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England

Protecting and improving the nation's health

Public Health England

Core messages supporting implementation of
statutory Relationships Education, Relationships
and Sex Education and Health Education
(RSHE)

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Introduction

These slides have been put together by PHE national leads with thematic expertise on topics covered in the new statutory RSHE curriculum. The slides are part of a wider set of resources aimed at supporting local authority public health teams in their work with schools.

The slides distil key evidence-informed messages relevant for the school-age population.

The slides are accompanied by:

- a word document listing evidence informed resources and partner organisations identified by PHE as being helpful in supporting the teaching of statutory RSHE
- a proforma to help local authorities and partner organisations think about how they inform schools and colleges about local support services available for children and young people

Whole school/ college approach



Evidence indicates that whole organisational (school/college) approaches are more likely to lead to sustained impact on health and education outcomes



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Sexual Health

Evidence-based messages

- **Puberty.** The average age of puberty for girls is 11 and for boys 12 but it is completely normal for puberty to start between 8-14.
- **Sexual activity.** Most young people don't have first sex until at least 16. Those in a healthy, consensual relationship and using protection have better sexual health outcomes and are much less likely to regret first sex.
- **Teenage pregnancy:** Teenagers are the group most likely to have unplanned pregnancy. Unplanned pregnancy is associated with poorer outcomes for mothers and their babies.
- **Sexually transmitted infections (STIs).** Young people between 15-24 have the highest rates of diagnosed STIs, with chlamydia the most common.

PHE provides **teenage pregnancy reports and data for each local authority** The Teenage Pregnancy Prevention Framework is the national guidance for local commissioners and includes the risk factors associated with early pregnancy.

Evidence-based messages

- **Protection against pregnancy and STIs:** There are 15 methods of contraception but long acting methods (implant, IUD) are most effective. Condoms should always be used to protect against STIs, including HIV.
- **Getting advice.** School nurses provide confidential 1-1 advice. Local services providing contraception, STI testing and treatment and pregnancy options advice are **free and confidential**, for young people of all sexual orientations, including for under 16s.



Latest data and key trends

Puberty. 1 in 4 girls start their periods before learning about menstruation in RSE. 38% of boys experienced 'wet dreams' before having learnt about them. 1 in 10 girls are unable to afford sanitary wear.

Sexual activity. Less than 1 in 3 teenagers (girls and boys) have first sex before 16. Some data suggests young people are starting sex at a later age.

Preferred sources of information. Young people cite school, parents and health professionals as their most preferred source of information on relationships and sex.

Teenage pregnancy. Over the last 20 years the under-18 pregnancy rate has dropped by 64% but inequalities remain between LAs and individual young people. Poor school attendance, low attainment and experience of being in care are strongly associated risk factors.

STIs. Between 15-24, young men are 3.5 times more likely and young women 7 times more likely to be diagnosed with an STI compared to over 25s

HIV. In 2019, among 15-24 year olds, there were 363 new HIV diagnoses acquired sexually. Of these, 74% were acquired through sex between men.



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Mental Wellbeing

Evidence based messages

Mental wellbeing is not the same thing as mental illness. Mental illness or mental health problems are when there is a more serious disorder in a person's behaviour or thinking. Mental wellbeing is the way we describe how we are in our lives, such as in our relationships, at school, work, play. It's how we handle the ups and downs of life.

There are **5 things** we can all do to help our mental wellbeing:

- take daily physically exercise and keep active,
- connect with other people
- take notice of the simple things that give you joy
- keep learning new things, explore new opportunities, engage in art and creativity
- give to others – your time, being there for someone or volunteering.



Schools/colleges play an important protective role in promoting good mental wellbeing.

Evidence supports taking a whole school or college approach to improving mental wellbeing

Help is available from local children and young people's mental health services

Latest data and key trends

- Overall in 2020 1 in 6 children (16%) age 5-16 have a probable mental disorder (this compares to 1 in 9 in 2017)
- There are 4 broad categories of mental disorders: emotional; behavioural; hyperactivity and other less common disorders
- Rates of behavioural and hyperactivity disorders are highest in 5-16 year olds and rates of emotional disorders are highest amongst 17-19 year olds
- There are gender and age differences in prevalence of mental disorders :
 - Among 2-4 year olds boy (6.8%) are more likely than girls (4.2%) to have a disorder
 - Among 5-10 year olds boys are twice as likely (12.2%) as girls (6.8%) to have a disorder
 - Among 11-16 year olds boys (14.3%) and girls (14.4%) are equally likely to have a disorder
 - Among 17-19 year olds girls (23.9%) are more than twice as likely as boys (10.3%) to have disorder
- 7% of 11 to 16 year old girls and 3.6% boys reported self harm or suicide attempts rising to 21.5% 17 to 19 year old girls and 9.7% boys



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Physical Health and Fitness

Benefits of physical activity for children and young people

Physical activity for children and young people (5–18 Years)



