

- Children aged 3-5-years-old need 10-13 hours of sleep, including napping.
- Children and early adolescents aged 6-12-years-old need 9-12 hours of sleep – ([GOSH, 2023](#)).
- Lack of sleep has significant impact on physical and mental health, and the ability to learn.

*How PSHE education can help:*

- PSHE education can help communicate the importance of sleep to physical and mental health and promote healthy sleep habits and routines, using resources such as ['The Sleep Factor' lesson packs](#), produced in collaboration with Evelina Children's Hospital.

*The RSHE statutory guidance states that, by the end of primary school, pupils should know:*

- about the importance of sufficient good quality sleep for good health and how a lack of sleep can affect weight, mood and ability to learn.

### **Dental health:**

*Tooth decay is prevalent from an early age and poor oral health causes multiple harms:*

- In 2022, approximately a quarter (24%) of 5-year-old children in England had already experienced dental decay ([National Dental Epidemiology Programme \[NDEP\], 2023](#)).
- Poor oral health impacts children and families. It affects children's ability to eat, smile and socialise. It also causes pain, infection, school absences and expenses.

	<p><i>Poor oral health is largely preventable:</i></p> <ul style="list-style-type: none"> <li>• Thankfully, poor oral health is largely preventable (<a href="#">NDEP, 2023</a>). Pupils can be taught how to brush and floss their teeth effectively, as well how to recognise foods and drinks that may adversely harm their teeth, during PSHE education.</li> </ul> <p><i>How PSHE education can help:</i></p> <ul style="list-style-type: none"> <li>• Resources such as <a href="#">our Dental Health lesson pack for key stages 1 and 2</a> help to teach pupils healthy dental hygiene routines and help them to understand what daily habits help or harm dental health.</li> </ul> <p><i>The RSHE statutory guidance states that, by the end of primary school, pupils should know:</i></p> <ul style="list-style-type: none"> <li>• about dental health and the benefits of good oral hygiene and dental flossing, including regular check-ups at the dentist.</li> </ul>
Drug education	<p><b>Tobacco:</b></p> <p><i>Smoking is particularly detrimental to children and adolescents:</i></p> <ul style="list-style-type: none"> <li>• The younger someone begins smoking, the more harm it is likely to cause to their health, 'because early uptake is associated with subsequent heavier smoking, higher levels of dependency, a lower chance of quitting, and higher mortality' (<a href="#">Action on Smoking and Health [ASH], 2019</a>).</li> </ul> <p><i>Smoking is declining among children and adolescents, but remains a concern:</i></p> <ul style="list-style-type: none"> <li>• In 2018, 16% of 11-15-year-olds reported smoking at least once; with 3% smoking regularly. This highlights the need to continue efforts to prevent children and adolescents smoking by raising awareness of its harmfulness.</li> <li>• There is some recent research from <a href="#">University College London</a> which suggests that the steady decline in young people taking up smoking has plateaued since the covid-19 pandemic.</li> </ul> <p><b>Vaping:</b></p> <p><i>There has been a significant increase in vaping among children and young people in the past few years:</i></p> <ul style="list-style-type: none"> <li>• In 2023, 21% of 11-17-year-olds had tried vaping, up from 14% in 2020. Additionally, approximately half (53%) are aware of e-cigarette promotions in shops and approximately a third (32%) are aware of promotional content online. (<a href="#">Action on Smoking and Health [ASH], 2019</a>).</li> </ul>

**Alcohol:**

*Alcohol poses direct risks to physical health but also related dangers associated with an increase in risk taking behaviour and negative effects on mental health.*

The [NHS \(2022\)](#) states that:

- Drinking alcohol can damage a child's health, even if they're 15 or older. It can affect the normal development of vital organs and functions, including the brain, liver, bones and hormones.
- Beginning to drink before age 14 is associated with increased health risks, including alcohol-related injuries, involvement in violence, and suicidal thoughts and attempts.
- Drinking at an early age is also associated with risky behaviour, such as violence, having more sexual partners, pregnancy, using drugs, employment problems and drink driving.

**Drugs:**

*Statistics suggest that illicit drug use has generally declined over time among young people, but issues remain with some substances and behaviours, and how they link with other factors such as wellbeing:*

- It is difficult to give accurate estimates of young people's drug use, due to the changing popularity and availability of certain illegal substances, and issues with the reliability of young people choosing to self-report, given the illegal nature of the substances. Although the vast majority of primary aged children are unlikely to be involved in illegal drug use themselves, they may be aware of drug use amongst older siblings, peers or family or community members. Being introduced to foundational learning, such as some of the more common risks of illegal drugs in key stage 2, will prepare pupils for more detailed learning about this topic in the secondary phase.
- According to the [Smoking, Drinking and Drug Use](#) survey 2021, there has been a fall in the prevalence of both lifetime and recent illicit drug use, with 18% of 11-15 year old pupils reporting they had ever taken drugs (24% in 2018), 12% saying they had taken drugs in the last year (17% in 2018), and 6% in the last month (9% in 2018).
- The same survey also found that pupils aged 11-15 were more likely to have smoked, drank alcohol or taken drugs if they reported having low overall wellbeing, and also if their social time regularly involved meeting up with friends outside their own home.

