

Sustaining Educational Opportunity During the Covid Crisis

Client: Municipality of Santa Ana in Costa Rica

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Team Members: Bingyao Hu, Peter Swing, and Vo Ram Yoon

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Professor Fernando Reimers

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If we think what we have to teach children tomorrow is reading or mathematics, then we aren't learning anything from the pandemics. Because the greatest needs that our students are right now facing are socioemotional and mental health. That is number one. Nothing else comes close...Many of our kids have seen death up close as a result of this pandemic and I'm not talking about George Floyd or Ahmaud Arbery or Breonna Taylor. I'm talking about somebody in their family or their neighbor has died because they are "essential workers".

- Dr. Gloria Ladson-Billings, *2020 RILE Conference at Stanford GSE*

Problem Statement

On October 8, 2020, a group of Costa Rican young adults released a song titled "Me Siento Alone" (I Feel Alone) as part of the national campaign #MeSiento (#IFeel) to raise awareness of and destigmatize mental health problems that have proliferated with quarantine orders in place and schools staying closed (Presidencia de la Republica de Costa Rica, 2020). The music video features singer Raquel Gómez spending countless days in her room with clothes strewn across the floor and relying on a video-chatting app to maintain a semblance of human connection. The melancholy lyrics and video are meant to represent the feelings of depression and isolation that youths in Costa Rica have been facing this year. Many of them have shared their own experiences dealing with poor mental health on social media using the campaign's hashtag to highlight the urgency of mental health problems in Costa Rica and galvanize political leaders to address them. The fact that youths have raised their own voices to influence the national response to the COVID-19 pandemic underscores how crucial it is to create effective policies that foster emotional resilience and mitigate trauma.

The major education challenge that public schools in the Municipality of Santa Ana are facing is that student performance, as measured by grades and in-class behavior, has been faltering across grade levels due to underlying mental health problems that have been both caused and magnified by the COVID-19 pandemic. The absence of a municipality-wide strategy

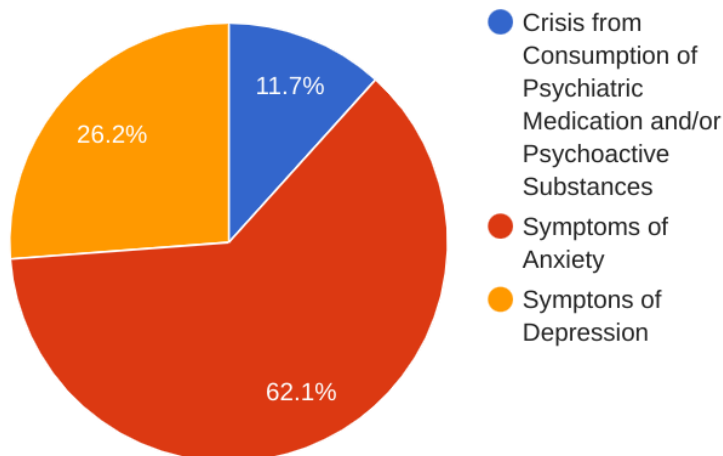
that aligns schools, teachers, and parents to respond effectively to the mental illnesses of students exacerbates the odds that students will be able to fully recover from the hardships of distance learning and trauma of the pandemic, much less readapt to in-person schooling one day. Utilizing both quantitative data from official government sources and qualitative data provided by teachers and parents, this policy analysis paper will establish the urgency of mental health issues among students in Costa Rica, provide a literature review on the topic of mental health and cross-national interventions, and offer concrete policy responses for the municipality.

Quantitative Indicators of the Mental Health of Costa Rican Youths

Tracking the number of phone calls for psychological aid during the pandemic, a report by the College of Professionals in Psychology in Costa Rica (CPPCR) demonstrates that Costa Rican youths under 18 years old have been experiencing emotional distress in the past several months (Facio, 2020). A partnership among the CPPCR, the Ministry of Education, and the Ministry of Health, the “Aqui Estoy” hotline promotes self-care, psychosocial accompaniment, and attention to the needs of students-at-risk, which has been widely publicized as a free resource for anyone struggling with mental health issues during the pandemic. The report shows that there was a total of 4,090 phone calls made from May 4th to October 13th. Out of those 4,090 phone calls, about 5% of them came from youths, defined to be anyone less than 18 years old, for a total of 206 calls. Figure 1 classifies the cause of those 206 calls into three main categories as defined by the CPPCR. Compared to adults, youths report similar levels of depression and anxiety although the fact that the percentage of emergencies emerging from the improper usage of medication and drugs is only slightly lower than that of adults’ is concerning.