BUILDS
CONFIDENCE &
SOCIAL SKILLS



MAINTAINS
HEALTHY
WEIGHT



DEVELOPS
CO-ORDINATION



STRENGTHENS
MUSCLES
& BONES



IMPROVES
SLEEP



IMPROVES
CONCENTRATION
& LEARNING

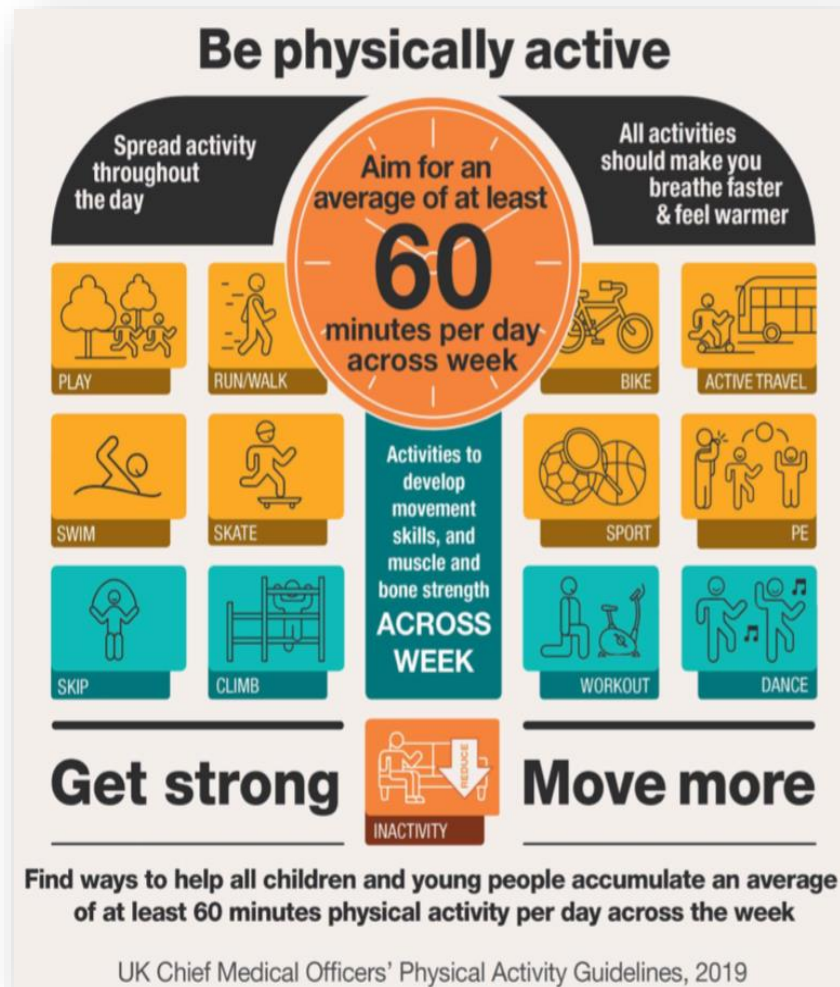


IMPROVES
HEALTH
& FITNESS



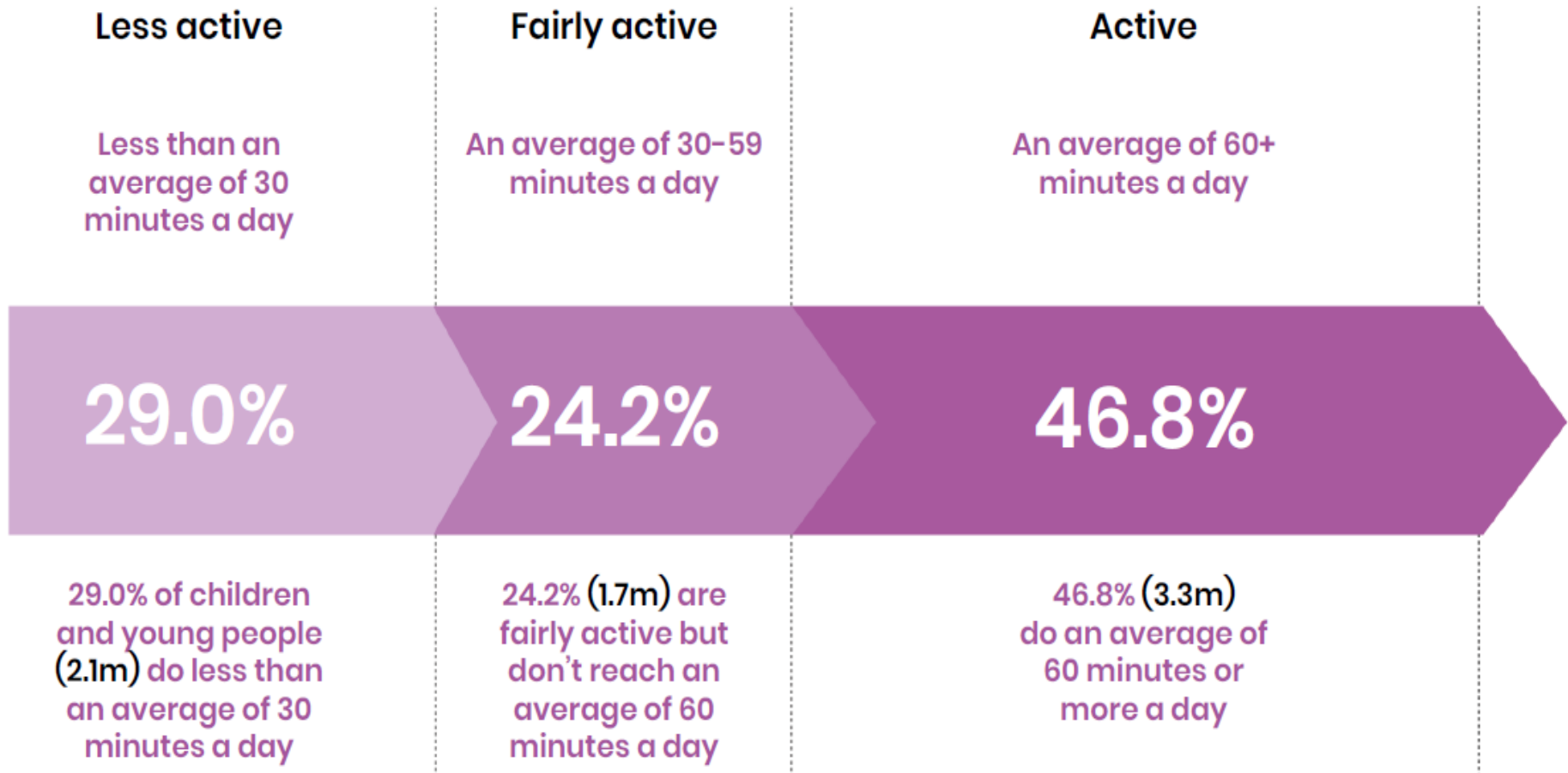
MAKES
YOU FEEL
GOOD

UK Chief Medical Officers' Physical Activity Guidelines for children and young people



- CYP should engage in moderate-to-vigorous intensity physical activity for an average of **at least 60 minutes per day across the week**. This can include all forms of activity such as physical education, active travel, after-school activities, play and sports
- CYP should engage in a **variety of types and intensities of physical activity across the week** to develop movement skills, muscular fitness, and bone strength
- CYP should aim to **minimise the amount of time spent being sedentary**, and when physically possible should break up long periods of not moving with at least light physical activity

Levels of physical activity 2018/19



Results from Sport England's Active Lives Children Survey 2018/19

A whole school/ college approach



https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/821463/What_works_in_schools_and_colleges_to_increase_physical_activity.pdf



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Healthy Eating

The Eatwell Guide & 5 A Day

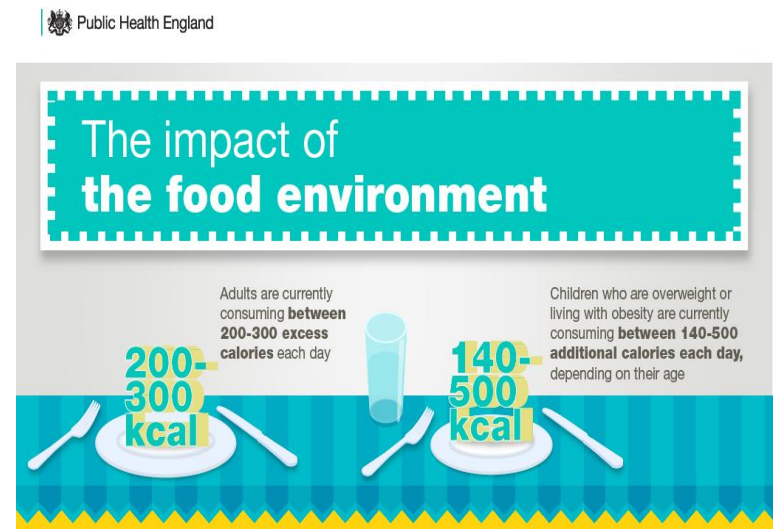


Source: Public Health England in association with the Welsh Government, Food Standards Scotland and the Food Standards Agency in Northern Ireland

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Children's diet compared with recommendations

- On average as a population, we are not achieving government healthy eating guidelines. We consume too much saturated fat, salt and sugar, and eat too little fibre than is recommended.
- Children are consuming well over twice the recommended level of sugar.
- Only 8% of 11-18 year olds meet the recommended 5 a-day fruit and vegetable consumption.
- On average, compared with those with healthy body weights, overweight and obese children consume
 - between **140** and **500** excess calories per day for boys and
 - **160** and **290** excess calories per day for girls, depending on their age



Sources: National Diet and Nutrition Survey (NDNS) years 7& 8 (2014/15-2015/16)
Salt intakes: adults: NDNS: salt intakes in adults 19-64 years in England 2014; children: NDNS: years 1-4 (2008/09-2011/12)