*How PSHE education can help:*

- PSHE education supports children and young people to recognise and assess risk in their health decisions as they grow. In key stage 1, this will focus on keeping safe around household products and medicines, and will gradually develop to an awareness of smoking, alcohol and, eventually, illegal drugs.

	<ul style="list-style-type: none"> <li>• There is <a href="#">evidence</a> to suggest that teaching about health choices in the PSHE curriculum, as part of a whole school approach, can have a positive impact on child health outcomes — for example reducing the chances of engaging in cigarette use.</li> <li>• Studies have found that teaching drug education (including teaching about alcohol and tobacco) can help children to make healthier choices in adolescence and into adulthood (<a href="#">see Pro Bono Economics Literature Review Evaluating the Impact of PSHE on Students' Health, Wellbeing and Academic Attainment</a>).</li> <li>• See our <a href="#">Drugs and Alcohol Education packs</a> for a comprehensive range of suitable key stage 3 and 4 lessons.</li> </ul> <p><i>The RSHE statutory guidance states that, by the end of primary school, pupils should know:</i></p> <ul style="list-style-type: none"> <li>• the facts about legal and illegal harmful substances and associated risks, including smoking, alcohol use and drug-taking.</li> </ul>
<p>Mental health and emotional wellbeing</p>	<p><i>Most mental health difficulties first begin during childhood, adolescence or early adulthood:</i></p> <ul style="list-style-type: none"> <li>• 75% of mental disorders begin before the age of 25 (<a href="#">Uhlhaas et al., 2023</a>).</li> <li>• Children and young people from disadvantaged backgrounds are more likely to develop mental health difficulties (<a href="#">Newlove-Delgado et al., 2023</a>), as well as less likely to develop high mental health strengths (<a href="#">O'Connor et al., 2022</a>), such as self-regulation and social competence, that can help them to navigate life's challenges (Hope et al., 2019; <a href="#">O'Connor et al., 2025</a>; <a href="#">Pearce et al., 2021</a>; <a href="#">Rougeaux et al., 2020</a>).</li> <li>• This highlights the importance of teaching pupils knowledge, understanding, attitudes and skills that can support them to both take care of their mental health and wellbeing and recognise when it is important to seek support from a trusted adult, such as a teacher, parent, carer or other family member.</li> </ul> <p><i>Prevalence of mental health difficulties in England:</i></p> <ul style="list-style-type: none"> <li>• The percentage of 8- to 16-year-olds in England with a probable mental disorder rose from 12.5% in 2017 to 20.3% in 2023 (<a href="#">Newlove-Delgado et al., 2023</a>).</li> <li>• 15.7% of 8- to 10-year-olds in England had a probable mental disorder in 2023 (17.7% of boys; 13.6% of girls; Newlove-Delgado et al., 2023).</li> <li>• The percentage of 5- to 16-year-olds in England with an emotional disorder, such as anxiety or depression, increased from 3.9% in 2004 to 6% in 2017 (<a href="#">Taxiarchi et al., 2025</a>).</li> </ul> <p><i>Increase in unhappiness among children and young people in the UK:</i></p> <ul style="list-style-type: none"> <li>• The percentage of 10- to 15-year-olds in the UK who reported feeling unhappy with their life as a whole increased from 3.8% to 8.8% between 2009/10 and 2022/23; the percentage who reported feeling unhappy with their appearance increased from 11.4% to 15.1% during this period (<a href="#">Chollet et al., 2025</a>).</li> </ul>

