

Children & Young People

Relationships and healthy sexual behaviour

Pupil Wellbeing Survey 2026

Gloucestershire County Council

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Introduction

The teaching of Relationships and Sex Education within the curriculum is a statutory requirement for all schools. It aims to equip students with the knowledge and skills to develop health relationships and feeling confident to take responsibility for their sexual health and well-being.

New RSE guidance[1] has been published, which schools will be required to use from September 2026 onwards. The main changes in the guidance include:

- Stronger focus on safeguarding and mental health.
- Significant expansion of the online safety content - such as sextortion, deepfakes and influencer culture.
- An emphasis on ethical relationships beyond consent - such as power dynamics and challenging misogyny.
- Clearer and explicit teaching of the law – such as age of consent, coercive control, harassment and exploitation.
- A tighter framework around the approach to gender and identity – giving facts about biological sex and gender reassignment and avoiding stereotyping.
- Strengthened health education – to include fertility and the menopause, menstrual and reproductive health, vaccination and healthcare navigation.

The Pupil Wellbeing Survey

The Pupil Wellbeing Survey (PWS) and Online Pupil Survey™ (OPS) is a biennial survey that has been undertaken with Gloucestershire school children since 2006. Students participate in Years 4, 5 and 6 in primary schools; Years 8 and 10 in secondary schools; and Years 12 and 13 in post-16 settings such as sixth forms and colleges. A large proportion of mainstream, special and independent schools, colleges and educational establishments take part, representing approximately 70.0% of students in participating year groups in 2026. The PWS asks a wide variety of questions about a student's characteristics, behaviours and lived experience that could have an impact on their overall wellbeing. The 2026 PWS was undertaken between January and April 2026.

Limitations and caveats of the survey

Not all children and young people who are resident in Gloucestershire attend educational establishments in the county and similarly not all students attending educational establishments in Gloucestershire are residents in the county. It is therefore important to remember this analysis is based on the student population not the resident population.

Gloucestershire is a grammar authority and has a number of notable independent schools, and several mainstream schools very close to the county's boundary; these all attract students from out of county. This results in the school/college population (particularly at secondary phase) having slightly different characteristics, especially ethnicity, to the resident young people's population. 12.3% of Gloucestershire's resident population (2021 Census) were estimated to be from diverse ethnic communities; however, 23.1% of Gloucestershire's student population were from diverse ethnic communities in January 2026 and 23.4% of the PWS cohort were students from diverse ethnic communities in the 2026 survey.

Although a large proportion of the county's educational establishments took part in the survey, some only had low numbers of students completing the survey; in contrast, others had high numbers. Although this doesn't impact the overall county analysis, as demographics are represented as expected at this geography, analysis by district and education phase might only have certain demographic groups represented due to low student take-up (for example, low numbers completing the survey in Tewkesbury at post-16 phase). Where post-16 provision is situated also impacts the survey, as older students travel further to access post-16 provision.

Analysis of deprivation

Educational settings have been categorised into statistical neighbour groups which cluster settings with students of a similar socio-economic profile

[1] https://www.gov.uk/government/publications/relationships-education-relationships-and-sex-education-rse-and-health-education

within the same type of setting (a similar level of deprivation, affluence or personal/family characteristics).

We use Ministry of Housing, Communities and Local Government (MHCLG) Indices of Multiple Deprivation (IMD) to determine the relative deprivation of students. The IMD is based on the home postcode of students (collected in the School Census). This is aggregated to give an overall IMD score for the setting, reflecting the deprivation levels experienced by students. The settings are then split into quintiles based on their scores: quintile 1 is the most deprived and quintile 5 is the least deprived in Gloucestershire.

In addition:

- Grammar/selective schools are compared to other grammar/selective schools in their phase without reference to the IMD.
- Independent schools are compared to other independent schools in their phase without reference to the IMD.
- Post-16 only/Further Education (FE) colleges are compared to all other post-16 only colleges without reference to the IMD.
- Special schools are compared to all other schools of this type in the same phase without reference to the IMD.
- Vocational and alternative settings/schools are compared to other settings/schools in the same phase without reference to IMD.

Throughout the whole survey we aimed to ask age-appropriate questions, this means the same question is occasionally asked in a slightly different way to younger and older students to ensure understanding. We also restrict some questions to older pupils only, for example questions about sexuality and gender identity (as opposed to biological sex), domestic abuse and sexual activity are only asked to secondary and post-16 students. This approach ties in with the stage at which these topics are taught in the PSHE curriculum. All questions are voluntary, and students can choose to skip individual questions or sections if they feel uncomfortable or would prefer not to answer.

Relationships

During childhood and into adolescence forming friendships with peers is vital. Friendships help children develop important life skills like getting along with other people and sorting out conflicts and problems. Children with these skills are less likely to have social and emotional difficulties later in life[2]. In the teenage years friends become more important as they provide a big part of forming a sense of identity outside the family. Teenage friendships can also be incredibly supportive in helping young people to cope with problems and issues that they may not want to share with adults.

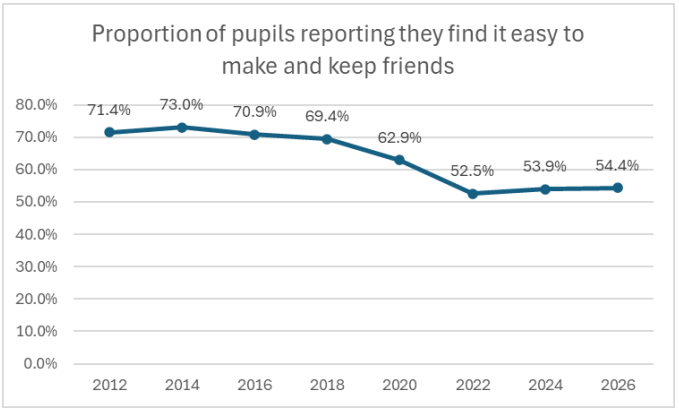
Relationships with parents and families give children and young people emotional support, security, and safety; helping them navigate the ups and downs of adolescence. Family relationships can be strengthened with communal meals, activities, rules, meetings, rituals and responsibilities. Not only does building positive relationships make students happier, improve their feelings of security, and provide meaning to their lives, but it also affects both mental and physical health[3].



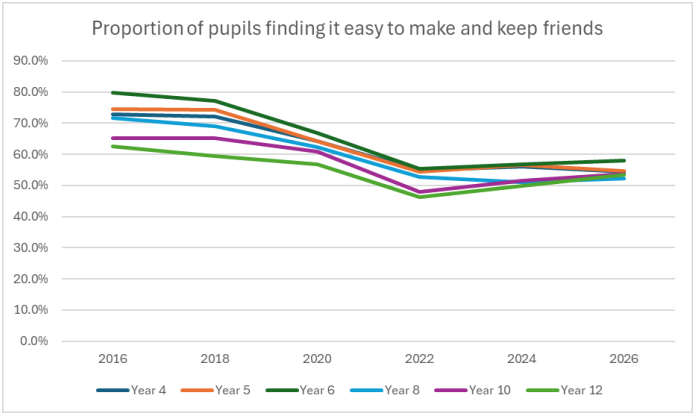
Relationship breakdown including family relationships, friendships and romantic relationships can increase the risk of self-harm and suicide ideation in young people[4,5].

Friendships

The proportion of students saying they find it easy to make and keep friends had been in decline between 2012 (71.4%) and 2022 (52.5%) with a particularly stark drop during the pandemic period. Since 2022 this has stabilised, and in 2026, there was an increase (54.4%) in students reporting that they found it easy to make and keep friends.



On the whole, a higher proportion of students in the primary phase report finding it easy to make and keep friends compared to those in secondary and post-16 phases. The chart below illustrates how, over the past ten years, all year groups have experienced a similar trend.



Neuro-diverse children such as those with Autistic Spectrum Disorder (ASD) and those with other learning and physical disabilities can find it particularly hard to make and keep friends. In 2026, a new question was introduced asking students if they felt they were neurodivergent. Only 35.3% of students who reported being neuro-divergent[6] find it easy to make and keep friends (vs 56.2%). 42.0% of students with Special Educational Needs (SEN)

[2] https://www.taylorfrancis.com/chapters/edit/10.4324/9781315058047-12/helping-children-make-friends-carol-keyes

[3] https://journals.sagepub.com/doi/full/10.1177/15248380251320978

[4] https://link.springer.com/article/10.1007/s10879-023-09579-6

[5] https://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366(25)00217-2/abstract

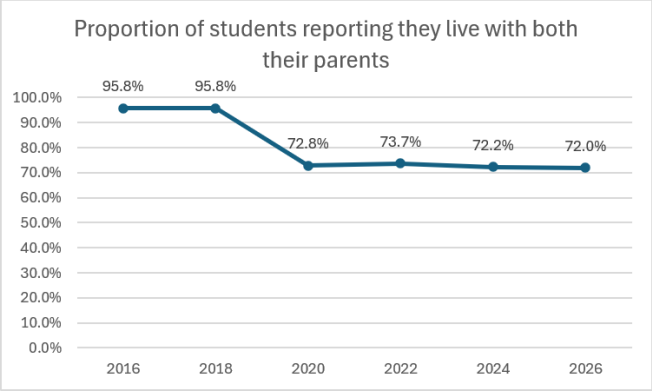
[6] Includes pupils reporting Yes – diagnosed by a health professional, Yes- self diagnosed, Yes- waiting for diagnosis

support or an Education Health and Care Plan (EHCP) said they found it easy to make and keep friends, significantly lower than those with no SEN (56.3%). The difference between students with a disability and peers without a disability was equally stark; in 2026, 40.1% reporting finding it easy to make and keep friends vs. 55.4%.