Figure 1

Classification of Primary Reason for Consultation Among Youths



Further examination as to what is causing students to experience anxiety and depression reveals certain factors that are strongly associated with mental illness among Costa Rican youth. In Figure 2, most cases of mental health problems involve isolation, which could broadly cover cases involving general discontent with heavily relying on social media to maintain friendships or being left alone for extended periods of time at home. Although virtual schooling was referred to as the primary cause of anxiety in only about 3% of cases, this does not necessarily mean that the learning of youths has remained relatively unaffected or that students are mostly satisfied with virtual schooling. Rather, one should consider how anxiety induced by feelings of abandonment and challenges of living in a toxic household can have a negative effect on academic performance, behavior, and attitudes towards school.

Figure 2

Classification of Reason Behind Feelings of Anxiety Among Youths

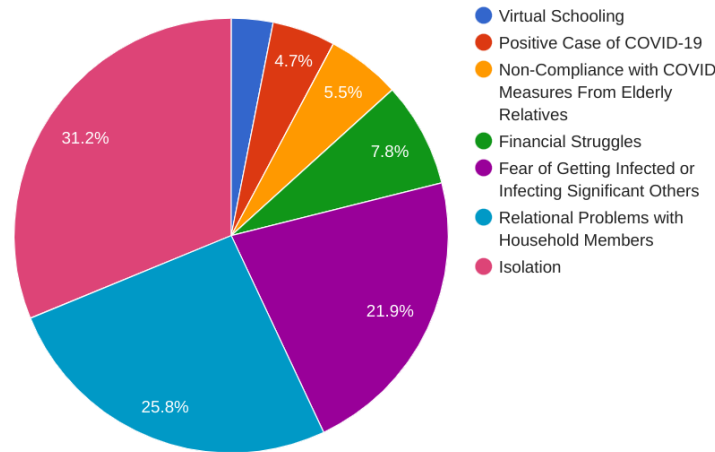
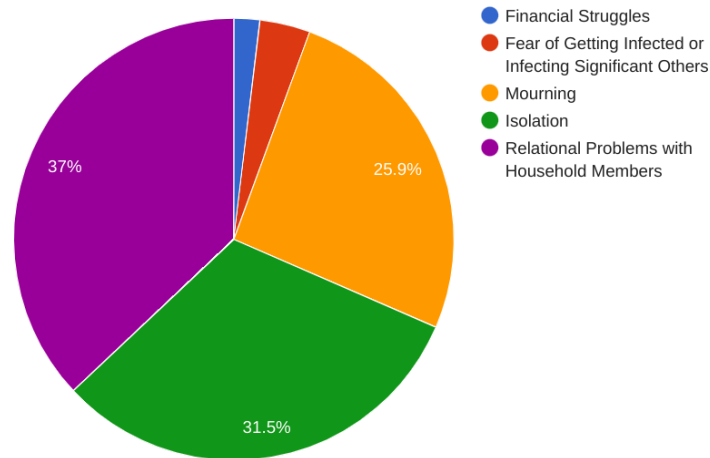