*How PSHE education can help:*

- PSHE education makes an important contribution to a whole-school approach to promoting mental health and wellbeing, including in relation to supporting social and emotional learning, raising awareness and signposting to where children can get further help if required.
- A meta-analysis of universal school-based mental health education programmes involving over 63,000 children and young people between the ages of 8- and 18-year-old found that such programmes significantly improve symptoms of anxiety and depression, and that programmes which help children and young people to understand and manage their attention, thoughts, behaviour and emotions are more effective at reducing symptoms of anxiety than mindfulness-based programmes ([Hayes et al., 2025](#)).
- A systematic review and meta-analysis of universal school-based social and emotional learning programmes involving over 575,000 children and young people between the ages of 4- and 18-years-old found that such programmes significantly improve a range of outcomes, including school climate; social and emotional skills; peer relationships; prosocial behaviours; externalising behaviours, such as aggression, violence and bullying; emotional distress; and school functioning, such as attendance, on-task behaviour and attainment ([Cipriano et al., 2023](#)). Programmes that are sequenced, active, focused and explicit (SAFE) are more effective than programmes lacking these components ([Durlak et al., 2011](#); [Cipriano et al., 2023](#)); [Foundations for Wellbeing](#) is a SAFE programme.
- There is widespread recognition of PSHE education's role in supporting children and young people's mental health, including the Coalition on Youth Mental Health in Schools, made of up leading multi-academy trusts and independent schools, which stated in [its 2021 inquiry report](#) that '*PSHE education can improve a student's physical and psychosocial well-being, in turn improving academic outcomes*' and called for weekly timetabled PSHE lessons taught by specialist teachers to support children and young people's mental health.
- [The PSHE Association guidance and lesson pack on teaching about mental health and emotional wellbeing](#) covers a range of topics from recognising and dealing with anxiety to exploring change, loss and grief.
- Many other PSHE education lessons, such as lessons on [sleep](#), [friendship and bullying](#), and [climate change](#), have strong potential to indirectly support mental health.

*The RSHE statutory guidance states that, by the end of primary school, pupils should know:*

- that mental wellbeing is a normal part of daily life, in the same way as physical health.
- that there is a normal range of emotions (e.g. happiness, sadness, anger, fear, surprise, nervousness) and scale of emotions that all humans experience in relation to different experiences and situations.
- how to recognise and talk about their emotions, including having a varied vocabulary of words to use when talking about their own and others' feelings.
- how to judge whether what they are feeling and how they are behaving is appropriate and proportionate.

	<ul style="list-style-type: none"> <li>• the benefits of physical exercise, time outdoors, community participation, voluntary and service-based activity on mental wellbeing and happiness.</li> <li>• simple self-care techniques, including the importance of rest, time spent with friends and family and the benefits of hobbies and interests.</li> <li>• isolation and loneliness can affect children and that it is very important for children to discuss their feelings with an adult and seek support.</li> <li>• that bullying (including cyberbullying) has a negative and often lasting impact on mental wellbeing.</li> <li>• where and how to seek support (including recognising the triggers for seeking support), including whom in school they should speak to if they are worried about their own or someone else's mental wellbeing or ability to control their emotions (including issues arising online).</li> <li>• it is common for people to experience mental ill health. For many people who do, the problems can be resolved if the right support is made available, especially if accessed early enough.</li> </ul>
<p>Basic first aid and emergency life-saving skills</p>	<p><i>Improving basic first aid and emergency life-saving skills saves lives:</i></p> <ul style="list-style-type: none"> <li>• Survival rates for out of hospital cardiac arrests are low, with fewer than 1 in 10 surviving, but according to the <a href="#">British Heart Foundation</a>, nearly 1 in 4 could survive if all young people are trained with lifesaving CPR skills.</li> <li>• Research shared by the <a href="#">British Red Cross</a> shows just 5% of adults have the skills and confidence to provide first aid in emergency situations.</li> <li>• According to the <a href="#">Every Child a Lifesaver</a> coalition, 95% of parents support first aid being taught in schools.</li> </ul> <p><i>How PSHE education can help:</i></p> <ul style="list-style-type: none"> <li>• Covering this content will give all children knowledge and skills to carry out basic ELS when required, therefore creating a safer environment for children, in and out of school.</li> <li>• Search the range of <a href="#">health education resources</a> highlighted on our site for lesson plans on covering first aid.</li> </ul> <p><i>The RSHE statutory guidance states that, by the end of primary school pupils should know:</i></p> <ul style="list-style-type: none"> <li>• how to make a clear and efficient call to emergency services if necessary.</li> <li>• concepts of basic first-aid, for example dealing with common injuries, including head injuries.</li> </ul>
<p>Puberty / the changing adolescent body</p>	<p><i>Health Education is designed to prepare pupils for the onset of puberty:</i></p> <ul style="list-style-type: none"> <li>• <a href="#">The NHS says that:</a> The average age for girls to start puberty is 11, while for boys the average age is 12. But it's perfectly normal for puberty to begin at any point between the ages of 8 and 13 in girls and 9 and 14 in boys, hence the need to cover the physical and emotional impact of puberty before it starts where possible, per current statutory Health Education guidance which states: 'Puberty</li> </ul>

*including menstruation should be covered in Health Education and should, as far as possible, be addressed before onset. This should ensure male and female pupils are prepared for changes they and their peers will experience.'*

- Whilst historically it was common for children to experience the physical changes of puberty without any understanding of what was happening to their bodies, the statutory Health Education guidance recognises the importance for children's mental and physical wellbeing of their being adequately prepared for and understanding those changes before they happen.
- Being prepared for physical changes including body hair growth, menstruation, spots, wet dreams, and body odour, together with their implications for personal hygiene, is a vital element of statutory Health Education for all pupils. This is not about sexuality, but rather the facts relating to the physical and emotional changes of puberty, hence the government including it in statutory Health Education requirements rather than RSE.