Family relationships

In 2026 1 in 5 students said they needed to know more about relationships (22.7%). The proportion of students saying they needed to know more about relationships was highest in primary age with the proportion reducing as they got older. In contrast to previous surveys where female students were slightly more likely to want to know more about relationships than male students, there was little difference in 2026 (23.5% vs. 22.5%).

Just under three quarters (72.0%) of students reported that they live full-time with both their parents, which has been similar since 2020.



12.2% of students reported living part-time with both their parents in separate houses, 12.3% reported living in a single parent family. Between 2016 and 2026 the proportion of students reporting they live somewhere other than with one or both of their parents has remained in line at around 3.5-4%. Students from diverse ethnic communities were significantly more likely to report living somewhere other than with parents than their white British peers although the gap has narrowed since 2024 (4.1% and 3.4% respectively). This may be due to cultural differences[7], but national evidence[8] suggests students from diverse ethnic communities are more likely to be looked after by the Local Authority and more likely to live in poverty, which may lead to parents sending them to live with family members to ease financial pressures.



In 2026 students reported that when they were worried about something the majority (92.6%) said they had someone to turn to, and in most cases (93.0%) this was their parents. Three quarters (74.6%) of young people said they would go to friends if they were worried about something, this was significantly higher than in 2024 and reflects ongoing recovery since the pandemic.

Students from diverse ethnic communities were significantly less likely (72.5%) to say they seek help from parents than white British peers (77.9%). LGBTQ+ students were less likely to say they would go to their parents for help (76.1%), compared to heterosexual/cisgender students (78.8%), although not significantly.

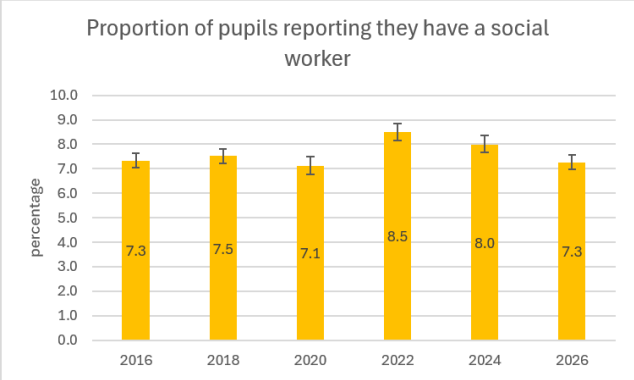
Between 2016 and 2020 there was no significant increase in the proportion of students reporting they had a family social worker. In 2022 this rose significantly to 8.5%.. In 2026 the proportion of students reporting a family social worker was significantly lower (7.3%). Around 7.6% (6,572) of resident children and young people aged 7-17 were known to Children's Social Care in 2025/26, this includes all children and young people with an Open Referral[9] in the academic year. A further

[7] For example, in West Africa, informal relative fostering is incredibly widespread. Research indicates that between 20% to 40% of mothers in the region have sent at least one child to live with another household for an extended period.

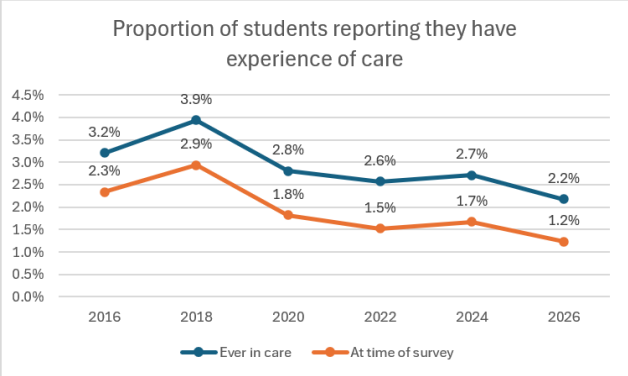
[8] https://www.gov.uk/government/publications/ethnicity-and-childrens-social-care

[9] An open referral in children's social care refers to a child who has an active, allocated social worker and an ongoing case file within the local authority

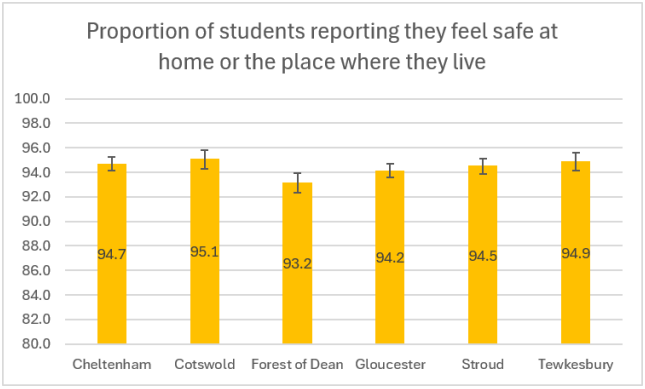
8,119 children and young people had an Early Help episode[10].



In 2026 1.2% of students said they were a Child in Care[11] (CiC) and a further 0.9% said they used to be in care (*combined as 'care experienced'*), this is in line with the known figure of 1.2% in 2025/26[12]. After a period of stability between 2020 and 2024 the proportion of students reporting being care experienced has reduced in 2026.



The proportion of students saying they feel safe where they live has been stable between 2024 and 2026, although feeling safe at home reduces as students age. There was a significant difference in feeling safe at home between students in Forest of Dean (93.2%) and those in schools in Cheltenham (94.7%) and Cotswold districts (95.1%).



Students with vulnerable characteristics such as those identifying as LGBTQ+, students with a disability, those with SEND/EHCP, neurodiverse students, young carers, those known to social care, those eligible for Free School Meals (FSM), those seriously bullied and those from diverse ethnic communities were all significantly less likely to say they felt safe at home than their less vulnerable counterpart peers.

Domestic abuse (including coercive control), or teenage relationship abuse

Questions about domestic abuse are only asked to secondary and post-16 students.

The survey explored young people's experiences of harmful behaviours within family and intimate relationships. It is important to note that, under the Domestic Abuse Act 2021, domestic abuse is defined as abusive behaviour between individuals aged 16 years and over who are personally connected.

Findings presented around witnessing domestic abuse in this report relate to students of any age in secondary or post-16 education.

Some students reported experiences that may indicate exposure to abuse within the household. The Domestic Abuse Act 2021 recognises children, regardless of their age, as victims of domestic abuse if they see, hear or experience the abuse in their home, and they are related to either the abuser or the victim can be affected by domestic abuse when they see, hear, or experience its effects.

[10] Early help in children's social care is the provision of support, advice, and interventions to children, young people, and their families as soon as difficulties emerge, aiming to prevent issues from escalating to a level that requires statutory social work intervention

[11] A child who has been in the care of their local authority for more than 24 hours, also known as a looked after child (LAC).

[12] As recorded in GCC Children's Services records

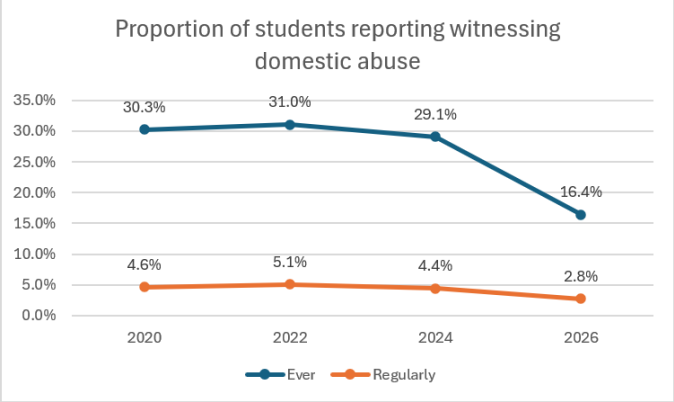
These findings should therefore be considered as indicators of children's exposure to domestic abuse and its impacts, rather than as a direct measure of domestic abuse victimisation among students.

