

Mental health and the coronavirus research bite #5: Supporting pupil mental health and wellbeing during the return to school

About this series

We are aware that parents, carers, school staff and all those working with young people might have many questions about how to support children and young people's mental health and wellbeing during the coronavirus pandemic. We know that it can be hard to find evidence about the best ways to tackle some of these challenges. The Evidence Based Practice Unit (a collaboration between the Anna Freud Centre and UCL) is producing a series of 'research bites' based on rapid reviews of existing research. These are not thorough or extensive reviews, rather they aim to offer concise and timely insights on some topical issues.

The question: what are the key factors that should be considered for reopening schools in relation to pupils' mental health?

In response to the coronavirus pandemic, most governments around the world implemented temporary national or localised school closures.¹ Such widespread school closures are unprecedented; reopening schools and colleges poses a challenge worldwide, requiring a combination of new health and safety practices such as careful hand hygiene, use of quarantine, and physical distancing strategies. Although the evidence is still emerging, there is some research to suggest that these measures can contribute towards reducing the spread of disease in schools and colleges.²⁻⁴

Despite these safety measures, recent surveys tell us that some parents, carers, pupils and teachers have understandable worries and concerns about returning after the summer break.⁵ Recent results from school staff surveys highlight concerns regarding the mental wellbeing of pupils and the importance of prioritising mental health support in the return to school process.^{6,7}

School closures can have adverse impacts on children and adolescents, across a range of areas. These impacts may be greater for some

children and young people, including those with special education needs, those experiencing poverty, and those living in high risk home environments, for example with a history of domestic violence.^{1,8-12} In addition, the nature and duration of the pandemic and lockdown measures are having a significant impact on mental health and wellbeing for some children and young people, contributing to the onset as well as exacerbation of worry, fear, anxiety, depression, and posttraumatic stress.^{10,11,13-15} As schools and colleges reopen, staff may face challenges when it comes to supporting the needs of their pupils.

In this research bite, we draw on emerging literature from countries and contexts where schools have now reopened after the coronavirus pandemic lockdown to identify the key factors that should be considered for reopening schools in relation to pupils' mental health.



How did we answer this question?

We conducted a rapid review of the research literature, looking for published research that relates to the reopening of schools after the coronavirus pandemic lockdown across different countries and contexts. We also drew on literature previously collated by the Evidence Based Practice Unit and the Child Outcomes Research Consortium as part of the 'Emerging Evidence' series, which includes evidence published during the pandemic from around the world.ⁱ Conducting a literature search in this way is less rigorous than conducting a systematic reviewⁱⁱ but helps us find relevant evidence quickly.

Because of the unprecedented and rapid nature of the lockdown and school closures, there has been limited empirical research published on the experience of school reintegration and the impact on teachers and pupils. For this reason, we have drawn on other forms of literature, including policy briefings and descriptive reviews of approaches from different contexts. The rapid nature of this work means that assessing the quality of the literature is not possible, but we have tried to draw on clear emerging findings and robust evidence, with input from both education and clinical professionals.



What did we find out?

Schools play a crucial role in supporting the mental health and wellbeing of children and young people. In response to the coronavirus pandemic, this role is more important than ever.

a) The need to focus on wellbeing and reconnection to support pupils' transitions

As schools have only recently begun to reopen, there is little evidence on the mental health impacts of school closures available, but many school staff are expecting a mental health impact on their pupils and their school's ability to support them.¹⁶

As pupils begin to return to schools, guidance has suggested the need to focus on wellbeing and reconnection to support their transition,¹⁷ allowing time for adjustment and pastoral activities without the pressure of focussing on academic attainment.¹⁸ There is evidence which suggests that a positive emotional state is crucial for both learning and social interactions in education settings,¹⁹ and it may be particularly challenging to prioritise resources for such support in addition to academic outcomes. However, the current circumstances present an opportunity to monitor, learn, and adapt practice and, given recent report of escalating mental health challenges during lockdown,¹⁰ particular attention should be paid to supporting children and young people's mental health as they return to school and adjust to 'a new normal'.

b) Some children and young people will have been disproportionately affected

Some young people will likely need additional support and consideration in returning to schools. Pupils with special education needs, existing mental health problems and neurodevelopment disorders,ⁱⁱⁱ may need additional support in returning to school as lockdown measures may have worsened their symptoms and they may have had reduced access to support services.^{15,16,20,21} These pupils may also struggle to adapt to changes in the

i. <https://www.annafreud.org/coronavirus-support/our-research/>

ii. A systematic review summarises evidence about a topic by looking at the results of multiple studies

iii. Such as autism spectrum conditions (ASCs), attention-deficit hyperactivity disorder (ADHD), obsessive compulsive disorder (OCD), eating disorders and Gilles de la Tourette Syndrome (GTS)

school environment, as they may find these changes to be distressing and to increase anxiety.^{10,11,15}