*How PSHE education can help:*

- [The Changing and growing up lesson pack for KS1-2](#) helps to prepare pupils for the physical and emotional changes that take place as they grow, including those that happen during puberty. The materials will support you to meet statutory Relationships and Health Education requirements in an age (and stage) appropriate way.

*The RSHE statutory guidance states that, by the end of primary school, pupils should know:*

- key facts about puberty and the changing adolescent body, particularly from age 9 through to age 11, including physical and emotional changes.
- about menstrual wellbeing including the key facts about the menstrual cycle.

Personal safety

*Prevalence of accidents in the home:*

- According to [Royal Society for the Prevention of Accidents \(RosPA\)](#) data, each year in the UK, accidents in the home cause more than 6,000 deaths and 2.7 million trips to A and E, with heat- and fall-related hazards causing the most severe injuries.
- Accidents to children are a major cause of preventable death, serious injury and long-term disability. They take place for many reasons, including children taking things too far when playing (e.g. showing off with friends), inquisitiveness, and inexperience ([ROSPA](#)).

*Prevalence of accidents on transport or when travelling:*

- Children and young people are one of the most vulnerable road user groups. During 2018-2020, 5,164 children were killed or

seriously injured on England's roads, with a rise in the number of casualties between the ages of five to seven, and eight to eleven ([Office for Health Improvement and Disparities](#)).

- During 2020-21, there were 3,942 incidents on the railways involving children and young people, including trespassing on train lines ([Network rail trespass toolkit](#)).

*How PSHE education can help:*

- PSHE education can play a key role in preventing accidents to children by helping pupils to identify risks such as those within the home or that could occur while travelling, and providing them with tools to assess and minimise these risks.
- At the same time, PSHE education should not paint a picture of the world being a place of endless risk, or that it is possible to avoid risk entirely. It should instead support children to understand risk and make informed and educated decisions.
- While learning about personal safety is not currently included within statutory RSHE requirements, it is a crucial part of the PSHE education curriculum and links to various aspects of the statutory content.
- Resources available to schools include [PSHE Association 'Road and Rail Safety' lesson packs for key stages 1 and 2](#), where pupils explore potential hazards, identify risks and develop the skills to make safe decisions while travelling and as they develop independence. Also see our ['Keeping safe in the home' lessons](#) to help pupils identify and manage hazards.

## Relationships: Key stages 1 and 2

The Relationships core theme includes learning about family life; positive friendships and managing conflict; bullying; safe and unsafe relationships; consent and respect for others. As outlined in the [Sex Education Forum's review of the evidence base for relationships and sex education](#), this education supports children to develop healthy relationships with others, in an age-appropriate way, reduces a range of harms to children as they grow, and supports them to seek help should they experience harm.

The government introduced a statutory requirement for schools to cover this Relationships Education content alongside Health Education at key stages 1 and 2 in 2020. Here we break down aspects of Relationship Education covered in PSHE education, including what is covered in the [statutory Relationships, Sex and Health Education \(RSHE\) guidance](#).

### What we cover

### Why we cover it

Friendship and bullying

*Prevalence and impact of bullying:*

- 24% of pupils aged 4-18 said they had been bullied in recent weeks, according to [a 2022 survey of over 30,000 children and young people by the Anti-Bullying Alliance](#). This figure was even higher for pupils receiving free school meals (30%) and pupils with SEND (31%). 40% of surveyed young people reported being bullied in the previous 12 months.

- Experiencing bullying is associated with both short- and long-term impacts on mental health, emotional wellbeing, and sense of belonging in school. And the broader impacts upon school and life outcomes — for both those targeted and those who carry out bullying behaviour — are well-documented. For example, the Anti-Bullying Alliance survey also found that 21% of children who had experienced bullying daily had truanted in the last 12 months.