Findings presented about being a victim of abuse are split between those aged over 16 who fall within the definition of domestic abuse and those under 16 who have experienced teen-relationship abuse.

Witnessing domestic abuse

In 2026 the proportion of students reporting ever witnessing domestic abuse (including coercive control) or teenage relationship abuse has reduced significantly from 29.1% in 2024 to 16.4% in 2026. If this proportion is extrapolated to the current student population it equates to around 15,440 students across Gloucestershire.

1 in 20 students reported regularly (*Quite often(weekly) /Most days*) witnessing domestic abuse.

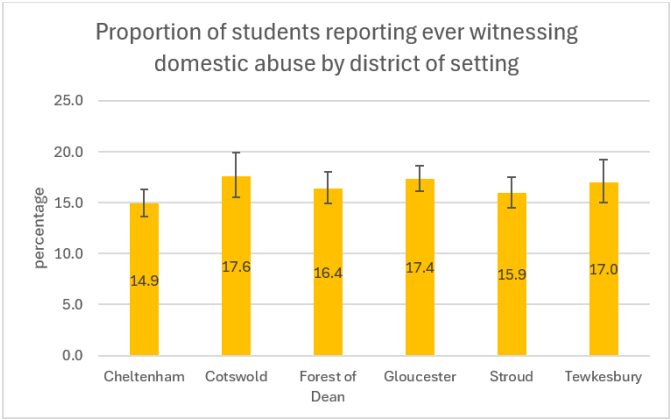


Students aged 11-13 were less likely (3.1%) to report witnessing domestic abuse regularly than those aged 14-16 (3.7%) and in line with those aged 17 and over (3.7%), but not significantly so.

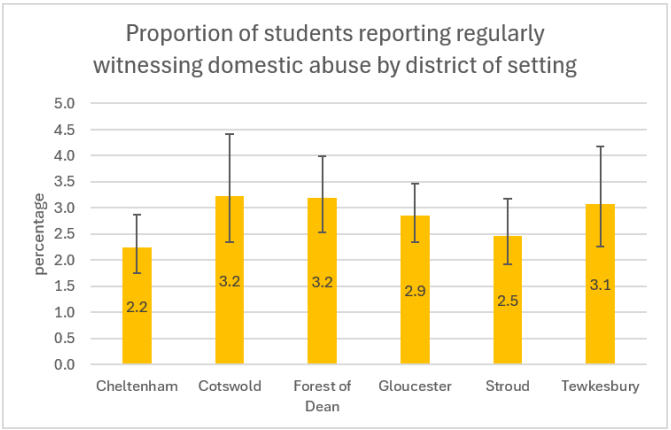


There appears to be a slight correlation between the proportion of students reporting regularly witnessing domestic abuse by statistical neighbour group (based on deprivation of students). The proportion reporting regularly witnessing domestic abuse in mainstream quintile 1 settings (most deprived) (4.2%) was significantly higher than those in mainstream quintile 5 settings (least deprived) (2.4%).

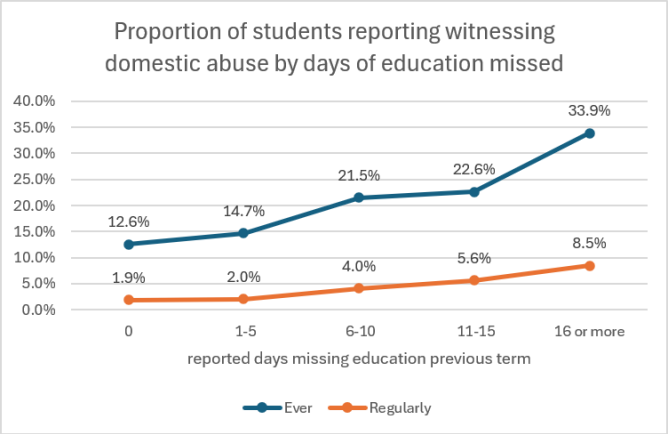
There was no significant difference in the proportion of students reporting to have ever witnessed domestic abuse, by district of setting. Students attending settings in Cotswold (17.6%) had the highest reported levels of ever witnessing domestic abuse and students attending settings in Cheltenham had the lowest levels (14.9%).



There was no significant difference between the districts where students reported they witnessed domestic abuse regularly, although the proportion was lowest in students from Cheltenham settings.



The proportion of students reporting they had witnessed domestic abuse increased as days missing education increased. Students who were absent for 10% or more of education were more likely to witness domestic abuse than those who had not missed school (24.3% vs. 12.6%) and a third of those who had missed 16 or more days of school had witnessed domestic abuse.

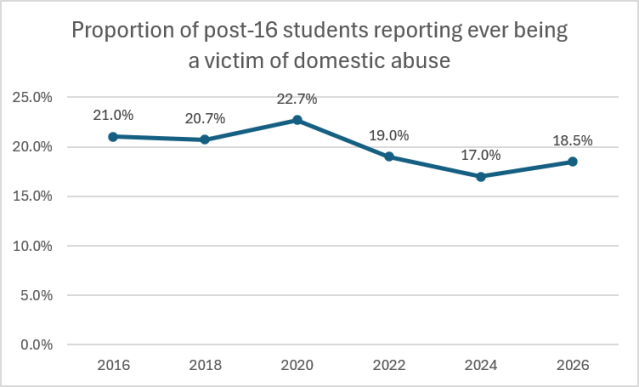


Students who had at least one isolation, suspension or permanent exclusion were also significantly more likely (35.9%) to have witnessed domestic abuse than those with no isolation, suspension or permanent exclusion history (20.8%).

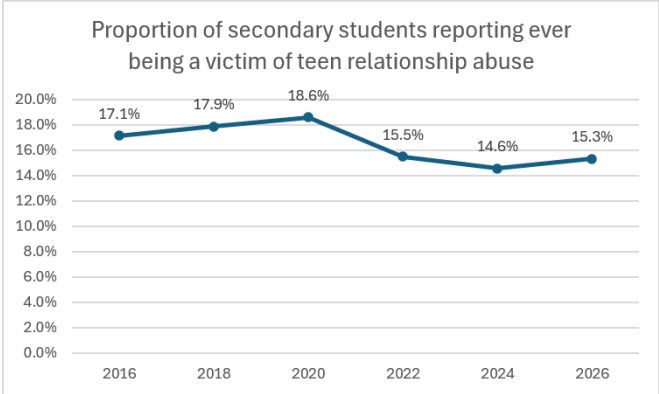
Students who witnessed domestic abuse regularly were less likely to report enjoying school (36.6%), than those who do not report witnessing domestic abuse (59.5%).

Victims of abuse

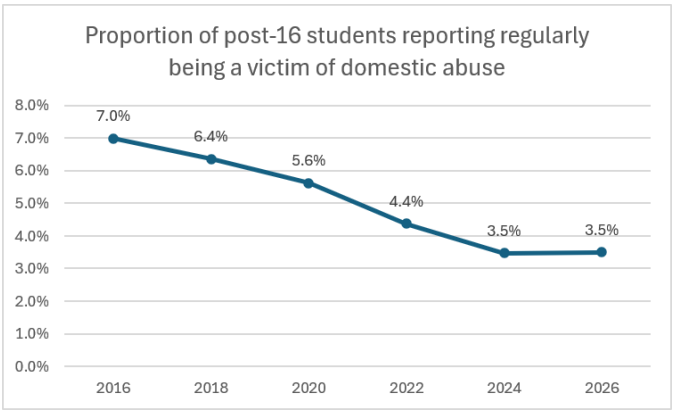
Around 1 in 5 post-16 students in 2026 reported ever being a victim of domestic abuse, this is a slight increase from the 2024 survey.



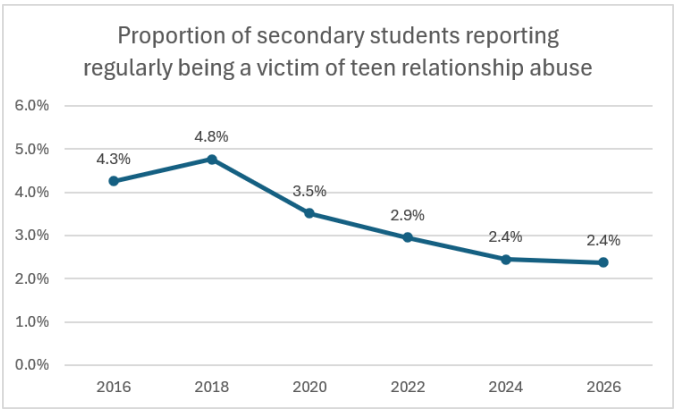
Around 1 in 7 secondary students in 2026 reported ever being a victim of teen relationship abuse, again this is a slight increase from 2024.