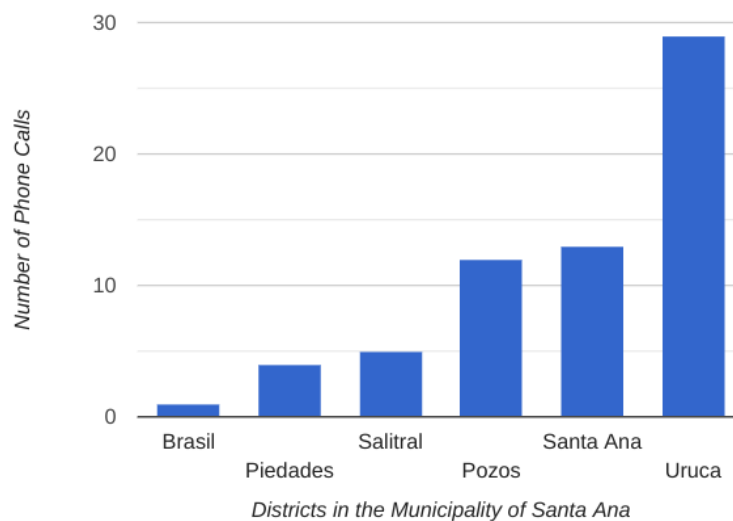
Figure 3 focuses on cases of depression and the reasons that have been identified as major factors, some of which are shared with Figure 2. In contrast to Figure 2, one can see that relational problems with one's family are the most stated cause of depression while isolation is the second most common reason. Mourning the death of someone who has died, whether the cause of death was attributed to COVID-19 or not, is also a leading cause of depression among youths in Costa Rica. Another difference between Figure 3 and Figure 2 is that virtual schooling does not appear to be a statistically significant cause of depression. Nonetheless, struggles with depression that are exacerbated by problems with one's family, lack of socialization with others, or the death of someone can have a negative impact on a student's performance at school.

Figure 3*Classification of Reason Behind Feelings of Depression Among Youths*

Disaggregated by municipality, there was a total of 64 phone calls that originated from the Municipality of Santa Ana. Figure 4 further disaggregates them by individual district, with only 1 phone call coming from the district of Brasil and Uruca having the most phone calls in the municipality. From the data, it is not clear how many of those 64 phone calls came from youths, but it is evident that there are residents in the municipality who have been struggling with mental health issues. It is possible that the small number of phone calls belies a larger number of people who have been suffering from mental illness, yet lack the capacity to reach out for help.

Figure 4

Distribution of Phone Calls for Psychological Aid in the Municipality of Santa Ana



Qualitative Indicators of the Mental Health of Costa Rican Youths

To better understand the experiences of Costa Rican students with mental illness during a pandemic, we surveyed teachers and parents residing in the Municipality of Santa Ana on how the pandemic has affected the mental health of their students and children, which in turn could have affected their performance at school. Some parents and teachers have reported that several students have been doing better with virtual schooling for a few cited reasons: less distractions at home compared to in-person schooling, fewer experiences with social anxiety, and high level of emotional resilience in the students themselves. But for most students, the lack of human contact with classmates, excessive time spent looking at screens, and reduced opportunities for physical exercise have led to higher levels of depression, laziness, and stress. These symptoms of mental illness have contributed to lower quiz scores, missed deadlines, and reduced participation in class. One teacher described at length how their students were affected by the pandemic:

The sadness they carry from not being able to be with their friends has impacted their emotions and their performance. The monotony and routine of virtual classes makes them tired and bored. And at the same time, the pressure they have to continue studying as if they were in a normal school period and the pressure to keep their grades high has impacted their self-confidence.

While there may be some students who are meeting or even exceeding expectations, teachers observe that most students are in a negative feedback loop where mental illness reduces performance, which in turn only aggravates the negative emotions that students are struggling with.

Just like teachers, parents have also been reporting a range of responses from their children to virtual learning and the pandemic in general. While some have stated that their children do seem to be doing better from reduced distractions, most shared that the mental distress caused by the pandemic has resulted in worsened school performance and behavior issues that were not present before. As Figure 2 and Figure 3 demonstrated, isolation is one of the largest factors that give rise to symptoms of anxiety and depression among youths. While virtual schooling itself may not be a significant cause of mental illness according to CPPCR's data, the statistics do not fully reflect how isolation and mental illness are mediated by the experience of virtual schooling as described by one parent:

School performance is also negatively impacted. He's distracted in class, and spending too much time in front of screens for his age. Being on a computer at this young age, for multiple hours in the day, during class and assignments isn't helping. He doesn't spend any time interacting personally with classmates

anymore, and discussions in online forums is limited, so he does feel quite isolated.