*How PSHE education can help:*

- According to the [Youth Endowment Fund](#), there is strong evidence that anti-bullying programmes, which include teaching PSHE education along with other whole-school approaches, can be effective at reducing bullying in school. Furthermore, bullying at school is associated with later involvement in violence, so these programmes can have ongoing impacts in addressing antisocial behaviour in young people.
- A [range of studies](#) demonstrate that PSHE education has a significant impact on reducing instances of bullying behaviours, sometimes by as much as 20%. [A meta-analysis of these studies](#) also indicates that there is evidence to suggest that PSHE-type anti-bullying interventions can have a positive impact on the academic achievements of students.
- According to an October 2023 YouGov survey of just under 1000 UK parents, 93% of parents believe schools have a responsibility to teach awareness and prevention of bullying<sup>2</sup>.
- A systematic review and meta-analysis of the effectiveness of anti-bullying programmes in schools by Ttofi et al (2011) suggested that school-based anti-bullying programmes are effective ([see Pro Bono Economics Literature Review Evaluating the Impact of PSHE on Students' Health, Wellbeing and Academic Attainment](#) for references to this and others relevant studies).
- Schools can draw on sources of support such as [the PSHE Association 'Friendship and bullying' lesson suite and guidance](#) in which key stage 1 and 2 pupils learn about making friends, kindness, how to manage falling out, what to do if they witness unkind behaviour, the value of friendships, overcoming challenges, how to respond to bullying behaviour, the impact of bullying and how to seek support.

*The RSHE statutory guidance states that, by the end of primary school, pupils should know:*

- the importance of respecting others, even when they are very different from them (for example, physically, in character, personality or backgrounds), or make different choices or have different preferences or beliefs.
- practical steps they can take in a range of different contexts to improve or support respectful relationships.
- the conventions of courtesy and manners.
- the importance of self-respect and how this links to their own happiness.

<sup>2</sup> All figures, unless otherwise stated, are from YouGov Plc. Total sample size was 4,317 adults, of whom 928 were parents of 5-18 year olds. Fieldwork was undertaken between 18th - 20th October 2023. The survey was carried out online. The figures have been weighted and are representative of all UK adults (aged 18+).

- that in school and in wider society they can expect to be treated with respect by others, and that in turn they should show due respect to others, including those in positions of authority.
- about different types of bullying (including cyberbullying), the impact of bullying, responsibilities of bystanders (primarily reporting bullying to an adult) and how to get help.
- what a stereotype is, and how stereotypes can be unfair, negative or destructive.
- the importance of permission-seeking and giving in relationships with friends, peers and adults.

Teaching about preventing and tackling bullying as part of a whole school approach will also help schools to meet important statutory safeguarding duties as outlined in the DfE's ['Keeping children safe in education' guidance](#).

## Families

### *Types of families*

- In 2022, there were 19.4 million families in the UK. Married or civil-partnered couple families accounted for the majority of families in 2022 (66%), while cohabiting-couple families accounted for almost 1 in 5 families (19%) and lone-parent families accounted for the remaining 15% ([ONS](#)).

### *The role of the family and its impact on wellbeing:*

- Data from [the Children's Commissioner 'Big Ask' survey](#) found that where children were unhappy with their family life, they were 9 times more likely to be unhappy with their life overall, and 70% of them were unhappy with their mental health. Children also aspire to family life in their own future: 37% of 6-8-year-olds and 26% of 9-17 year-olds said that starting a family of their own was one their main aspirations when they grow up.

### *How PSHE education can help:*

- PSHE education has a role in supporting children to recognise what safe, healthy, happy family life looks like, the care they can expect to receive, and acceptance of a wide range of family setups.
- Resources available to support schools include the PSHE Association's ['Committed relationships and family life' materials](#).

### *The RSHE statutory guidance states that, by the end of primary school, pupils should know:*

- that families are important for children growing up because they can give love, security and stability.
- the characteristics of healthy family life, commitment to each other, including in times of difficulty, protection and care for children and other family members, the importance of spending time together and sharing each other's lives.
- that others' families, either in school or in the wider world, sometimes look different from their family, but that they should respect those