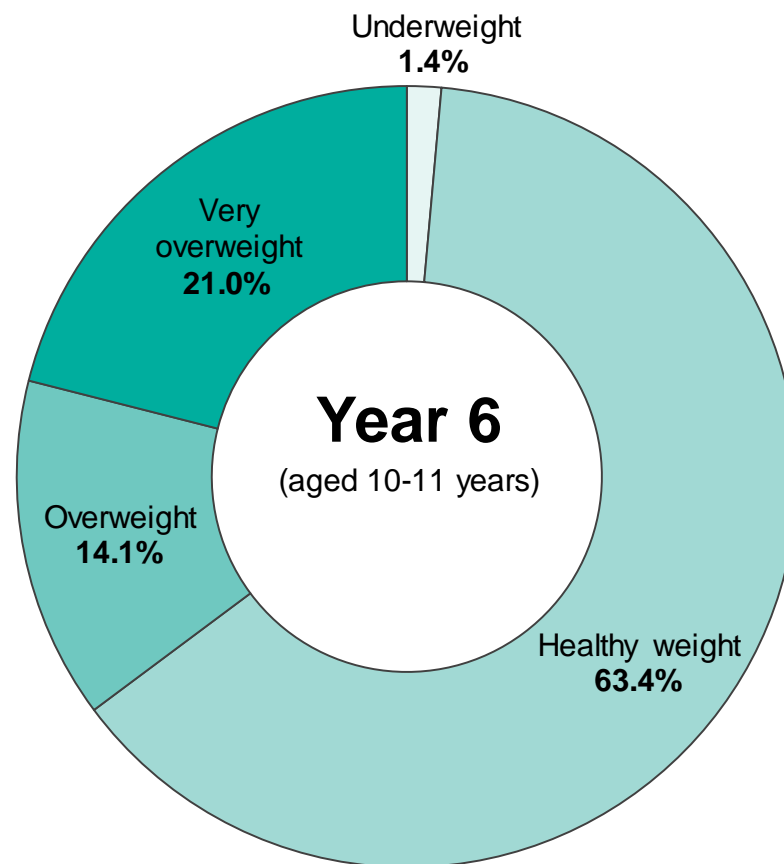
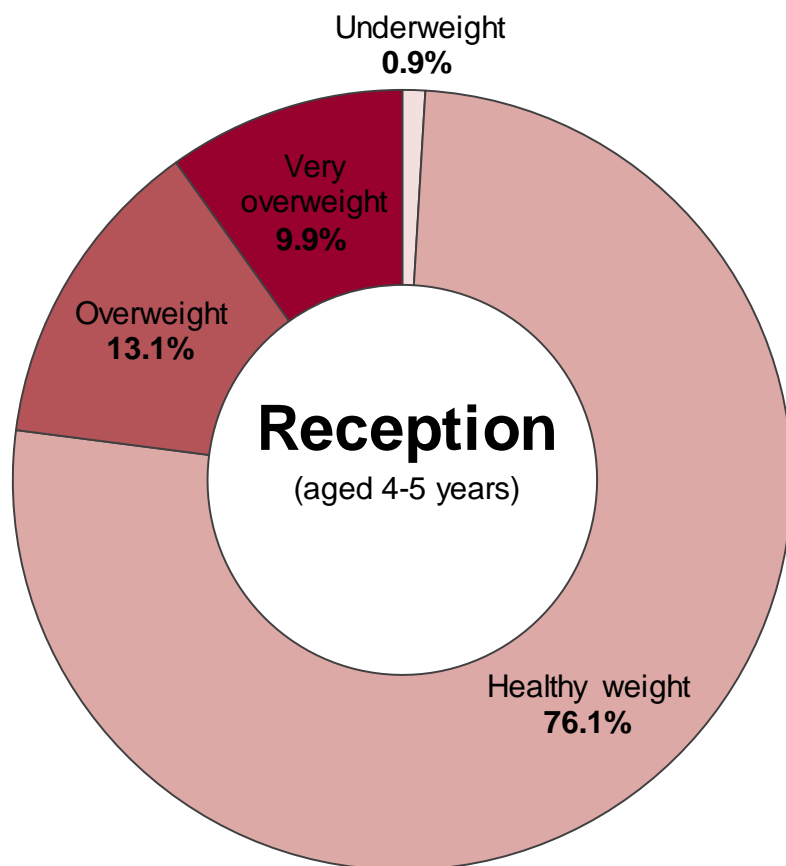
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Healthy Weight

Key messages

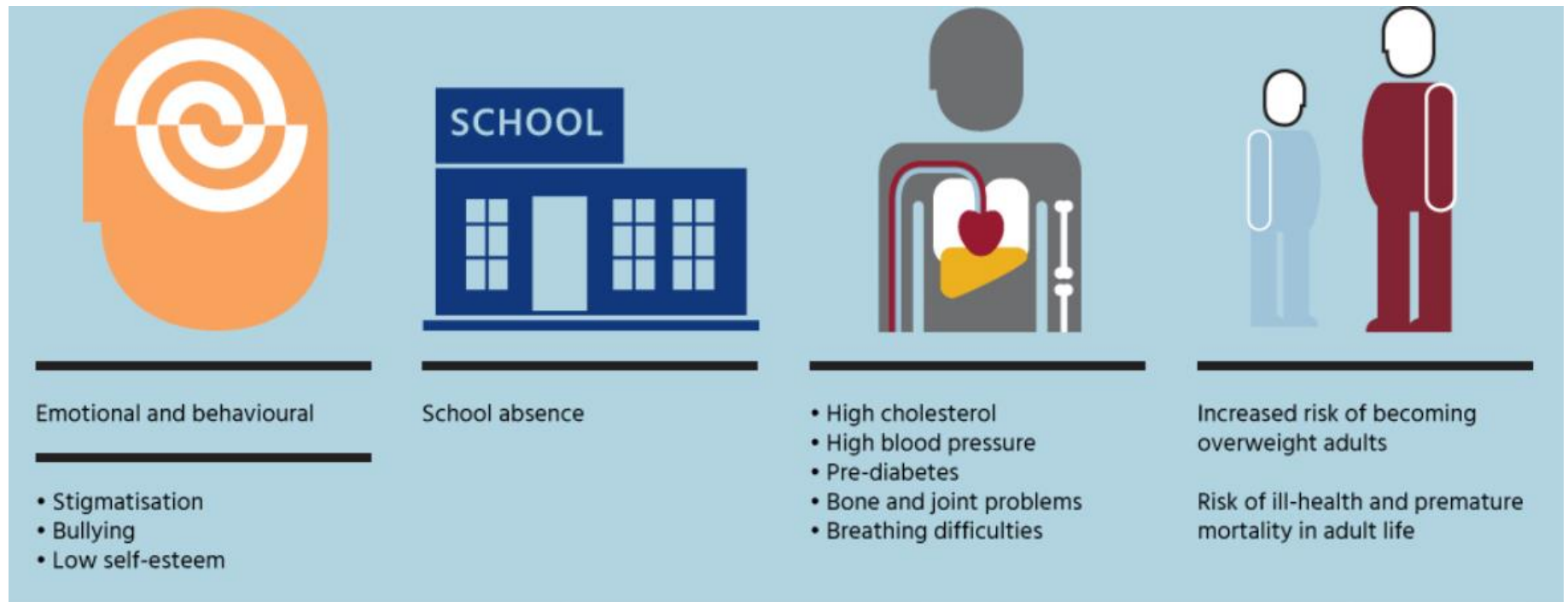
BMI status of children by age: National Child Measurement Programme 2019/20