Taking the voices of parents into account supports the observations of teachers and raises the possibility that students could end up with persisting behavior issues that will make it difficult for them to properly socialize with their peers once in-person schooling returns.

The Link Between Mental Health & Academic Achievement

Learners' academic outcomes in the Municipality of Santa Ana could be affected by mental health problems along two margins: the decision to remain in school and performance in class. Mental disorder predicts a higher risk of dropping out of school, and thus truncates educational attainment. A longitudinal study following a cohort of Australian students from the age of 15 to the completion of high school where adolescents who reported a poor mental state had twice the odds of dropping out compared to those in a more stable condition (Butterworth & Leach, 2017).

For marginalized students, the risk of dropping out is even higher. In one study of special education students, the expulsion rate for students with emotional disturbances was 64% (Blackorby, et al., 2004). Once students drop out of school, it is highly unlikely for them to continue education. A comprehensive study of reenrollment conducted by the federal regional educational lab in San Francisco shows that only 30 percent of dropouts returned to school, and fewer than 20 percent managed to graduate (Berliner, Barrat, Fong, & Shirk, 2008). Furthermore, dropping out of the school system can also lead to juvenile delinquency. Students who did not complete high school have higher rates of illegal drug use and alcohol abuse, and they are 63 times more likely to be jailed than non-dropouts (Fernández-Suárez et al., 2016). Overall, the

association between dropping out and delinquency will decrease students' odds of re-engaging in learning opportunities, making them less likely to attain the same level of academic attainment with their similarly aged peers.

If students continue their education in school, mental illness can negatively affect students' cognitive and noncognitive capability, which are closely related to students' productivity and performance. Research shows that children's developmental competence is integral to their academic competence (Masten, et al., 2005). However, a prolonged period of stress, which is very likely for children to experience during the COVID-19 pandemic, could lead to developmental deficiencies and interfere with academic capabilities. According to Cara Wellman (2014), chronic stress alters the chemical and physical structure of the brain, damaging cognitive skills such as attention, memory, and creativity. In addition, behavioral problems might trigger conflicts between child and teacher, and social exclusion, thereby resulting in negative learning experiences (Agnafors, 2020). Since students' perceptions of teacher support and the mutual respect are directly linked to positive changes in academic motivation and engagement (Ryan & Patrick, 2001), teacher-student conflicts may also negatively impact students' willingness to engage in interactive and academic activities. Therefore, low adjustability and a strained student-teacher relationship related to behavioral disturbances jointly contribute to low academic performance.

Combining evidence on the experiences of students in Costa Rica with empirical research on how mental illness affects academic outcomes shows that the Municipality of Santa Ana not only has to care for the physical health of youths during a pandemic, but also for their mental health in a challenging time where they are expected to meet typical learning goals. 15% (8,991)

of Santa Ana's population are students and of those, 22.1% have a disability or presence of a learning condition and 26.3% need some type of learning accommodation (Corrales, 2012). Additionally, Santa Ana's overall poverty rate is 19.2%, but districts within the municipality have rates as high as 36.98% (Salitral) and 20.22% (Piedades). It is likely that the impact of the pandemic on mental health will be even more severe for students who have already been struggling in school due to financial constraints or learning disabilities based on prior investigations on mental health by Costa Rica's Ministry of Health (Corrales, 2012). The pandemic has made an already existing dire economic situation worse and leaves students of Santa Ana extremely vulnerable to mental health problems that have significantly negative effects on their learning.

International Case Studies in Improving Student Mental Health

Since student mental health is also tied to the health of the wider community, an effective action plan includes a tiered support system that uses technology to diagnose symptoms and provide services, as evidenced by Panama's response to COVID-19 (Alcaldia de Panama, 2020). Bordering Costa Rica, Panama is similar to its neighbor as measured by economic size, literacy rates, and capacity to provide digital devices as well as support to schools in adapting to online learning (UNESCO Institute of Statistics, 2018; Reimers & Schleicher, 2020). Panama organizes mental health symptoms in three levels of severity: code green for mild symptoms like uncertainty and fear of infection, code yellow for moderate symptoms like panic and tightness in the chest, and code red for serious manifestations of psychological disorders. Residents of Panama experiencing psychological distress can contact Panama's mental health program, SAMI, to receive remote counseling (Municipio de Panama, 2020). Psychosocial support is