	<p>differences and know that other children’s families are also characterised by love and care.</p> <ul style="list-style-type: none"> <li>• that stable, caring relationships, which may be of different types, are at the heart of happy families, and are important for children’s security as they grow up.</li> <li>• that marriage represents a formal and legally recognised commitment of two people to each other which is intended to be lifelong.</li> <li>• how to recognise if family relationships are making them feel unhappy or unsafe, and how to seek help or advice from others if needed.</li> </ul>
Safe and unsafe relationships	<p><i>Prevalence of harassment, abuse and exploitation:</i></p> <ul style="list-style-type: none"> <li>• <a href="#">NSPCC research</a> estimates that approximately 1 in 20 children in the UK have been sexually abused, with 90% of this abuse being by someone they know. Approximately one-third of child sexual abuse is committed by under 18’s. Children may be unaware they are being exposed to something that is wrong and lack the ability to understand and verbalize their experiences (<a href="#">McElvaney, 2019</a>).</li> <li>• Despite willingness to educate their children on child sexual abuse (CSA), research suggests that caregivers find it difficult to address the issue alone, and may often lack the vocabulary and access to the vocabulary, CSA related knowledge and developmentally appropriate materials to facilitate these conversations (<a href="#">Prikhidko &amp; Kenny, 2021</a>); or, for example, focus only on danger from strangers, and not known individuals.</li> <li>• October 2023 YouGov polling of just under 1000 parents<sup>3</sup> showed that nearly 9 out of 10 (88%) parents feel that schools and parents have a shared responsibility to teach children about digital safety issues including fake news, negative online influencers, sending/receiving sexual images (only 6% think it's parents' responsibility alone). 95% of parents polled by YouGov also felt schools had a responsibility to teach about grooming and abusive behaviour online.</li> </ul> <p><i>How PSHE education can help:</i></p> <ul style="list-style-type: none"> <li>• PSHE education has the potential to help children recognise safe and unsafe relationships, identify behaviours that are abusive, and builds their confidence to seek support, should they experience or witness abuse. In this way, PSHE education is a key safeguarding tool.</li> <li>• A <a href="#">2017 Public Health England report on child sexual exploitation (CSE)</a> found that the existing body of evidence ‘repeatedly highlights the critical role of Personal, Social, Health and Economic (PSHE) and Relationships and Sex Education (RSE) in addressing these issues’.</li> <li>• <a href="#">A Cochrane review (2015)</a> found that ‘children who are taught about preventing sexual abuse at school are more likely to tell an adult if they had, or were actually experiencing sexual abuse’.</li> <li>• The DfE published a comprehensive research report ‘<a href="#">Teaching relationships education to prevent sexual abuse</a>’ in September 2024 which emphasised the importance of a well-rounded, inclusive RSE curriculum that fosters healthy, respectful relationships and helps children and</li> </ul>

<sup>2</sup> All figures, unless otherwise stated, are from YouGov Plc. Total sample size was 4,317 adults, of whom 928 were parents of 5-18-year olds. Fieldwork was undertaken between 18th - 20th October 2023. The survey was carried out online. The figures have been weighted and are representative of all UK adults (aged 18+).

young people to recognise and report abusive behaviour. The report recommends that age-appropriate relationships education must begin early (*‘the literature provides evidence that relationships and sex education can be more effective when introduced early in a child’s life before sexual activity begins’*.) and build as pupils progress through education (*‘The evidence reviewed suggests that education that builds on previous lessons and has a longer duration is more effective than one-off modules’*).

*The RSHE statutory guidance states that, by the end of primary school, pupils should know:*

- about the concept of privacy and the implications of it for both children and adults; including that it is not always right to keep secrets if they relate to being safe.
- that each person’s body belongs to them, and the differences between appropriate and inappropriate or unsafe physical, and other, contact.
- how to respond safely and appropriately to adults they may encounter (in all contexts, including online) whom they do not know.
- how to recognise and report feelings of being unsafe or feeling bad about any adult.
- how to ask for advice or help for themselves or others, and to keep trying until they are heard.
- how to report concerns or abuse, and the vocabulary and confidence needed to do so.

Consent

*Exposure to harmful content and messaging which may affect children’s concept of consent:*

- Primary aged children are also increasingly exposed to harmful content which may damage their understanding of consent. The Children’s Commissioner found that [10% of children aged 16-21](#) had seen online pornography by age 9, increasing to 27% by age 11. The average age at which children first see pornography is just under 13.

*How PSHE education can help:*

- [The Rotherham CSE report](#) from Alexis Jay OBE stated that *‘The young people we met in the course of the Inquiry were scathing about the sex education they received at school’* and recommended that *‘Relationships and sex education must be provided by trained practitioners in every educational setting for all children’* and include *‘internet safety and all forms of bullying and harassment and the getting and giving of consent.’*
- Teaching about consent in primary school is essential in establishing the building blocks young people need to understand sexual consent in secondary school. Teaching in primary school is likely to start by looking at everyday scenarios where children ask for and give permission; for example, borrowing or sharing toys and classroom equipment. It will develop into exploring consent within friendships, for example asking to play particular games or negotiating appropriate touch (hugs, holding hands, playing tag, etc.). Without these foundations, learning how to negotiate sexual consent in key stage 3-4 is significantly more challenging.

- Resources to support schools to cover this content in an age-appropriate way include the PSHE Association's [Consent lesson pack](#).