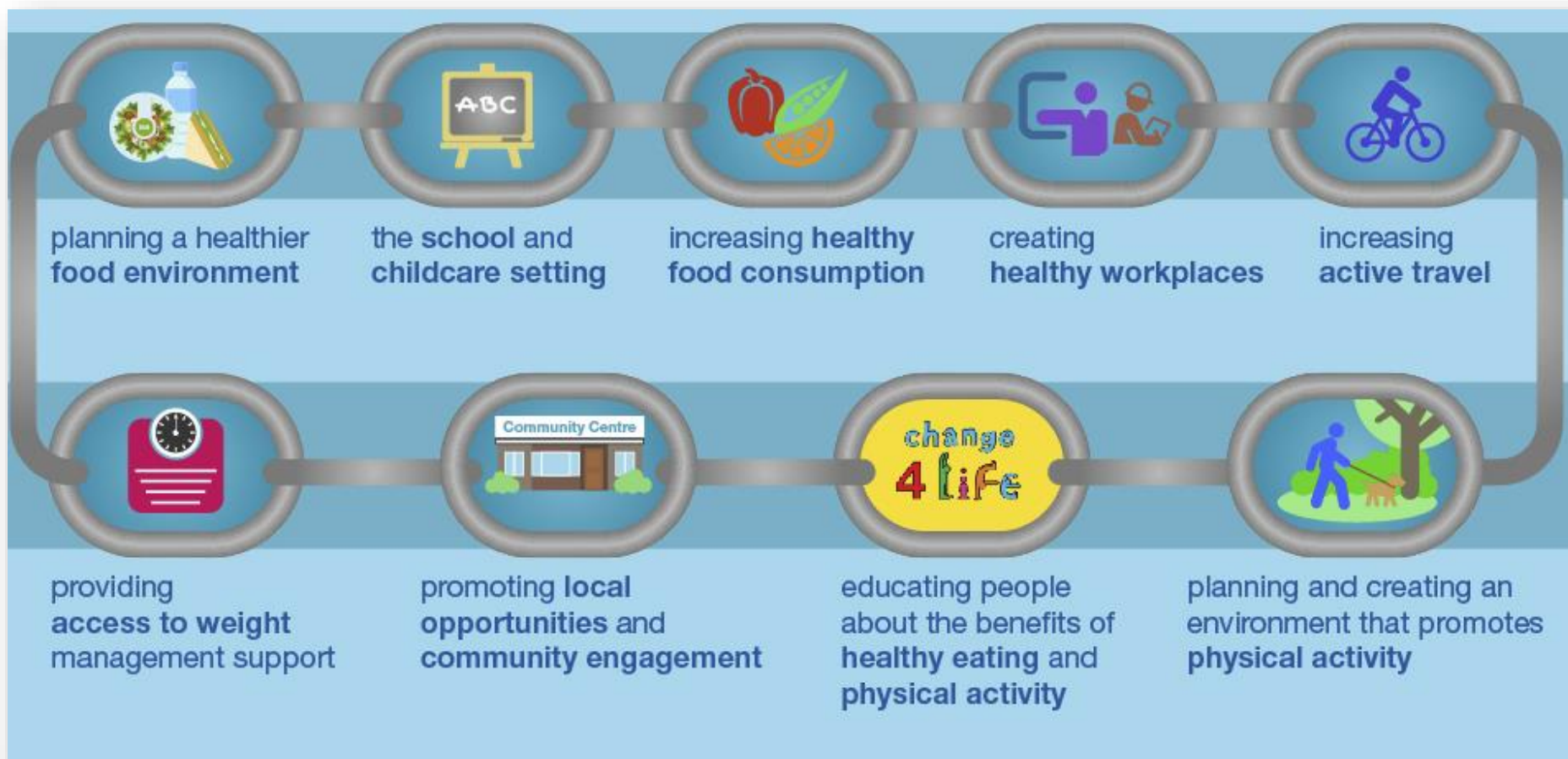
Child BMI has been categorised using the British 1990 Growth reference (UK90).

Underweight BMI <2nd centile, healthy weight BMI 2nd to <85th centile, overweight BMI 85th to <95th centile, very overweight ≥95th centile.

What are the risks associated with being above a healthy weight?



There is no one solution to achieving a healthier weight across the population





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Drugs, Alcohol and Tobacco

Evidence-based messages

- The evidence-based shows that alcohol and drug education needs to be part of a wider whole schools approach in schools.
- Schools need to have a drugs, alcohol and tobacco policy, that includes the need for external providers delivering drugs and alcohol education programmes to be appropriately qualified.
- For young people who smoke, evidence based support to quit should be offered. See NHS Smoking advice and cessation support services.
- Schools are discouraged to use approaches that are proven to be least effective, such as scare tactics, ex-users and knowledge-only approaches.
- Parents and carers are offered information and advice to enable them to support their children.
- Use clear referral pathways, for example into school nursing, school counselling, early help services, voluntary sector services, young people's drugs and alcohol services or to a youth worker, as needed.

Latest data and key trends

- Alcohol and drug use by young people raises the risk of poorer immediate and long-term outcomes.
- One in five (22%) of 15 year olds in England report having been drunk in the last week and two in five (38%) say they have ever taken drugs.
- Over 10 thousand secondary school pupils were excluded from school for either a fixed term or permanently in 2018-19 for alcohol and drug issues.
- PHE prevalence estimates suggest is that there are 26 children per 1,000 in England who live with a parent with an opiate or alcohol problem. That translates as 25 pupils in an average secondary school and 7 in an average primary school. That's based on an average secondary school having 965 pupils and an average primary school having 282 pupils as per this briefing.
- Among 15 year olds in England, 5% regularly smoke cigarettes and 6% do so occasionally.



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Health and Prevention



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Sun Safety

Evidence-based messages

- Our skin needs exposure to ultraviolet (UV) radiation in sunlight to produce **vitamin D**.
- Vitamin D helps the body absorb **calcium and phosphate** from our diet. These minerals are important for **healthy bones, teeth and muscles**.
- Our **body clock** usually works on a cycle that is just over 24 hours long.
- **Morning outdoor light exposure** can “pull” our body clock back into step with the 24 hour day going on around us.
- Morning outdoor light exposure can **help us sleep** at night.



Latest data and key trends

Too much UV radiation exposure from sunlight can damage skin (and eyes). UV levels vary. The higher they are the greater the **potential for damage**, and the less time it takes for damage to occur.

Chilly days can have high UV levels. However, greatest care is generally needed:

- **in spring** when the weather gets warmer and skin is suddenly exposed to UV following a winter period
- **going on holiday** to very sunny climates where skin is exposed to much higher levels of UV

Regularly spending time outdoors on milder days can help skin gradually build up a level of protection.

Latest data and key trends

We can reduce risk on sunny days if we:

- **wear a hat** (ideally which covers the back of the neck and shades the face), **cover shoulders**
- **spend time in the shade** when the sun is strongest (11am to 3pm, March to October in the UK)
- **wear sunglasses** and do not look directly at sun
- wear and regularly reapply sunscreen with an **SPF* of 30 or higher** on all exposed areas of the body
- **stay hydrated** by drinking plenty of water
- do not sunbathe

* The **sun protection factor (SPF)** indicates how long sunscreen should protect against some of the sun's UV radiation.