mainly provided remotely through calls and telemedicine, which have been shown to be as effective as in-person appointments to diagnose and assess the mental health of people across all ages; a review of 70 studies on telemental health delivery programs demonstrated that patients were not only satisfied with the convenience and quality of care, but hospitals were also able to save money from reduced travel and administrative costs (Hilty et al., 2013). SAMI complements its counseling help line with mass emails, posters, videos, and training sessions on emotional regulation (López et al., 2020). With the pandemic limiting in-person interactions and imposing chronic stress on many, countries must learn to use technology to provide personalized mental health support.

Colombia's "En Confianza con las Familias" (Trusting in Families) combines the potential of family-school partnerships with socioemotional learning (SEL) to raise the capacity of schools and families to raise healthy and engaged learners (Ministerio de Educacion, 2020). Spearheaded by the country's Ministry of Education, the main component of this initiative is live broadcasting of experts in psychology, childhood development, and family relations to educate families on SEL and best practices in raising children. Since August 2020, they have been scheduled every 15 days and topics are chosen based on parent input through online surveys, resulting in the videos reaching audiences of about 8,000 viewers. Research on SEL consistently shows a consensus that students' emotions, behavior, and learning are deeply intertwined; a literature review of 200 SEL programs encompassing K-12 students showed that participation was associated with increases in academic performance and decreases in mental illness (Durlak et al., 2011). Another core feature of this program is the provision of two distinct guides for families and school staff (Colombia Aprende, 2020). While the family guide describes the role of

parents as educators, contains SEL exercises to help parents reflect on how they raise their children, and illustrates how parents can be more involved with schools, the more technical guide for school staff reviews the benefits of collaborating with families and synthesizes best practices in creating a meaningful alliance between schools and families. In addition to applying SEL principles to both children and parents, “En Confianza con las Familias” provides an interesting model of how countries can mitigate mental illnesses caused by COVID-19 by identifying the distinct and critical roles that teachers and parents have in fostering a healthier and more educated society.

On June 2020, the Chilean president Sebastián Piñera announced that the country would launch the program “#SaludableMente” (#HealthyMind) to tackle the mental health challenges that have risen during the COVID-19 pandemic (Ministerio de Salud, 2020). As a first step, he created a working group of mental health professionals who would discuss a national strategy on mental health, which led to the creation of numerous guides and videos on topics such as SEL-centered pedagogy for teachers, instructions on providing psychological first aid to children for parents, and recommendations for indoor physical activities for children. A key component of the program was a website that assembles every public resource on mental health that is organized by distinct groups, such as youths, the elderly, caregivers, women experiencing abuse, persons infected with COVID-19 and people with disabilities. The official website for #Saludablemente also provides multiple phone numbers, live chats, and WhatsApp groups to provide customized mental health treatment to every demographic (Gobierno de Chile, 2020). A major strength of #SaludableMente is that, by aggregating every relevant resource on mental health on a single website, teachers, parents, and youths can easily find assistance at one convenient location based

on their own demographic profile and needs. Although data is not available on how many visitors the website has received or the number of phone calls that have been made to its numerous channels, #SaludableMente challenges the stigma of mental health through a heavily publicized campaign that seeks to engage each segment of the Chilean population.

Policy Implications for the Municipality of Santa Ana

In the Municipality of Santa Ana, both public and private schools are required to disseminate all communication and initiatives directed by the Ministry of Health's Mental Health Division to students and their families via email or in-print documents sent home with students (Corrales, 2012). Initiatives include drug and alcohol prevention, anti-bullying, and suicide prevention campaigns, oftentimes assisted by the Municipal Police Force of Santa Ana. The process of maintaining mental wellness on school campuses in Santa Ana depends on the grade level of students. For primary grades, it is the responsibility of faculty and staff to identify mental health issues in students during interactions and socialization. For upper primary to high school grade levels, faculty and staff are responsible for identifying mental health issues in students, but students are also encouraged, through lectures and class-wide assemblies and interventions, to seek guidance from their teachers and counselors.