In 2026 3.5% of post-16 students reported being a victim of domestic abuse regularly. This was in line with the previous survey.

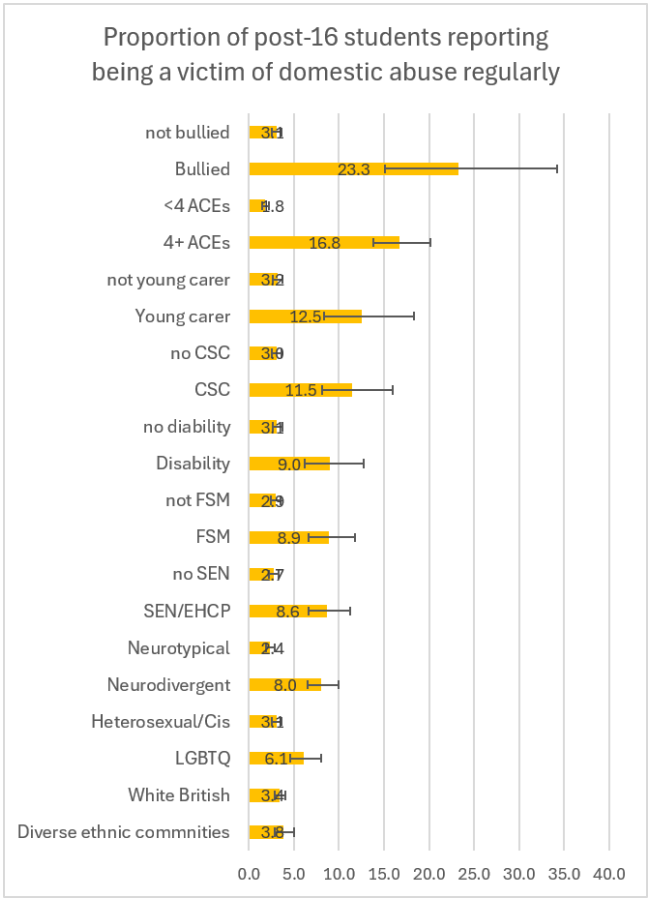


2.4% of secondary students in 2026 reported they were a regular victim of teen relationship abuse.



Female students were twice as likely to report both being the victim of domestic abuse (*OR 2.1*) and being a victim of teen relationship abuse (*OR 2.0*) than male students. Vulnerable students were also significantly more likely to report being a victim of domestic abuse than their less-vulnerable peers. Post-16 students reporting 4+ Adverse Childhood Experiences (ACEs) had the highest likelihood of being a victim of domestic abuse (*OR 11.5*).



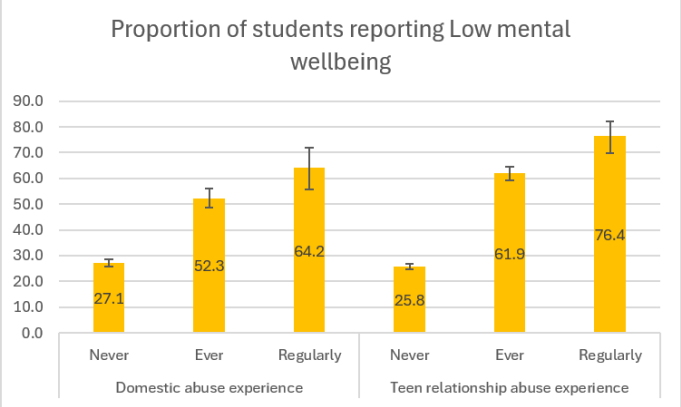


Vulnerable students in the secondary phase were also more likely to report being a regular victim of teen relationship abuse. Secondary students reporting 4+ Adverse Childhood Experiences (ACEs) had the highest likelihood of being a victim of teen relationship abuse (*OR 13.5*).

1 in 7 post-16 students who were a victim of domestic abuse had run away from home in the last 6 months (13.4%) compared to only 0.6% of those who had never been a victim of domestic abuse. 1 in 5 secondary students who were a victim of teen relationship abuse had run away from home in the last 6 months (22.2%) compared to only 1.7% of those who had never been a victim of teen relationship abuse.

Both post-16 students who victims of domestic abuse (*OR 13.3*) and secondary students who were victims of teen relationship abuse (*OR 8.4*) were more likely to report being in serious trouble with the police and significantly more likely to have carried a weapon (*OR 6.9* and *OR 6.1* respectively).

Students who were regular victims of domestic abuse were nearly 7 times more likely to have low mental wellbeing than those who had never been a victim (*OR 6.9*) and were significantly more likely to report low mental wellbeing than those who had ever been a victim of domestic abuse.



1 in 4 students (23.2%) who were regular victims of domestic abuse or teen relationship abuse were receiving support for their mental wellbeing from a health professional at the time of the survey compared to 1 in 20 (4.5%) of those who had never been a victim of abuse. Twice as many students who had been a regular victim of domestic abuse or teen relationship abuse and sought help from a health professional had been supported by CAMHS than those who had never been a victim of abuse (37.4% vs. 14.4%).

Students who were a regular victim of domestic abuse or teen relationship abuse and sought help from a health professional were also significantly more likely to have received support from Let's Talk Well[13] than those who had not been a victim of abuse (36.5% vs. 19.6%).

Students who were a regular victim of domestic abuse or teen relationship abuse, but who had not

[13] Let's Talk Well - is a mental health service for children and young people

received help for their mental wellbeing were significantly more likely to say they felt they would benefit from the support of mental health services than those who had never been a victim of abuse (50.4% vs. 14.0%).

Students who had experienced domestic abuse or teen relationship abuse were more likely to report that they had tried to get support for their mental wellbeing but felt adults did not take them seriously. This was reported by 5.4% of students who had experienced domestic abuse or teen relationship abuse, compared with 1.2% of those who had not experienced abuse. Among students who were regularly experiencing domestic abuse or teen relationship abuse, nearly 1 in 10 (9.2%) reported this experience. Around a quarter of students who had been a victim of domestic abuse or teen relationship abuse said they had not accessed support because they didn't want their parents to know.

Puberty and Body Positivity

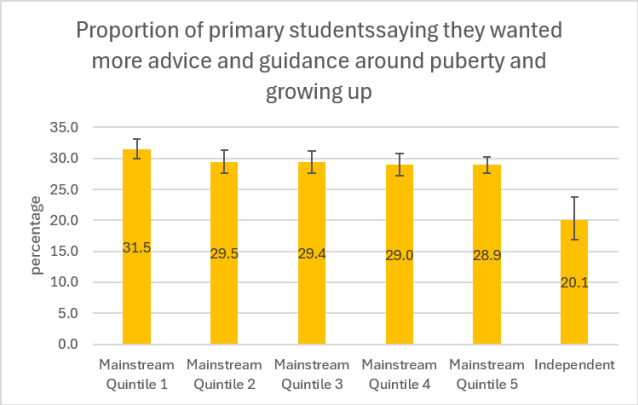
Puberty is the process of physical changes through which a child's body matures into an adult body capable of sexual reproduction. It can be a difficult time for children and young people managing changes in their body and mood. It's important for students to learn about changes associated with puberty before they happen so they can understand and be prepared for them and also realise that everyone goes through these changes.



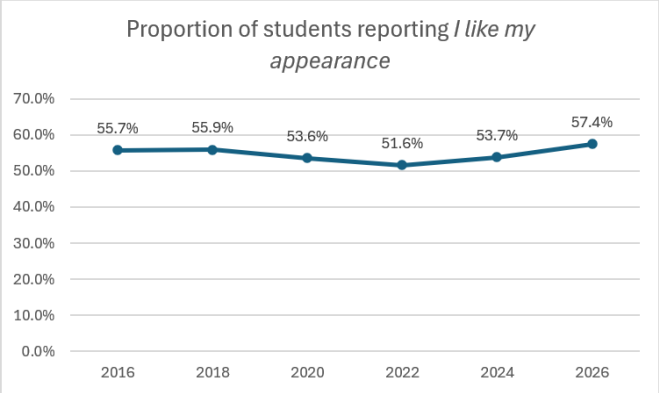
In 2026 64.9% of primary students said *the relationships and health education I received was relevant and useful* at the primary phase. This includes information about puberty.

Students in primary special settings (95.2%) were significantly more likely to say *the relationships and health education I received was relevant and useful* than those in mainstream primary settings (64.5%).

Primary students from mainstream quintile 1 (most deprived) were the most likely to report they wanted more advice and guidance around puberty and growing up.



Physical changes due to puberty can lead to a reduction in body positivity. The proportion of secondary and post-16 students saying they like their appearance *Often/All of the time* had reduced between 2016 and 2022 to 51.6%; however, it has risen since to 57.4% in 2026. The proportion of students reporting they like their appearance *Rarely/None of the time* has decreased between 2022 and 2026 from 25.2% to 19.0%.