Those with additional social care needs, such as young carers, children in care, or those experiencing poverty or homelessness are also likely to be particularly affected, and may be struggling due to reduced support systems and the financial impact of the pandemic and may also find it harder to rebuild trusting relationships with staff.^{11,16,22–25}

Evidence suggests that in the UK, people of colour from a range of ethnic backgrounds (including people who are Black African, Black Caribbean, Bangladeshi and Pakistani) are disproportionately affected by the coronavirus in terms of exposure to infection, mortality, and loss of income.^{iv} These factors may result in an elevated strain on the mental health and overall wellbeing of these families and their children, and therefore some children and young people of colour may require additional support when returning to school.^{11,26,27}

As a result of the pandemic, many children and young people will have experienced bereavement, financial stresses, complicated domestic situations, or reduced access to support services. In addition, since schools have closed there have been increased rates of domestic violence and therefore many children and young people may be returning to school with additional trauma resulting from witnessing and experiencing abuse.^{28,29} This will have considerable mental health ramifications for young people.

Although it will be an ongoing process, it may be helpful for schools and colleges to work towards a heightened awareness of the profile of their school communities to help anticipate need. Continual monitoring of pupil and staff wellbeing, for example using wellbeing surveys,^v can help provide a wellbeing “temperature check” for the school in order to inform decisions and identify gaps and need, as well as achievements.



c) Not all aspects of the lockdown will have been negative for all children and young people

For some children and young people, such as young carers and those with social anxiety, behavioural difficulties and/or ASCs, school closures and the shift to virtual methods of communication may have been a positive experience, and easier to manage than typical schooling.^{11,30} Children and young people who were able to continue to learn and maintain social connections remotely have experienced positive mental health impacts.^{31–33} Whilst the severe restrictions and extended period of family confinement will have been stressful for many, some families will also have developed new routines and closer attachment relationships that may make the return to school particularly difficult.³⁴

iv. Please see the section ‘Note on our use of language’ at the end of this research bite, where we discuss our use of language in addressing issues relating to race and ethnicity

v. Information on measuring wellbeing in schools can be found at <https://www.corc.uk.net/for-schools/> and in this booklet: <https://www.annafreud.org/media/4612/mwb-toolkit-final-draft-4.pdf>

A number of young people experienced difficulty in regularly attending school before the pandemic; factors such as bullying, mental health problems, low academic achievement and school characteristics were leading to school avoidance.³⁵ Pupils for whom attending school regularly was a challenge may have experienced positive mental health during the pandemic and lockdown due to reduced stressors. Now having to reintegrate into school under new and uncertain conditions may pose additional mental health challenges to such pupils. Other pupils with additional needs, such as those with Educational, Health and Care Plans who were permitted to attend school during the lockdown where they may have benefitted from smaller classes and less intensive routines,³⁶ may also find the return to school particularly challenging.^{37,38}

It is important to consider that, while some aspects of lockdown and school closures will have had a negative impact on some young people, this will not be true for everyone and not all children and young people will have been affected in the same way.

d) Mental health and wellbeing of school staff

Staff have understandable concerns and fears about returning to school, which is exacerbated by the ever-changing situation and associated guidance. Measures need to be taken to support their mental health and provide appropriate access to resources.³⁹ Staff will be required to implement physical safety measures and to support pupil mental health alongside their teaching responsibilities, and may be at risk for secondary traumatic stress.⁴⁰

Guidance around supporting staff mental health suggests several key recommendations, including self-care; encouraging a sense of community and provide an opportunity to feedback regularly.⁴¹ A considered approach to staff wellbeing may be particularly important where staff wellbeing resources (such as staff rooms, staff meetings and social activities) are difficult to maintain in their previous formats due to distancing measures.

e) Involvement of parents, carers and the community

The act of reopening schools alone will not address the mental health challenges that have resulted from school closures.²³ Addressing these challenges will require schools, parents, carers and communities to work together to support young people as they transition back.^{11,23,42} For example, teachers may find it helpful to communicate with parents and carers to help understand any unique needs or concerns of pupils.