In response to the pandemic, the CPPCR and the Ministry of Health created a joint campaign called "Junt@s Nos Podemos Cuidar" (Together We Can Take Care of Each Other), which launched on June 11, 2020 designed to direct students and school communities to resources created specifically during the pandemic (Junt@s Nos Podemos Cuidar, 2020). The official website provides videos featuring psychologists discussing how families can take care of children and the elderly, adapt to new ways of living during the pandemic, and monitor one's

mental health. Additionally, posters that promote social distancing guidelines and best practices in psychological first aid are readily available. Although no data on how many people view these resources is available, most parents surveyed reported that they were unaware of the campaign or did not find it to be useful:

The campaigns are not really helpful. But that's not the campaign's fault either.

When in isolation at a very young age, not being able to meet with friends, play together, discuss things other than just assignments, doesn't make it easy at all.

Interestingly, most parents did report the need for additional support on how to care for the mental health of their children. “Junt@s Nos Podemos Cuidar” may have correctly identified a need among parents in Costa Rica, but failed to meet them with its limited resources and lack of alignment with other stakeholders in education. Furthermore, the fact that previous policies have put the onus on faculty to identify mental health issues among students has become a major weakness now that their interactions with students are limited to what they see on a screen.

Although there are some systems and resources that have been implemented to facilitate communication between schools and parents, the quality of communication among administrators, teachers, and parents can differ case to case. Teachers reported that they have been communicating with parents through email, WhatsApp, and other platforms if needed, which has provided them with more information on the challenges that their students and their students' parents are going through. What has differentiated teachers who have been in close touch with parents from those who struggle to receive a response is the existence of a prior close relationship. The success of virtual schooling heavily depends on parents to troubleshoot and manage the schedule of children, so the pandemic has made educators and caregivers realize just

how important each other's roles are and the value of collaborating for the success of Costan Rican youths. As one teacher commented, having school take place within their homes have helped parents realize the crucial function that schools have in a child's development:

Parents have seen that school is not only a place to learn academic content, but it is a place [for their children] to discover themselves and to learn to interact with others. Families can now see everything that happens in a school and how important it is.

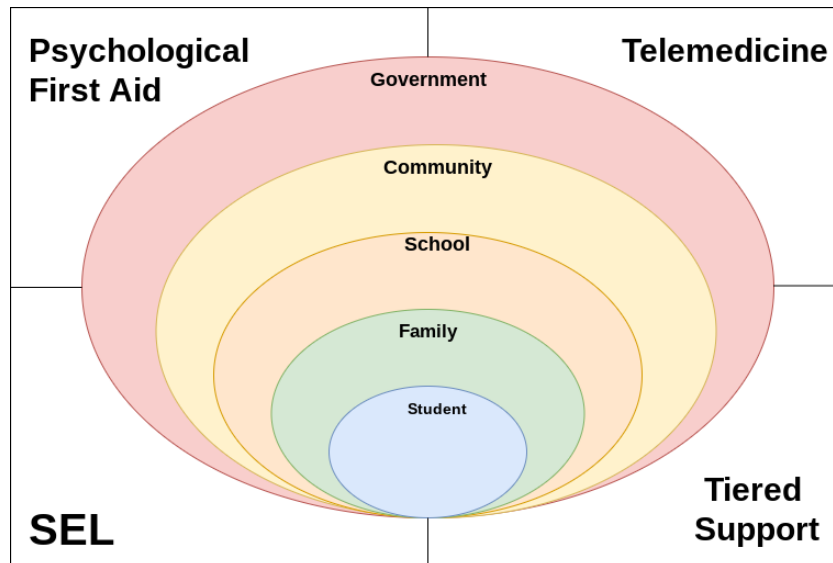
Developing school policies promoting family engagement that are localized to the Municipality of Santa Ana and go beyond informing parents about national initiatives will not only build a collective capacity to forge lasting home-school relationships centered on student success, but also mitigate the mental health issues that students face by combining the knowledge and skills of teachers and parents.