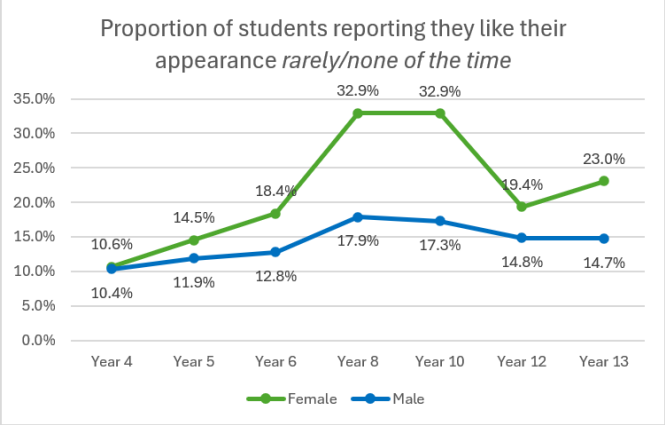


As students age the proportion reporting they like their appearance *Rarely/None of the time* increases. Since 2016 the highest proportion of students saying they like their appearance *Rarely/None of the time* was in Year 10. However, in 2026 this has changed, students in Year 8 were the most likely to say they like their appearance *Rarely/None of the time*.

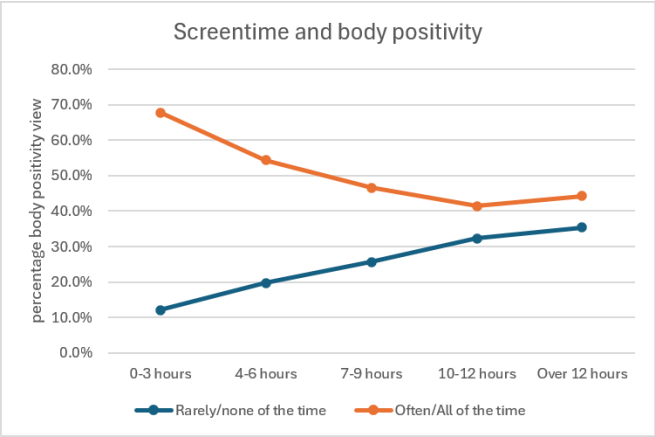
The overall increase in students reporting they like their appearance *Rarely/None of the time* in the period 2016-24 was mostly attributable to increases in younger students in Year 6 and Year 8

who would be likely to be starting puberty. The reduction in the proportion of students reporting they like their appearance *Rarely/None of the time* between 2024 and 2026 was observed across all year groups.

Females have historically been almost twice as likely to report liking their appearance *Rarely/None of the time* than males. When looking at this by year group the sharp increase in a lack of body positivity in females coincides with the average age of onset of puberty.



In previous years, low body positivity among females peaked in Year 10. Since 2024, this peak has broadened to include Year 8 girls as well. Students who reported they like their appearance *Rarely/None of the time* were almost twice as likely to report above average personal screen time[14] than those who reported they like their appearance *Often/All of the time* 39.2% vs. 20.3%. The chart below shows as screen time increase, students are less likely to be happy with their appearance.



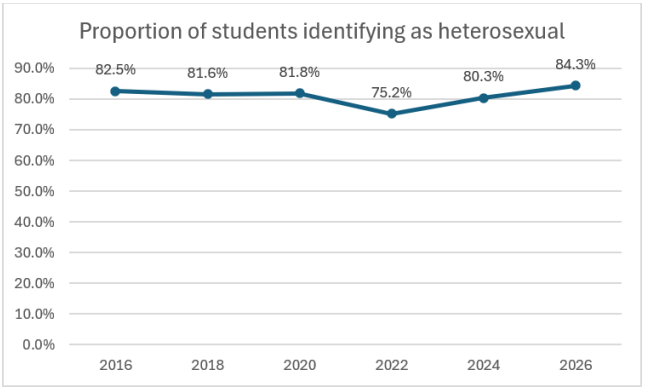
1 in 6 secondary/post-16 females who did no/little exercise cited the reason for this was *I don't like wearing tight/clinging sportswear* compared to only 1 in 12 males. A further 1 in 4 females who did no/little exercise cited the reason for this was *I feel too self-conscious/embarrassed* compared to 1 in 9 males. This may be due to a lack of body positivity, but lack of exercise may also contribute to low body positivity.

1 in 3 females and 1 in 6 males said they would like more information about *Feeling positive about my appearance*. 18.2% of students said they would like more information about *Maintaining a healthy weight*. 5.4% of secondary and post-16 students reported they wanted support around the *Effect that social media and the internet (including pornography) has on the way I feel about my appearance*. This was significantly higher in females (6.9%) than males (4.5%).

Sexuality and gender

Questions about sexuality and gender identity are only asked to secondary and post-16 students, therefore all analysis in this report relates to these students only.

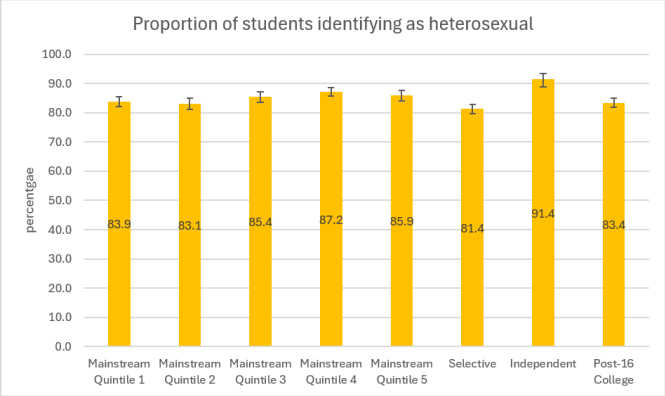
Sexuality is about a person's sexual feelings, thoughts, attractions and behaviours towards other people. The proportion of students reporting they are *heterosexual* in 2026 was 84.3%.



There appears to be little correlation between identifying as heterosexual and deprivation. However, students at independent schools had the highest proportion of students identifying as

[14] Median hours usage per day for students in the survey fell within 4-6 hours per day, so over 6hrs has been classified as above average usage. The UK average for teenagers is estimated to be 6.5-7 hours per day.

heterosexual. Students in selective setting were the least likely to identify as heterosexual in 2026.



Students at Special schools were significantly less likely to report identifying as heterosexual than any other group (67.6%). A literature review undertaken by Brighton & Hove[15] suggests there is evidence showing intersectionality between children and young people with send and identifying as LGBTQ+.



The proportion of students identifying as heterosexual was different by broad ethnic group. Students from Asian and Black backgrounds were significantly more likely to identify as heterosexual than white British students. Students from *Any other mixed background* were significantly less likely to identify as heterosexual.

Gender identity refers to a person's innate sense of their own gender, whether male, female or something else, which may or may not correspond to the sex assigned at birth.[16]



Since 2022, the survey has asked students more comprehensively about their gender identity. In 2026, 2.3% of students identified as transgender, non-binary or gender fluid.

Identified gender	Biological sex		Total
	Female	Male	
Cisgender	94.3%	95.9%	94.6%
Don't know	1.2%	1.7%	1.9%
Don't think of myself as having a gender	0.5%	0.5%	0.5%
Figuring out my gender	1.0%	0.4%	0.8%
Gender fluid	0.5%	0.5%	0.5%
Non-binary	1.3%	0.5%	0.9%
Transgender	1.2%	0.5%	0.8%

Students who identify as LGBTQ+ face significant challenges; they are more likely to report low mental wellbeing, more likely to self-harm, more likely to be bullied and more likely to engage in health harming behaviours. More information can be found in the *Experience of LGBTQ+ students* report.

Teenage sexual relationships

Knowing how to establish and maintain healthy relationships can help adolescents develop healthy adult relationships. Healthy relationships during the teenage years can be an important way to develop social skills, learn about other people, and grow emotionally.

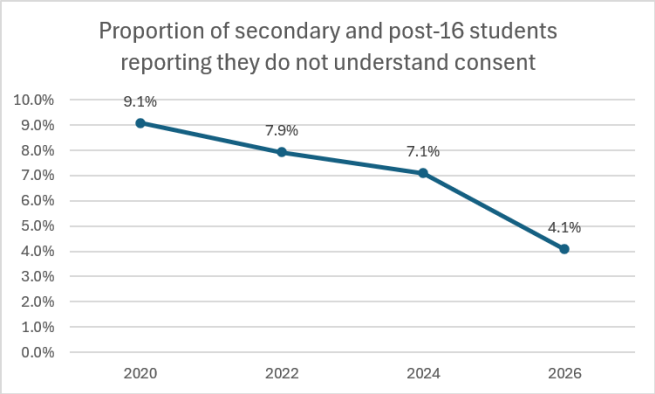
Sexual behaviour

In the PWS 2026 4.1% of students (in Year 8 and above) report not understanding consent in a

[15] https://www.brighton-hove.gov.uk/sites/default/files/2025-04/Learning%20disabilities%2C%20learning%20difficulties%20and%20intersectionality%20in%20children%20and%20young%20people%20evidence%20search%20report.pdf

[16] https://www.stonewall.org.uk/resources/list-lgbtq-terms

healthy relationship. This continues a declining trend and was significantly lower than in 2020 (9.1%).