*The RSHE statutory guidance states that, by the end of primary school, pupils should know about:*

- the importance of permission-seeking and giving in relationships with friends, peers and adults.
- what sorts of boundaries are appropriate in friendships with peers and others (including in a digital context).
- the characteristics of friendships, including mutual respect, truthfulness, trustworthiness, loyalty, kindness, generosity, trust, sharing interests and experiences and support with problems and difficulties.
- that in school and in wider society they can expect to be treated with respect by others, and that in turn they should show due respect to others, including those in positions of authority.

## Living in the wider world: Key stages 1 and 2

The Living in the wider world core theme of PSHE education prepares children to participate in wider society, by covering learning about shared responsibilities and communities; economic wellbeing; aspirations and careers; and digital and media literacy. Although some teaching and learning in this theme is non-statutory, there are significant overlaps with the relationships, sex and health education statutory guidance. Economic wellbeing and careers education, for example, are included in the 'Living in the Wider World' strand of the personal, social, health and economic (PSHE) education curriculum. Though unlike relationships, sex and health aspects of the subject, economic wellbeing and careers education are not yet statutory (beyond a requirement to teach about gambling referenced in statutory RSHE guidance), they are a crucial part of any schools' PSHE provision. There is a growing consensus that these should be compulsory in all schools; currently they are only compulsory in independent schools, as under the Independent School Standards, schools have to teach the full PSHE education curriculum, including that which relates to economic wellbeing and careers education.

### What we cover

### Why we cover it

Economic wellbeing

*Children develop attitudes to money from a young age:*

- Habits and attitudes relating to money are developing by the age of 7, highlighting the need to support a positive relationship with money and the skills and attitudes to manage finances early ([Whitebread & Bingham for the Money Advice Service](#)).
- Disadvantaged young people are less likely to be taught about finances in the late primary phase, affecting these skills into teenage years and perpetuating inequalities ([Anders, Jerrim & MacMillan](#)).

*Children are increasingly exposed to online financial harms:*

- Financial harms are present in young people's lives including in-game chance-based mechanisms that borrow techniques from gambling such as 'loot boxes' and the presence of desirable 'collectibles', making it difficult for young people to track their spending. These are evidenced to cause financial and emotional harm ([Ash, Gordon & Mills](#)) and are prevalent in online games deemed suitable for children ([Zendle et al](#)).

*How PSHE education can help:*

- PSHE education can support children to recognise the emotional and behavioural aspects of their financial choices, for example, the influences on them to spend money on particular things (targeted advertising, in-app purchases, peer pressure and internal influences), and how to manage these. It can help them recognise the feelings, values and beliefs associated with money and how this can affect both people's wellbeing and their spending decisions. There is also significant overlap with other areas of the PSHE curriculum, such as digital literacy, mental health and relationships.
- Young people who have had financial education are more likely to save frequently, have a bank account, and be confident in managing their money ([MaPS financial education for primary schools](#)).
- Resources to support schools to teaching about economic wellbeing include the [PSHE Association Money and wellbeing](#) lesson pack.

<p>Careers education</p>	<p><i>Careers education is important to children and young people:</i></p> <ul style="list-style-type: none"> <li>• In the Children Commissioner’s <a href="#">Big Ask Big Answer survey</a> of children and young people, 69% of 9-17 year olds said that having a good job or career was one of their main priorities when they grow up, and 37% of children aged 9-17 said that this was one of their main worries about the future.</li> <li>• Research shows that children's career aspirations, evident from as early as 7 years old, tend to persist into adolescence (<a href="#">Howard &amp; Walsh, 2011</a>). And from ages 6 to 8, children start recognising and associating job roles with aspects of identity such as gender, a process influenced by societal norms and family expectations (<a href="#">Porfeli &amp; Lee, 2012</a>).</li> </ul> <p><i>How PSHE education can help:</i></p> <ul style="list-style-type: none"> <li>• PSHE education can support children to develop an understanding of a wider range of career options available to them, routes into these careers and to challenge potential stereotypes about career choices.</li> <li>• <a href="#">A 2023 Ofsted review into careers guidance in schools</a> stated that ‘<i>the available evidence does suggest it can be more effective when it is specifically timetabled within the PSHE curriculum</i>’, and signposts the PSHE Association Programme of study as something schools can draw upon to help plan their careers education content.</li> </ul>
<p>Community and responsibility</p>	<p><i>There are existing duties for schools to teach about community and responsibility:</i></p> <ul style="list-style-type: none"> <li>• <a href="#">DfE: Promoting British Values as part of SMSC in schools</a> states that pupils must be encouraged to regard people of all faiths, races and cultures with respect and tolerance. Schools should promote the fundamental British values of democracy, the rule of law, individual liberty, and mutual respect and tolerance of those with different faiths and beliefs.</li> <li>• Through their SMSC provision, schools should: further tolerance and harmony between different cultural traditions by enabling students to acquire an appreciation of and respect for their own and other cultures.</li> </ul> <p><i>How PSHE education can help:</i></p> <ul style="list-style-type: none"> <li>• PSHE education, helps pupils to recognise their role, both within school and the wider community. They begin to develop an understanding of their rights and responsibilities as members of society. PSHE is an opportunity to celebrate diversity and promote a sense of inclusion and belonging for all children, from all backgrounds.</li> </ul> <p><i>The RSHE statutory guidance states that, by the end of primary school, pupils should know about:</i></p> <ul style="list-style-type: none"> <li>• the conventions of courtesy and manners.</li> <li>• the importance of self-respect and how this links to their own happiness.</li> </ul>