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Dental Health

Evidence-based messages

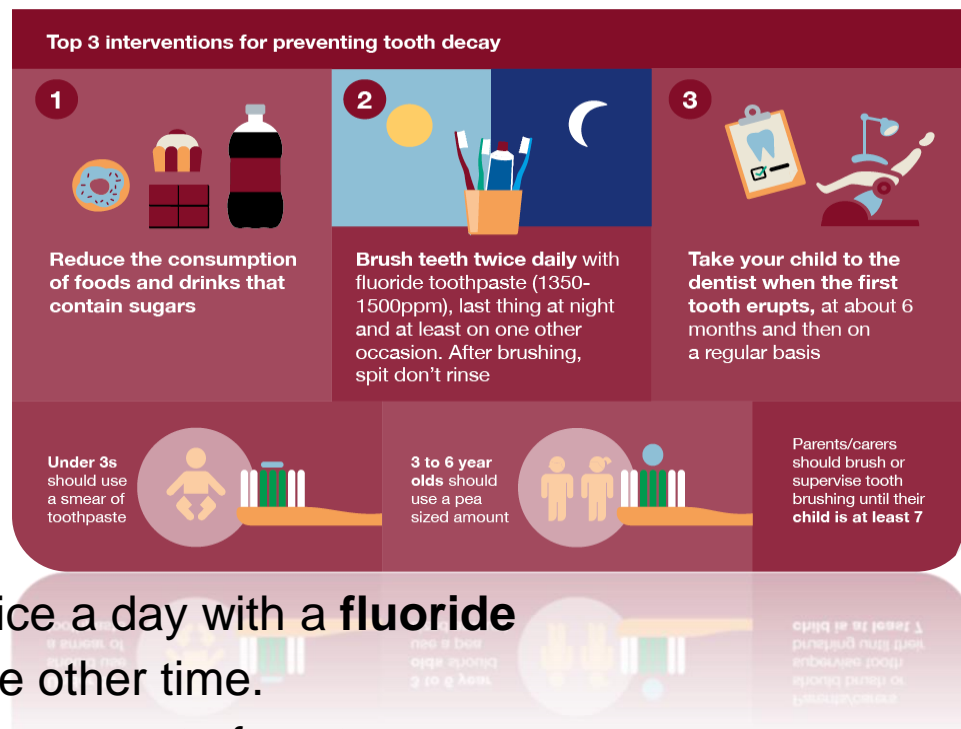
Primary school:

- Eat less sugar, less often
- Avoid sugary food and drink
- See the dentist regularly
- After brushing, spit don't rinse
- Teeth should be brushed at **least** twice a day with a **fluoride** toothpaste, once before bed and one other time.
- 3 - 6 year olds should use a pea-size amount of paste

Secondary school:

- Advice as above and from 12 years, clean between the teeth daily before toothbrushing
- Use interdental brushes or for smaller spaces floss

Pupils should know by the end of primary/secondary school about dental health and the benefits of good oral hygiene and flossing, including visits to the dentist.



Latest data and key trends

In 2019¹, 23.4% of 5 year olds in England start school with tooth decay

There are significant inequalities in tooth decay levels between the most deprived (34.3%) versus the least deprived (13.7%) five-year-old children

Prevalence varied at regional level, ranging from 17.6% in the South East to 31.7% in the North West

In 2013², 32% of 12 year olds and 44% of 15 year olds had tooth decay

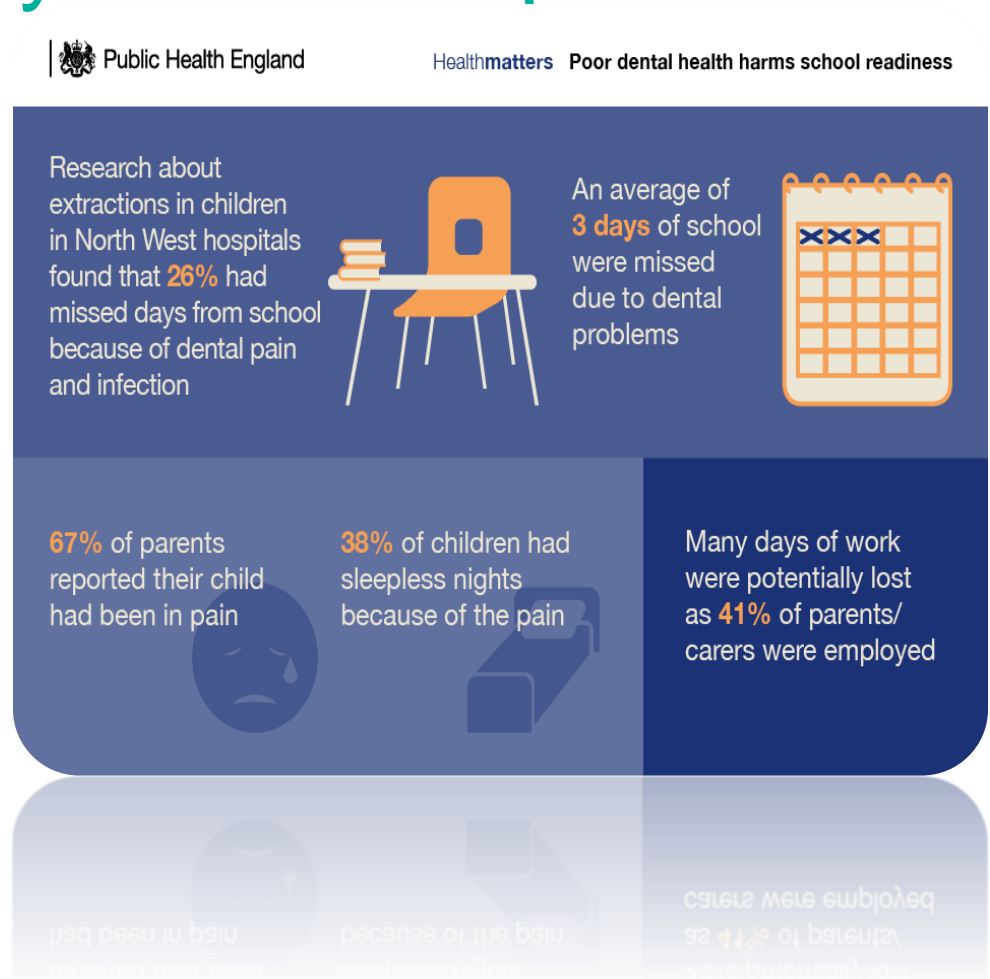
35% of 12 year old children are too embarrassed to smile or laugh

12% of 12 year olds have trauma to their permanent incisors

66% of 12 year olds and 75% of 15 year olds said that their dental health was good or very good

Latest data and key trends – Impact

- In 2018/19, there were 59,011 episodes of tooth extraction in hospital for children aged 0 to 19 years in England.
- Tooth decay is still the most common reason for hospital admissions 6 to 10 year olds
- Poor oral health can lead to pain, sleepless nights and school absence.
- An average of 3 days of school missed due to dental problems





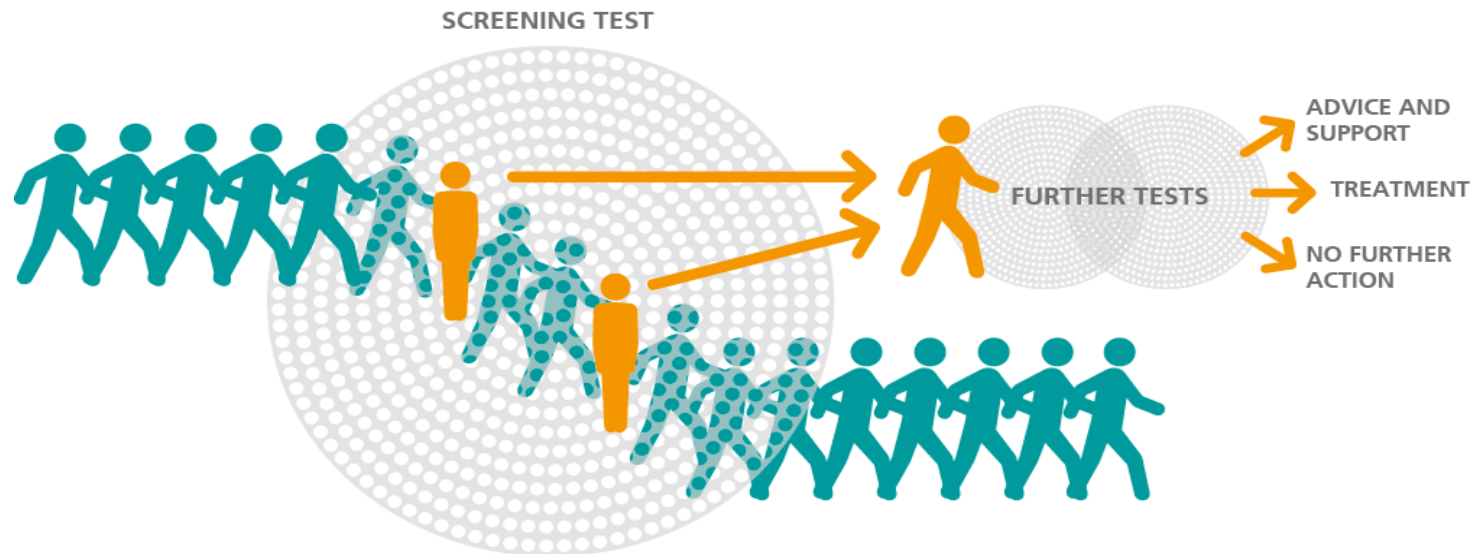
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Screening