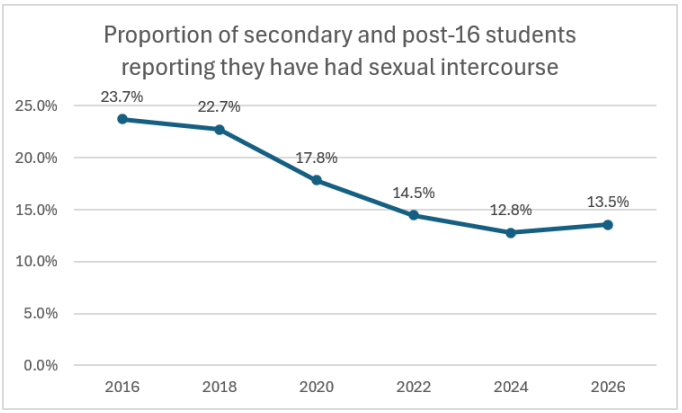
The proportion reporting understanding consent increases as students age (probably due in part to when this is taught in the PSHE curriculum); however, males (95.6%) were significantly less likely to report understanding consent than females (97.2%) at all ages.

Understanding consent in 2026 was similar across mainstream settings but was significantly higher in students from selective schools and significantly lower in special schools (82.1%).

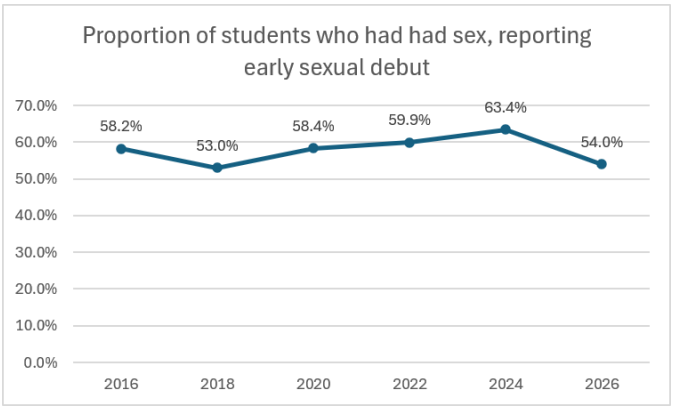
Students from Bangladeshi (89.2%), White Irish (91.5%) and Black African (92.2%) backgrounds were significantly less likely to say they understood consent than their white British peers (96.5%).



The chart below shows the proportion of students reporting having sex had been decreasing steadily since 2016, although there is a slight uptick in 2026.

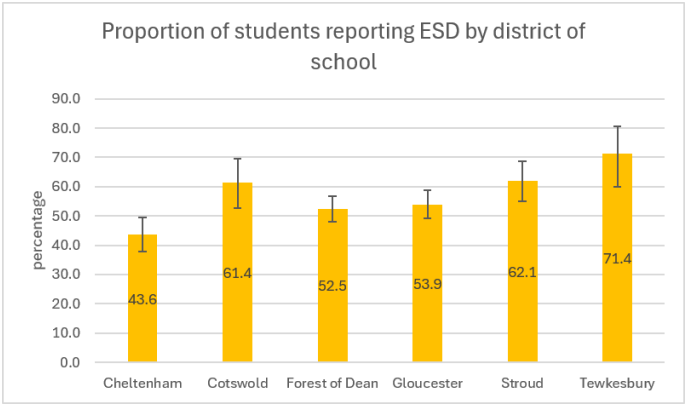


Over half (54.0%) of students who had intercourse had Early Sexual Debut (ESD) - intercourse under the legal age of consent. This had been increasing slowly since 2018 but has reduced between 2024 and 2026.



There was no difference in likelihood of reporting ESD between the sexes. There was also no significant difference between different ethnic groups and levels of ESD.

Students in Tewkesbury settings were significantly more likely to report ESD than students in settings in Cheltenham, Forest of Dean and Gloucester. Students in Cheltenham settings were the least likely to report ESD.



Safe sex

Just over half of students who had intercourse protected themselves by using a condom the last time they had intercourse (51.6%), this was reported as higher in males than females (55.5% vs.47.6%). A third of students said they or their partner had used the contraceptive pill the last time they had sex (37.2%); this was reported as higher in females than males (44.0% vs. 32.4%).

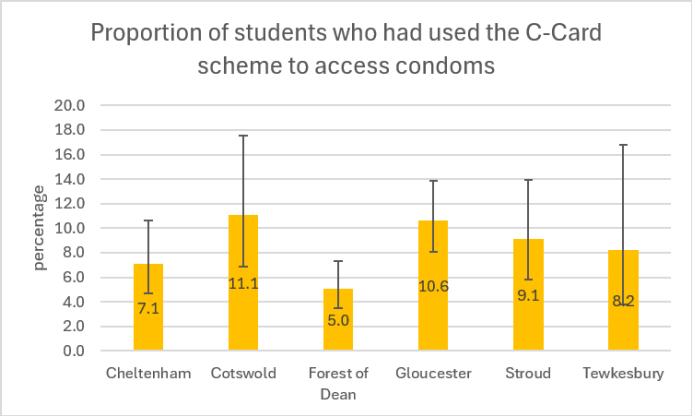


A new question was introduced in 2026 around access to condoms. Of the 1,650 students who said they had had sex 47.4% had bought condoms in a shop; this was 5.5% of all secondary and post-16 students and 60.0% of those who said they used a condom the last time they had sex.

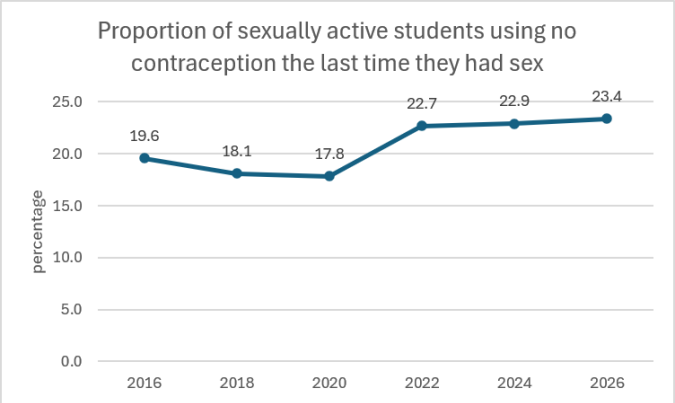
If you use condoms, where do you normally access them?			
Source	**% sexually active**	**% last used condoms**	**% all students**
Store bought	47.4%	60.0%	5.5%
Pharmacy	16.8%	20.3%	1.9%
Family or friends	12.1%	14.5%	1.4%
GP	8.4%	8.8%	1.0%
C-card scheme	8.0%	8.7%	0.9%
Online	5.5%	7.8%	0.6%
Other healthcare provider	2.4%	2.9%	0.3%

Students from the least deprived backgrounds were the most likely to say they bought condoms in a store, 52.9% of students in mainstream quintile 5 (least deprived) settings compared to 42.0% of those in mainstream quintile 1 (most deprived) settings. Students at independent settings were the most likely to have used the C-Card scheme (17.9%).

Students in Forest of Dean settings were the least likely to have accessed condoms using the C-Card scheme.