	<ul style="list-style-type: none"> <li>• that in school and in wider society they can expect to be treated with respect by others, and that in turn they should show due respect to others, including those in positions of authority.</li> <li>• what a stereotype is, and how stereotypes can be unfair, negative or destructive.</li> <li>• that others' families, either in school or in the wider world, sometimes look different from their family, but that they should respect those differences and know that other children's families are also characterised by love and care.</li> </ul>
Digital and media literacy	<p><i>Children are engaged with the online world from a very young age:</i></p> <ul style="list-style-type: none"> <li>• 87% of 3-4 year olds went online in 2022, and 9 in 10 3-17-year-olds played online games, with a significant proportion of this age group playing games with people they didn't know offline (<a href="#">Ofcom 2022</a>).</li> <li>• As reported by parents, more than half of 8-11-year-olds (55%) owned a mobile phone, a significant increase on children aged 3-4 and 5-7 (both at 20%) (<a href="#">Ofcom 2023</a>).</li> <li>• It was most common for 8-11-year-olds to have profiles on TikTok (32%) and WhatsApp (32%), ahead of YouTube (27%) and Snapchat (24%) – despite such platforms having older minimum age for registration (<a href="#">Ofcom 2023</a>).</li> <li>• Young people disproportionately turn to <a href="#">social media and messaging services for news</a>, where journalistic standards are not required and disinformation and misinformation can be shared easily. Digital literacy is crucial for young people as it equips them to navigate the complex online landscape, for example helping them to discern real from fake information, support their safety and that of others, and prepare for future careers requiring digital skills (<a href="#">Ilomäki et al, 2023</a>).</li> </ul> <p><i>Being online introduces children to a range of potential harms:</i></p> <ul style="list-style-type: none"> <li>• There is <a href="#">a wide range of evidence</a> that raises concerns about children and young people's technology use and how it can negatively affect mental health and body image, cause challenges with peer relationships, and expose them to inappropriate and harmful content.</li> <li>• <a href="#">Ofcom's Children and Parents: Media use and attitudes 2023</a> survey found that 20% of 8-11-year-olds said they had experienced something nasty or hurtful online. <a href="#">Ofcom</a> has also found that 39% of 8-12-year-olds have signed up to an online platform with an older user age, for example claiming to be at least 16. They did this to access age restricted games or social media sites, but as a result are likely to encounter more content that is inappropriate for their age. Insights family data (quoted in the Ofcom report) also found that children aged 8-17 who spent money on video games (including in-app purchases) spend an average of £38 per month.</li> <li>• <a href="#">Ofsted's review of sexual harassment and abuse in schools</a> found evidence that the sharing of inappropriate images and videos is an issue in primary as well as secondary schools, and called for a "a carefully sequenced RSHE curriculum" in response.</li> </ul>

- The [Girl's Attitude survey](#) also found that 44% of girls aged 7-10 have had strangers message them or send friend requests when playing games online.

*How PSHE education can help:*

- PSHE education provides essential knowledge and skills to help children navigate these risks and thrive in an increasingly digital world. Digital technologies are ubiquitous in many aspects of children's lives and PSHE can respond to this holistically, integrating teaching about technology into the entire PSHE education curriculum, whether thinking about health and wellbeing, relationships, finance or careers.
- Of just under a thousand parents involved in an October 2023 YouGov survey, 9 out of 10 (88%) parents feel that schools and parents have a shared responsibility to teach children about digital safety issues including fake news, negative online influencers, and sending/receiving sexual images (only 6% think it's parents' responsibility alone). 95% of parents polled by YouGov also felt schools had a responsibility to teach about grooming and abusive behaviour online.
- Search the range of [media and digital literacy resources](#) highlighted on our site for lesson plans on covering many aspects of online safety, and media and digital literacy.