What is screening?

- Screening is the process of identifying healthy people who may have an increased chance of a disease or condition
- Screening can be thought of as putting people (who accept an offer to be screened) into a sieve (see below) to identify those who need further investigation
- The sieve represents the screening test and most people pass through it. This means they have a low chance of having the condition screened for. The people left in the sieve have a higher chance of having the condition. A further investigation and diagnostic test is then offered to them



Latest data and key trends

- Each year approximately 11 million people in England are invited to participate in a screening programme
- Screening programmes are only offered in the NHS if the evidence tells us they will do more good than harm. Strict criteria is used
<https://www.gov.uk/guidance/evidence-and-recommendations-nhs-population-screening>
- Screening can involve difficult choices; people offered screening should get the information they need in a format they can understand
- A screening programme supports people throughout the process, from invitation through to referral for treatment and advice
- Screening is always a choice.
- At each stage of the screening process, people can make their own choices about further tests, treatment, advice and support

Abdominal aortic aneurysm (AAA) screening

Offered to **men** during the **year they turn 65**. Older men can self-refer.

www.nhs.uk/aaa

Breast screening

Offered routinely to **women** aged from **50 up to their 71st birthday**. Older women can self-refer.

www.nhs.uk/breast

Diabetic eye screening

Offered annually to **people** with diabetes **aged 12 and over**.

www.nhs.uk/diabeticeye

Screening in pregnancy

- sickle cell and thalassaemia (ideally by **10 weeks**)
- infectious diseases (HIV, hepatitis B and syphilis)
- Down's syndrome, Edwards' syndrome and Patau's syndrome
- 11 physical conditions in the baby (**20-week scan**)
- diabetic retinopathy (for women with diabetes)

www.nhs.uk/pregnancyscreening

Bowel cancer screening

Offered to **men and women** aged **60 to 74 every 2 years**. Those aged 75 or over can request screening by calling **0800 7076060**.

In some areas of the country people **aged 55** also invited for a one-off bowel scope screening test. You can check by calling the number above.

www.nhs.uk/bowel

Cervical screening

Offered to **women** aged from **25 to 49 every 3 years**, and **women** aged **from 50 to 64 every 5 years**.

www.nhs.uk/cervical

Newborn screening

- **newborn hearing**
- physical examination (for problems with eyes, hearts, hips and testes) within **3 days** of birth and again at **6 to 8 weeks** of age
- **newborn blood spot** (for 9 rare conditions)

www.nhs.uk/pregnancyscreening

The population screening timeline shows what the 11 NHS screening programmes are, who they are offered to and when.



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E-Bug

Evidence-based messages

- e-Bug messages are all evidence-based
- **Microbes:** microbes are found everywhere; there are useful microbes as well as harmful microbes
- **Hand washing:** wash hands with soap and water; when to wash hands
- **Respiratory hygiene:** use a tissue when you sneeze to avoid spreading microbes;
- **Food hygiene:** use separate chopping boards for raw meat and vegetables; do not wash chicken; wash hands between handling raw meat
- **Oral hygiene:** brush teeth twice a day using fluoride toothpaste; spit do not rinse; reduce intake from sugary foods and drinks to prevent tooth decay
- **Vaccinations:** vaccines prevent a range of bacterial and viral infections; previously common infections are now rare due to vaccines; most common infections like common cold or sore throat are not protected by vaccines
- **Antibiotics:** antibiotics do not work for viral infections like coughs and colds; only take antibiotics when you really need them as prescribed by your doctor or nurse; do not share antibiotics with friends or family; follow the full course of antibiotics
- **Sexual health:** non-barrier forms of birth control do not protect you from STI; use a condom to protect yourself against STIs

Resources e-Bug



Educator Resources

Teach about micro-organisms, the spread, prevention and treatment of infection, using e-Bug's lesson plans, interactive activities, student worksheets, quizzes, videos and more. Designed for KS1-KS4.



Training

Interactive e-Learning or remote training for educators and members of the community who teach children and young people; designed to improve knowledge and confidence to teach e-Bug topics.



Community Resources

Earn badges with our Antibiotic Guardian youth programme, or try 'Beat the Bugs' with family and community groups.



KS1



KS2



KS3



KS4



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Immunisation

Evidence-based messages

- Immunisation is a global health success story, critical to the prevention of infectious diseases, helping people of all ages live longer, healthier lives
- A vaccine is a medicine that helps the immune system to fight infection
- Vaccines can be made of inactivated (killed) organisms, or live (weakened) organisms, they do not cause the infections they prevent
- Vaccines stimulate the immune system to produce antibodies to fight infection
- If we come into contact with the infection in the future, our immune system will remember and help to fight the infection
- If enough people are vaccinated, it is difficult for an infection to spread in the population, this is called herd immunity or herd protection
- Pregnant women, babies, teenagers and the elderly all require vaccines to prevent them catching and spreading infectious diseases
- The advent of the COVID-19 pandemic does not diminish the need for routine and other recommended vaccines to be given



Vaccines protect us throughout our lives, from birth to old age

Babies are offered essential vaccines to protect against conditions including diphtheria, tetanus, whooping cough and polio through to meningitis, measles, mumps and rubella. The childhood vaccination programme is saving lives and preventing serious illness and disability.



Adolescents and young adults receive vaccines which protect against cervical cancer (girls) along with meningitis and septicaemia. Young adults who missed out on MMR as a child are encouraged to get vaccinated to protect against measles, mumps and rubella.



Older people are urged to protect themselves from flu every year (from age 65). We also vaccinate against serious and potentially fatal pneumococcal infections in people of 65 and over. Over 70s can avoid painful and debilitating shingles with a vaccine.