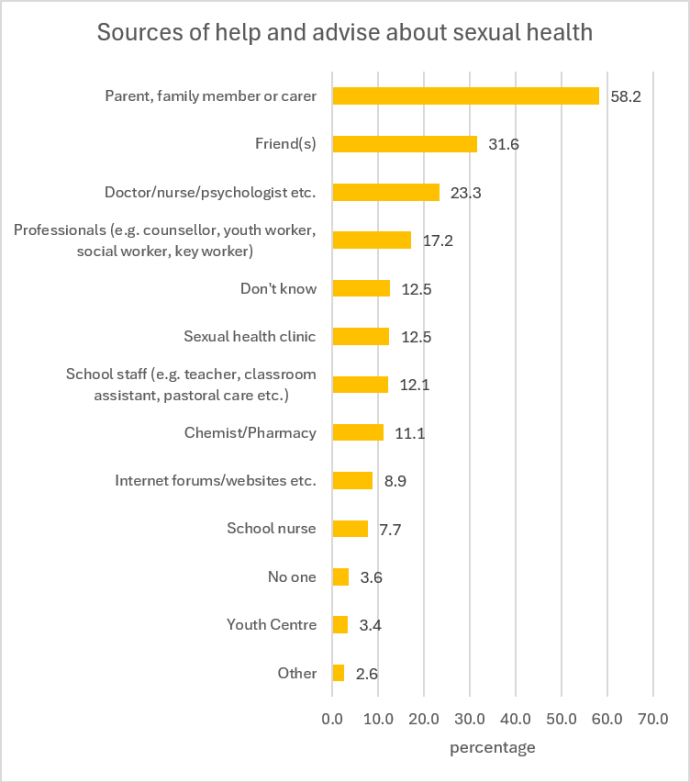


In 2026 23.4% of students who had intercourse reported using no protection the last time they had sex and a further 1.8% reported using emergency contraception after the last time they had intercourse. The proportion of students reporting they used no contraception increased between 2020 and 2022 and has not returned to pre-pandemic levels.

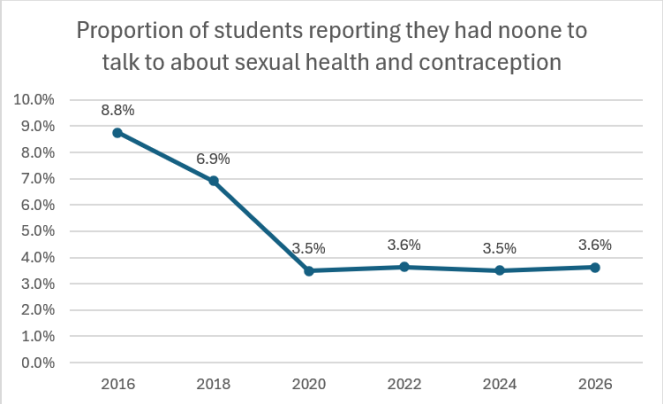


Students were asked where they would access support if they needed help and advice about *contraception/ emergency contraception/not getting pregnant or preventing STIs* (sexual health advice)., The most common response (58.2%) in 2026 was they would go to a parents/carers/family member. This has been a similar proportion since 2020. Around a quarter of students said they had gone to a doctor/nurse for sexual health advice; this was unchanged since 2012.

There has been a significant reduction in students reporting they get sexual health advice on the internet from 34.0% in 2012 to 8.9% in 2026. Between 2012 and 2024 there was a marked decrease in the proportion of students reporting getting sexual health advice from a School Nurse (from 14.6% in 2012 to 4.9% in 2024). In 2026 this proportion has increased to 7.7%.

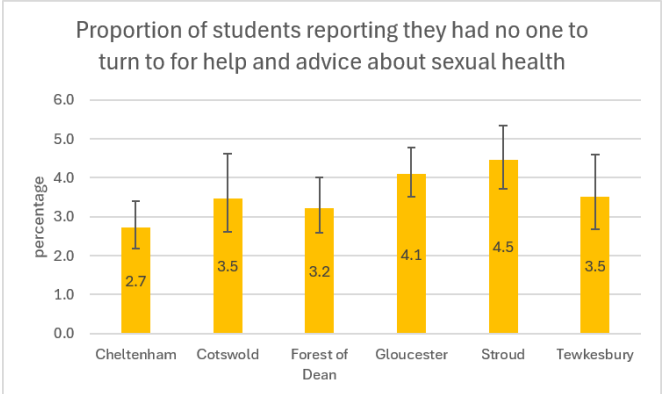


The proportion of students reporting they had no one to turn to for help and advice about sexual health has been similar since 2020 (3.6%).



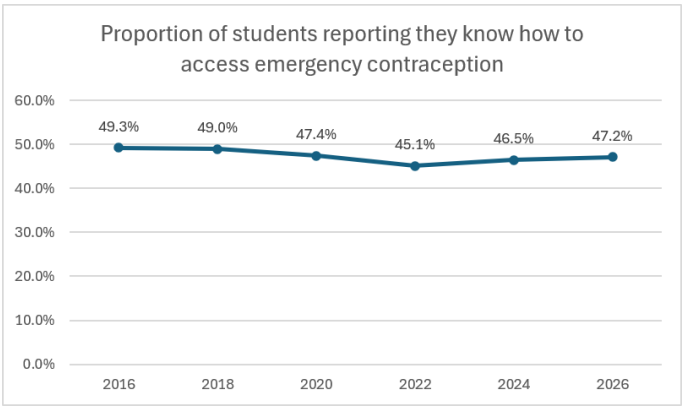
Students from diverse ethnic communities (4.3%) were significantly more likely to say they had no one to turn to for help and advice about sexual health than white British students (3.3%).

Students from Stroud were the most likely to say they had no one to turn to for help and advice about sexual health.

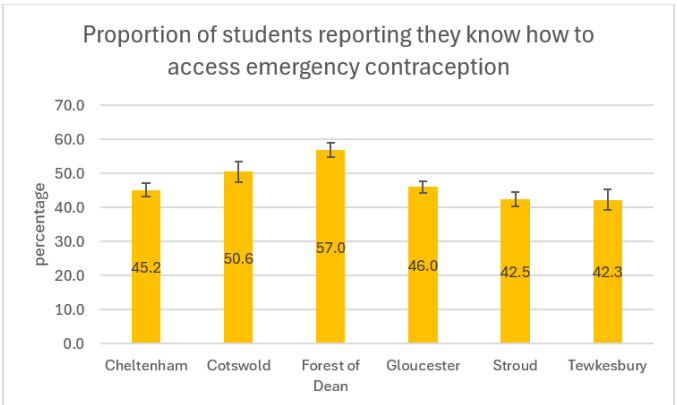


In 2026 5.1% of students said they would like more information about *Safer sex and contraception;* this was a reduction on the previous figures (9.8% in 2020). Students at special settings were the most likely to say they would like more information about *Safer sex and contraception* (15.0%). 4.7% of all students said they would like more help or advice with *Sexually transmitted infections (STIs)*. Again, this was highest in students in special settings (12.5%) but was also higher in selective (6.5%) and independent settings (7.4%).

Just under half of students reported they knew how to access emergency contraception; this has been fairly stable over the last 10 years.



Students in settings in Forest of Dean were significantly more likely to say they knew how to access emergency contraception.



Knowing how to access emergency contraception increases with age and was highest in Year 13 students where almost three quarters (72.3%) of students reported they knew how to access emergency contraception.

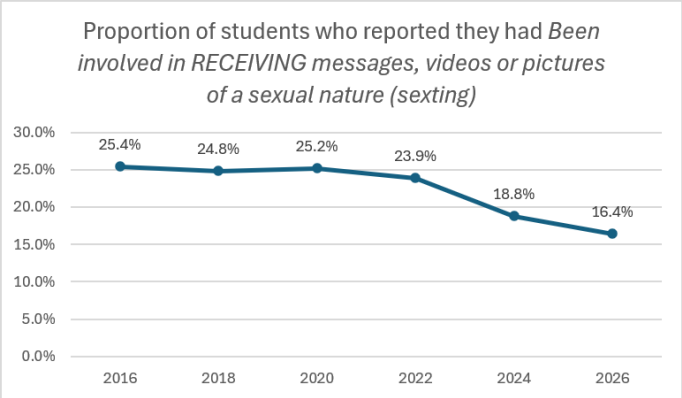
1 in 6 students (16.4%) who had had sex reported they or their partner had ever used emergency contraception. Whilst there was no statistically significant difference, students from independent settings (25.6%) were the most likely to say they or their partner had used emergency contraception. Students in Stroud settings (20.3%) were the most likely to report they or their partner used emergency contraception, although not significantly so.

Students who had used emergency contraception were asked how easy they had found it to access.

Almost two thirds (61.3%) of students said they had found it *easy/very easy*. There was no significant difference in finding it *easy/very easy* to access emergency contraception by statistical neighbour group, district of setting or ethnicity.

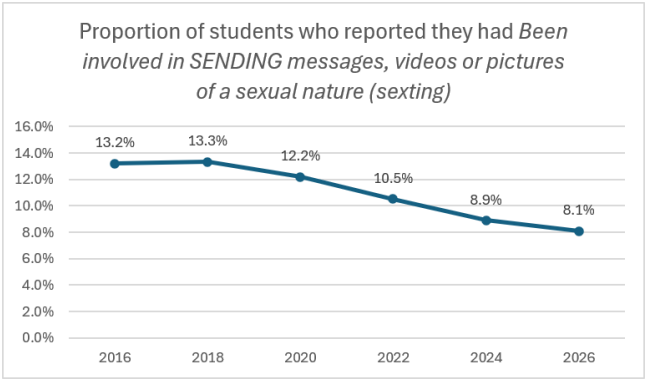
Sexual abuse

Around 1 in 6 students said they had received a message or picture of a sexual nature in 2026, this continues a downwards trend observed since 2020.