Gaining insights into what individual pupils have experienced while away from school will help staff prepare for the challenges that lie ahead. Daily opportunistic face-to-face communication between schools and parents and carers may be limited by procedural changes in response to distancing measures. For example, changes to the way primary school pupils are dropped off and collected. Therefore, taking steps to retain close contact with parents, carers and the wider community will help schools to explore and understand the particular challenges faced by their pupils, whilst also building trust and enhancing community resilience.³⁸



What are the implications?

While the quantity of international literature identified for this research bite is limited, the literature described provides insight into how school reintegration can be understood in various contexts to protect the health and safety of students, staff, and families. There is no one-size-fits-all solution and individual circumstances need to be taken into consideration. What consistently comes across in the literature is the need for clear guidance to support schools through the process of reopening.^{vi}

It is widely agreed that there are significant concerns for the mental health and socioemotional development of children and young people in light of reduced social contact and learning opportunities as a result of school closures. It is therefore crucial to make mental health a key component of planning as schools reopen.



The following resources provide guidance which may be useful in supporting students' wellbeing and transition back into school:

- » **Mental Health Foundation.** *Supporting pupils to return to school.* This offers teachers guidance on planning the transition back to school and talking to pupils, as well as more practical tools and strategies to rebuild relationships and support pupils on their return to school. <https://www.mentalhealth.org.uk/coronavirus/returning-school-after-lockdown/support-pupils-return-to-school>
- » **British Psychological Society.** *Back to school: Using psychological perspectives to support re-engagement and recovery.* This briefing offers a psychological perspective on the process of re-engaging children and young people with school, as well as offering recommendations for preparing and supporting pupils for the return to school. <https://www.bps.org.uk/coronavirus-resources/public/back-to-school>
- » **Anna Freud Centre.** *Managing the transition back to school: a guide for schools and colleges.* This document includes guidance for schools and colleges on how to provide additional support to help children cope with the transition back into schools, including actions to take to build resilience once pupils are back in the classroom. <https://www.annafreud.org/media/11727/managing-transition-back-to-school-jun2020.pdf>
- » **Anna Freud Centre.** *Talking to children and young people about the pandemic.* This research bite discusses how we can have conversations with children and young people about the coronavirus pandemic and the impact it is having on our lives. <https://www.annafreud.org/media/11683/coronavirus-research-bite-3-talking-to-cyp-v2.pdf>
- » **Mentally Healthy Schools.** *Coronavirus: resources to support the return to school.* This document contains resources for parents, carers and schools. It includes activities and tips which parents and carers can use when supporting children re-starting school and resources for schools to use in the autumn term and in planning for the new school year. <https://www.mentallyhealthyschools.org.uk/media/2077/coronavirus-toolkit-return-to-school.pdf>
- » **EBPU and the University of Manchester.** *Whole school approaches to promoting mental health: what does the evidence say?* It will be important to promote positive mental health and wellbeing among both staff and pupils, a whole school approach to mental health maybe helpful. This briefing provides some examples of whole school approaches in practice. https://www.ucl.ac.uk/evidence-based-practice-unit/sites/evidence-based-practice-unit/files/evidencebriefing5_v1d7_completed_06.01.20.pdf

vi. Further guidance can be found in the UNESCO, UNICEF, the World Bank, and World Food Programme framework (2020).

Note on our use of language

In this research bite we have referred to children and young people of colour as a broad category; however, we recognise there are difficulties with this categorisation. Where possible, we have further specified racial and ethnic groups according to the terms given in the source literature. We have discussed as a unit as to how to carefully and consciously use language in addressing issues relating to race and ethnicity. This reflects an ongoing area of enquiry and concern for us: please see Our commitment to equity, diversity and taking an anti-racist stance which is available online at: <https://www.ucl.ac.uk/evidence-based-practice-unit/about>

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About EBP

The Evidence Based Practice Unit is a child and youth mental health research and innovation unit based at UCL Faculty of Brain Sciences and the Anna Freud Centre. Founded in 2006, this collaboration bridges cutting-edge research and innovative practice in children's mental health. We conduct research, develop tools, provide training, evaluate interventions and disseminate evidence across four themes:

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EBPU is a partnership of UCL and the Anna Freud Centre. The Anna Freud Centre is a company limited by guarantee, company number 03819888, and a registered charity, number 1077106.

Thanks to Sarah Stock, Holly Bear, Melissa A. Cortina, and Anna Moore for carrying out rapid literature searches and for summarising the information in this research bite.