Latest data and key trends

- In the UK the WHO have declared that both polio and rubella have been eliminated, vaccines played an important role in achieving this
- This was because cases of measles were seen in the UK and the disease was spreading from person to person
- Measles is able to spread from person to person because it is highly infectious and not enough people have been vaccinated to achieve herd immunity
- Because measles is very infectious, high levels of vaccination (95%) with two doses of the combined measles, mumps and rubella (MMR) vaccine are required
- In 2019/20 by the age of 5 years 86.8% of children had received two doses of MMR vaccine
- Whilst polio has been eliminated from the UK since 2004, uptake of polio containing vaccines in babies was 92.1% in 2019/20, below the WHO target of 95% uptake
- It is important that uptake of vaccines is as high as possible to prevent diseases, like polio, coming back



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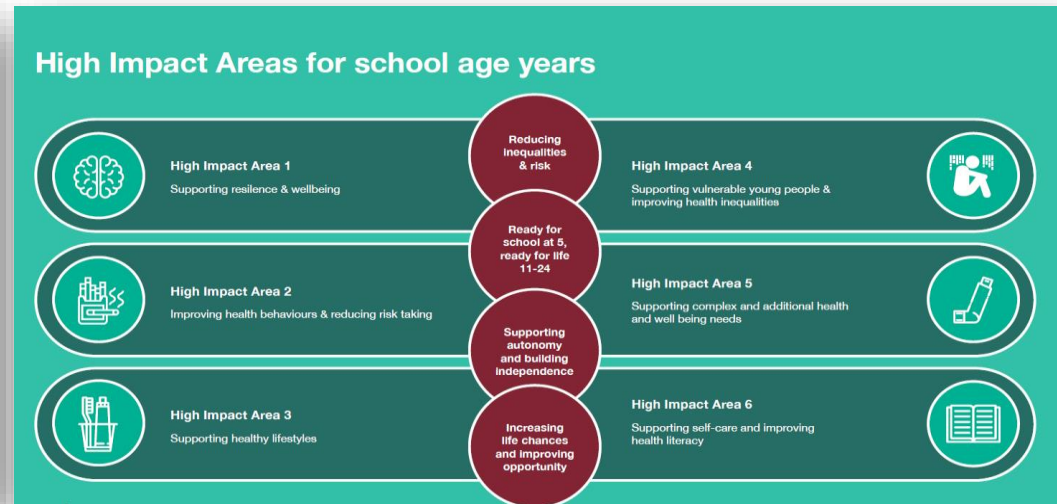
School Nursing

Overview of school nursing

School nurses provide year round services to support children & young people in and out of school in a variety of settings. They are the conduit between school and home.

School nurses use strength based approaches to:

- provide evidence based interventions and motivational interviewing
- assess child development & undertake holistic assessments
- provide advice and promote health and wellbeing to children and families
- promote health protection and keep children safe



Delivering school nursing

School nurses can work across 3 levels to deliver RSHE in educational settings:

Individual & family

- provide an accessible, confidential service including through drop-ins and the use of technology
- carry out structured assessments of health & risk-taking behaviour
- provide targeted 1:1 support for health and wellbeing issues and access to wider support

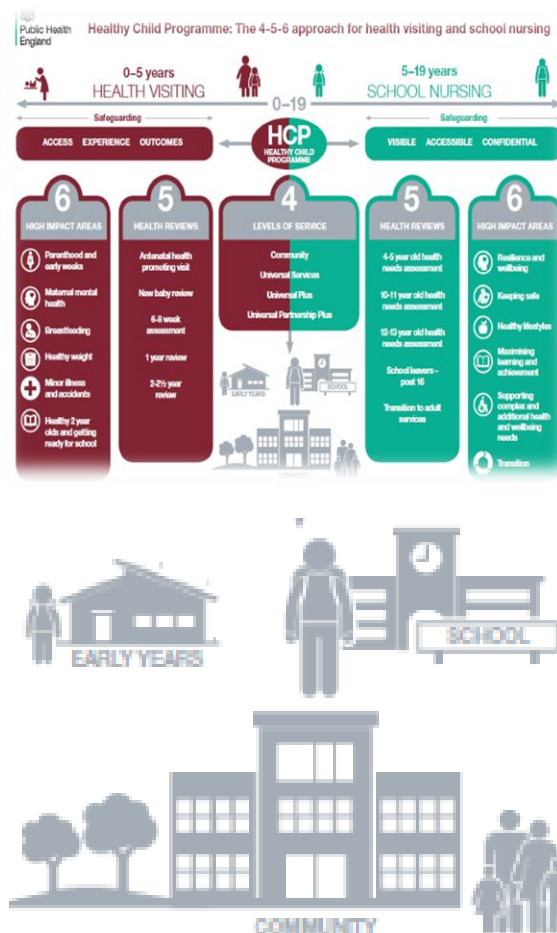
Community

- support development and delivery of RSHE education including raising awareness of and how to access local services.
- support the development of school policies and whole school approaches to safeguarding and health & wellbeing

Delivering school nursing

Population

- undertake population health needs assessment to identify and respond to the strengths and challenges to health and wellbeing of the population including development of partnership approaches
- act as advocates for C&YP at a strategic level to support development of policies, pathways and strategies to improve healthier lifestyle behaviours





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Data

Data

- PHE publishes a range of data that is helpful for understanding the local population need
- The school-age children profiles bring together a range of indicators on the health of school-aged children by local area.
- They are designed to give commissioners and providers a context to help them prioritise action for school-aged children
- The profiles have been grouped according to whether the indicators relate to primary or secondary age
- Examples of indicators:
 - Obesity, underweight, vaccinations, school readiness, proportion of children free from dental decay, hospital admissions caused by unintentional injury, children killed or seriously injured on the road, teenage pregnancy, alcohol related admissions, self harm related admissions, substance misuse



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Resources

Please refer to accompanying word document that lists evidence informed resources and trusted organisations identified by Public Health England as being useful to support implementation of statutory RSHE

Resources to support implementation of RSHE: PHE School Zone

- PHE provides free curriculum-linked teaching resources plus information for school leaders hosted on the School Zone website. Resources include:
- Fun flexible teaching resources for primary school from Change4Life covering nutrition and physical activity
- Every Mind Matters Mental wellbeing resources for Y6 and KS3&4 centred on youth generated videos
- Sign up to our newsletter to hear when new resources are available at campaignresources.phe.gov.uk/schools



Dear Natalia,

The coronavirus pandemic has caused major disruptions to daily life, so for many students the transition back to school may be more difficult than previous years.

In order to support young people, teachers and parents settle back into the school environment and beyond, the School Zone will now host a wellbeing hub as part of the NHS approved [Every Mind Matters](#) campaign.

This will replace [Rise Above for Schools](#) in supporting young people's mental wellbeing, by covering key topical issues through curriculum-linked resources which feature peer-to-peer activities, youth-led videos and fun extension ideas.

Explore our new [Every Mind Matters](#) hub on the School Zone today and look out for updated resources launching later this month.

[Explore the hub](#)