Females were more likely to have received a message or picture of a sexual nature than males (20.2% vs. 14.7%).

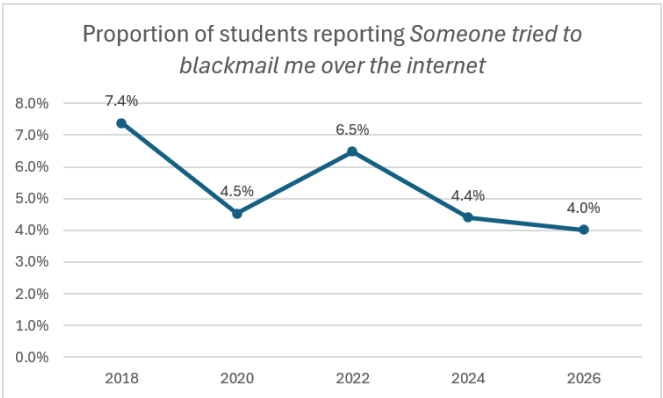
8.1% students reported they had sent a message or picture of a sexual nature in 2026. This has been reducing since 2018 (13.3%).



There was no difference between male and female students in likelihood to have sent a message or picture of a sexual nature.

The proportion of students reporting sending a sexual image of themselves in 2026 (6.3% all students, 7.5% of females and 6.3% of males) has reduced by almost half since 2016 (11.1%). Students with low mental wellbeing were almost twice as likely to report sending a message or picture of a sexual nature than those with average or high mental wellbeing (*OR 1.9*).

4.0% of students said *Someone tried to blackmail me over the internet e.g. tried to force me to send money or naked pictures* however, this was higher in females than males (5.1% vs. 3.4%). After increasing significantly during the pandemic, the proportion of students saying *Someone tried to blackmail me over the internet e.g. tried to force me to send money or naked pictures* has returned to be in line with pre-pandemic (4.5% in 2020).



Students with low mental wellbeing were 3 times as likely to say *Someone tried to blackmail me over the internet e.g. tried to force me to send money or naked pictures* than those with average or high mental wellbeing (*OR 3.1*).

Around 1 in 33 students said they would like more advice about *Sexting/Sextortion*, this was higher in females (3.6%) than males (2.7%).

In 2026 a new question was introduced to the survey - *Has an adult ever taken advantage of an imbalance of power to coerce, manipulate or deceive you into sexual activity, online or in person?*

Around 1 in 20 (4.7%) of secondary and post-16 students said they had been taken advantage of by an adult to coerce, manipulate or deceive them into sexual activity. Students from vulnerable groups were significantly more likely to report being taken advantage of by an adult.

Sexual abuse by an adult	
Vulnerable group	**Increased liklihood (odds ratio)**
Females	3.3
Disability	2.0
SEN	2.2
Neurodiverse	2.6
Known to social care	2.9
LGBTQ+	3.1
Young Carer	3.6
Bullied	3.3
Eligible for FSM	2.0
4+ ACEs	6.2

In 2022 questions around sexual harassment/abuse were included for the first time. Only 1 in 3 (35.8%) students reported they had **never** experienced any form of sexual harassment/abuse in 2026 which was lower than the 2024 survey (28.2%).

In most forms of sexual harassment/abuse females were more likely to report experiencing it than males, except *Unwanted touching* which was reported by a higher proportion of males.

Almost two thirds of females reported ever experiencing *Comments that affect their body image* (61.2%) and half reported ever experiencing *Sexist comments* (54.3%) and *Rumours about other students' sexual activity* (54.8%).

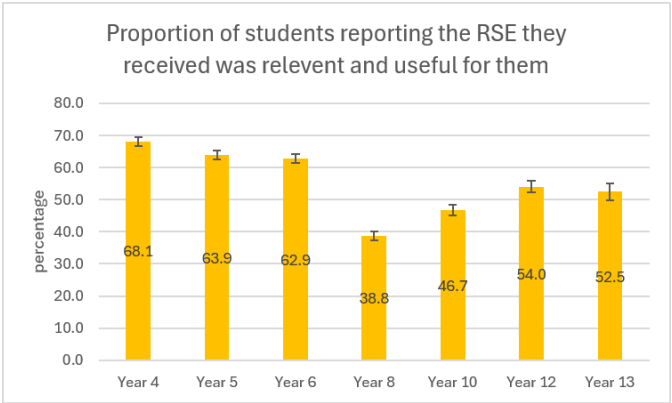
Sexual harrassment/abuse	*Ever experienced*		
	All	Female	Male
Rumours about other students' sexual activity	48.3%	54.8%	43.7%
Unwanted or inappropriate sexual remarks	37.0%	44.2%	31.6%
Sexist comments	43.2%	54.3%	33.2%
Comments that affect your body image	49.8%	61.2%	39.9%
Unwanted touching	28.0%	27.8%	28.7%
Feeling pressured to take part in unwanted kissing or behaviour of a sexual nature	12.5%	14.9%	9.5%
Up skirting	5.6%	6.2%	4.3%
Sexual images/videos of students being shared without consent	19.3%	22.0%	16.4%
Verbal or physical threat of a sexual nature	14.8%	16.2%	13.6%
Stalking	13.4%	14.9%	11.2%
Any other form of sexual harassment or abuse	14.1%	17.3%	10.6%

Relationships and Sex Education (RSE)

Since September 2020, Relationships and Sex Education has been compulsory for all students. In 2012 67.5% of secondary and post-16 students said the *Healthy relationships and sex education (RSE)* they had received was helpful, this increased significantly in 2024 to 82.9% of students.

In 2026 the question about RSE was changed slightly and was expanded to younger students - *The relationships, sex and health education (RSHE) I received was relevant to me and useful*.

In 2026 56.2% of students said the relationships, sex and health education they received was relevant and useful. This appeared to drop dramatically in the transition to secondary education but increases again as students progress into Years 10, 12 and 13.





Conclusion

The 2026 Pupil Wellbeing Survey indicates that many indicators related to relationships, body positivity, sexual behaviour and online sexual harm have either stabilised or improved following the disruption observed during and immediately after the pandemic. The proportion of students reporting that they find it easy to make and keep friends has increased since 2022, reports of receiving or sending sexual messages or pictures have continued to reduce, understanding of consent has improved over time, and the proportion of students reporting low body positivity has fallen from its 2022 peak. These findings suggest some recovery in young people's social confidence and wellbeing, although several measures remain below pre-pandemic levels or continue to show substantial unmet need.

The analysis also highlights that a sizeable minority of students continue to experience relationship-related harms. Around 1 in 6 students reported ever witnessing domestic abuse and a similar proportion reported ever being a victim of domestic abuse, with regular experience strongly associated with poorer outcomes including low mental wellbeing, running away from home, contact with police, weapon carrying and need for mental health support. Although reported witnessing of domestic abuse has reduced substantially since 2024, the scale of reported regular experience and its association with wider vulnerability remains a significant safeguarding and public health concern.

Across the report, inequalities are a consistent and important theme. Students with vulnerable characteristics, including those identifying as LGBTQ+, students with a disability, those with SEN support or an EHCP, neurodivergent students, young carers, those known to social care, students eligible for Free School Meals and those from diverse ethnic communities, were repeatedly more likely to report poorer experiences or lower levels of support. These inequalities were evident in friendship formation, feeling safe at home, experiences of domestic abuse, access to trusted sources of advice, and exposure to sexual harassment or abuse. Deprivation also appears to be associated with some areas of increased risk, particularly regular witnessing of domestic abuse and demand for advice around puberty and growing up.

There are also clear points of transition and developmental need. Primary students were more likely than older students to say they needed more information about relationships, while body positivity concerns were particularly evident among younger secondary pupils and females. In relation to RSE, the apparent drop in perceived relevance and usefulness during year 8 suggests a need to consider how RSHE is sequenced, tailored and reinforced as students mature. The findings around consent, contraception, emergency contraception and sources of sexual health advice also indicate that while knowledge has improved in some areas, gaps remain for particular groups and settings.

Overall, the findings show a mixed picture: there are encouraging signs of recovery and improvement, but these sit alongside persistent inequalities and significant levels of harm among some groups of children and young people. The evidence reinforces the importance of inclusive, developmentally appropriate RSHE; accessible and trusted routes to support; and targeted approaches for students most likely to experience vulnerability, exclusion or poorer wellbeing. Continued monitoring through the Pupil Wellbeing Survey will be important to understand whether recent improvements are sustained and to ensure that support is focused on the groups and issues where need remains greatest.