Discuss the nature of change with your class

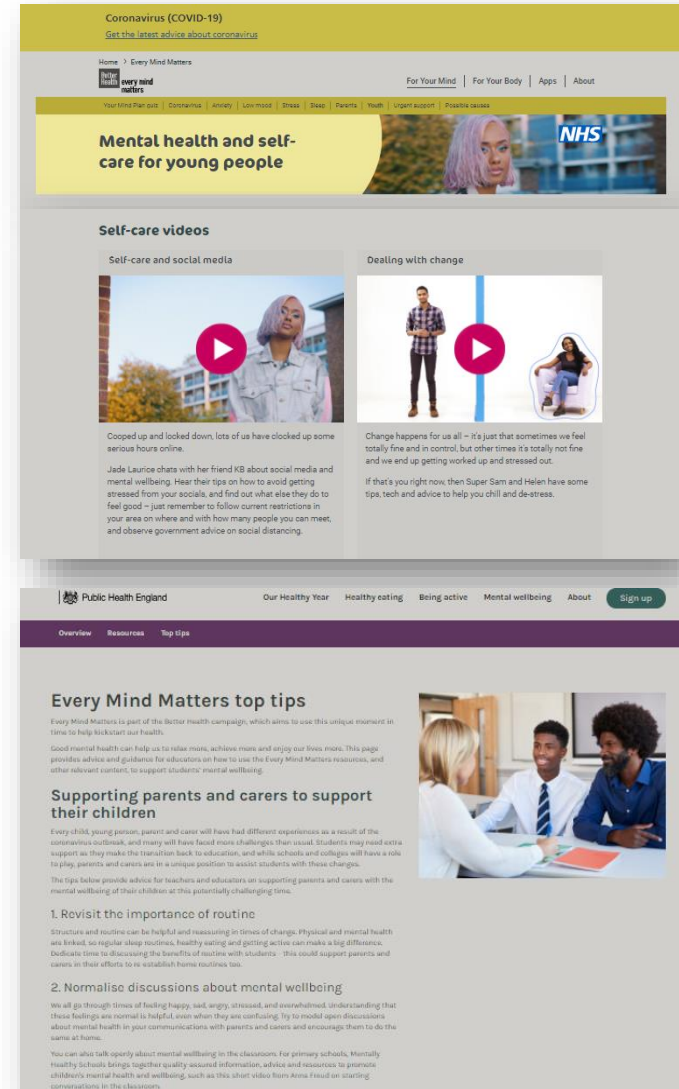
The [Every Mind Matters Dealing with change](#) lesson plan is available to help KS3 and KS4 students explore the nature of change and identify strategies to help them adjust to the current climate. Be sure to check out our [Top Tips page](#) for advice to teachers delivering this lesson to students with SEND.

This [Dealing with change](#) resource supports the new Relationships and Sex Education (RSE) and Health Education guidance, which has now become statutory in schools. For more guidance on delivering this curriculum you can visit [The Department for Education website](#).

[Download resources](#)

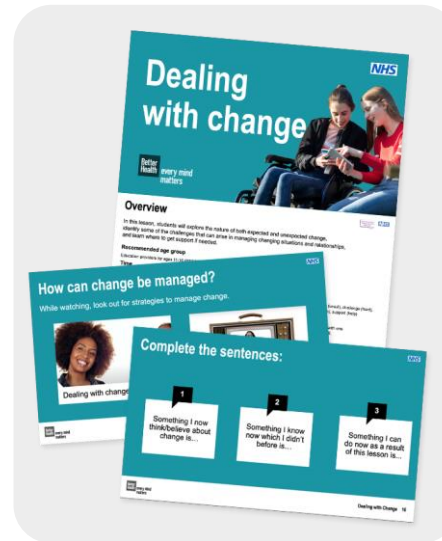
Every Mind Matters for schools

- Every Mind Matters for schools launched in September 2020 and aims to empower young people (ages 10-16) with a toolbox of self-care strategies to support their mental wellbeing and build their resilience.
- Content is co-created with teachers and tested in the classroom with students. The lesson plans are approved by the NHS and the PSHE Association.
- Lesson plans include Every Mind Matters video content co-created with young people and hosted on the Every Mind Matters youth-facing site.



Content covers:

- Sleep
- Social media
- What to do about worry
- Dealing with change
- Transition to secondary school
- Exam stress
- Body image in a digital world
- Forming positive relationships
- Online stress and Fear of Missing Out (FOMO)
- Bullying and cyberbullying
- Puberty
- Tips for schools, including guidance on supporting families and adapting the lessons for students with SEND

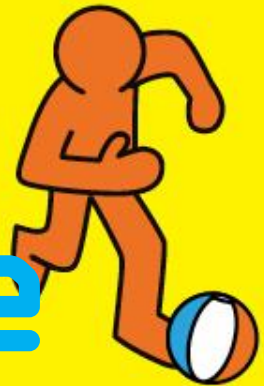


Upcoming topics

- Building connections
- Positive wellbeing

Change4Life

eating well & moving
more



KS1&2



change
4life

Physical activity

Change4Life partners with Disney to create fun and easy ways to inspire pupils to move more with their favourite characters.

Free and curriculum-linked physical activity teaching resources include:

- Active school assemblies
- Active ideas throughout the school day
- Best practice studies and top tips
- Short videos
- Take home pack



Supporting RSHE

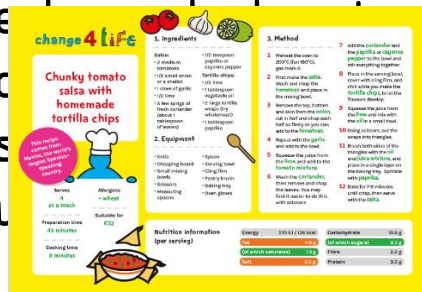
These resources support the Physical health strand of RSHE, including 'the importance of building regular exercise into daily and weekly routines'.



Nutrition - resources

Curriculum-linked fun and free resources for Reception, KS1 and KS2 resources developed with nutritionists and tested with teachers and pupils to help young people and their families learn what's in their food and how they can make healthier swaps including:

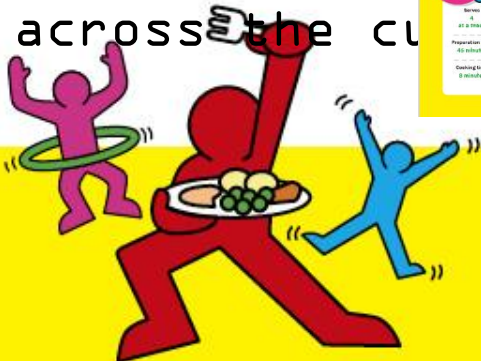
- Maths and English resources
- Differentiated resources
- Display boards
- Easy recipes across the curriculum



Supporting RSHE

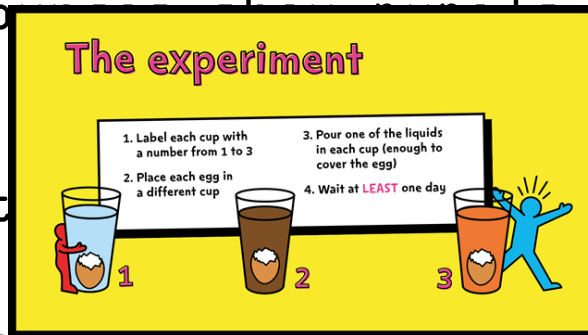
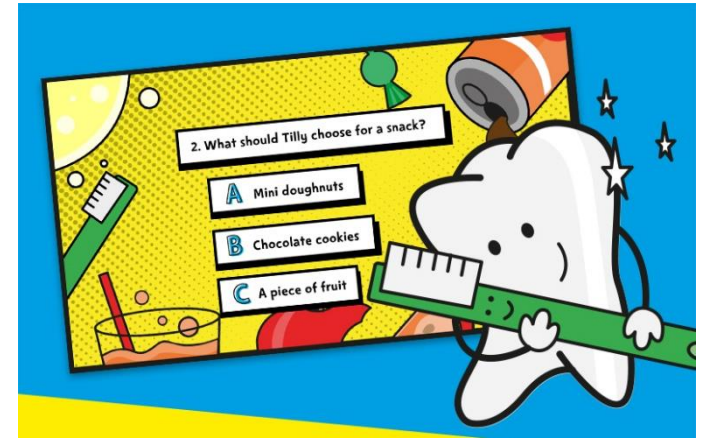
These resources support the Healthy eating strand of RSHE, including 'what constitutes a healthy diet'.

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Looking after your teeth

- Tilly the Tooth Science lesson plans for Years 1 to 6 are the first national dental resources for schools.
- Developed in consultation with dental specialists these resources show how sugar is put through a experiment



Supporting RSHE

These resources support the Healthy eating strand of RSHE, including 'the risks associated with unhealthy eating'

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School Zone teacher website




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Teacher support



Whole-school ideas



Engaging parents