As the boundary between home and school have blurred, it cannot be the sole responsibility of the school and its teachers to buffer the minds of students against the uncertainty of the COVID-19 pandemic. Rather, a best practices approach to addressing student mental health will use an ecological framework that encompasses the various levels in which interventions can occur: student, family, school, community, and government. The complexity of student mental health requires a multifaceted approach that can align these distinct layers through partnerships among schools, local nonprofits, and government offices that can better serve the needs of students and their families. Failure to do so could result in scenarios where students must depend on themselves to make it through the school year, further exacerbating the stress they face, or government policies fail to make a meaningful impact on students. Effective

policies that help students in the Municipality of Santa Ana overcome mental health challenges will also use a combination of SEL and psychological first aid as preventative measures. For more serious cases, students' needs will have to be categorized by level of severity so that they can be addressed with the appropriate measures delivered through technological means whenever possible.

In context of Costa Rica's current mental health initiatives, the "*Aqui Estoy*" and "*Jun@tos los Podemos Cuidar*" are focused on delivering psychological first aid as widely as possible, but more focus must be placed on other key elements. Telemedicine could help expand the reach and effectiveness of mental health counseling when phone calls are not suitable for some people. Furthermore, integrating SEL in current online learning platforms and curriculum could help students deal with mental health challenges while schools are closed and after they reopen next year. And to avoid overwhelming mental health services, the municipality will have to direct people to the appropriate services through a tiered support system that can involve families, schools, and community members so that students can receive the personalized attention they need to overcome the monumental challenge of going to school during a pandemic.

An Integrative Ecological Model for Addressing Student Mental Health



Criteria for our Policy Alternatives

To compare the policy alternatives that could help the Municipality of Santa Ana respond more effectively to mental health issues among students, we have established four distinct criteria:

- **Accessibility:** To what extent will all students benefit from the policy?
- **Effectiveness:** To what extent will the policy mitigate the negative effects of the pandemic on student mental health?
- **Efficiency:** To what extent will schools be able to easily implement the policy based on their individual capacities?
- **Cost:** To what extent will the Municipality of Santa Ana have to invest limited financial resources on the policy?

The policy outcomes matrix below lists the three policy alternatives that we have identified would be best suited to the context of mental health issues in the Municipality of Santa Ana

evaluated along our four criteria. Expanded descriptions of each policy recommendation are provided following the matrix.

	Maximize Accessibility	Achieve Greatest Effectiveness	Implemented at Highest Efficiency	Consume the Least Financial Resources
Adult-Student Relationship Mapping	High: All students with Internet connection or without would benefit.	High: Would enable short-term screening and long-term healing.	Moderate: Stakeholders would have to invest significant amounts of time to develop positive relationships.	Low: Few additional costs beyond current expenses.
Online Support Groups for Students and Parents	Moderate: Students/parents without Internet access or devices would be left out.	Low: Limited to how often parents and students participate.	High: Parents and students could quickly create groups on various online platforms.	Low: Few additional costs beyond current expenses.
Multimodal SEL via EASEL Lab kernels	Moderate: Most students with Internet connection or without would benefit but students with limited teacher contact might benefit less.	Moderate: Limited effect on severe mental illnesses.	Moderate: Teachers and parents would have to learn about SEL and implementation.	Low: Few additional costs beyond current expenses.

Adult-Student Relationship Mapping

Adult-student relationship mapping is a framework for forging connections between school staff and students. Such relationship mapping could measure connectedness and cohesiveness within school, which provides protective factors that mitigate the effects of toxic stressors for students. This tool has also been used by many schools to improve school culture and climate in the past.

A popular framework, the “Relationship Mapping Strategy,” is designed by the Harvard Graduate School of Education’s Making Caring Common Project. By plotting a web of connections between students and adults in school, schools can identify disconnected students and systematically ensure that every student has a positive, trusting relationship to a staff member so that school administrators can know when certain students need academic or emotional support.

The adult-student relationship mapping specifies three related activities:

1. Mapping: Mapping requires staff and faculty to attend an all-staff meeting. On a document, students’ names with two check boxes next to each name will be provided: one box indicating that the staff has a trusting relationship with this student, another suggesting that the staff member believes this student may be exposed to high academic and personal risks.
2. Reflective meetings: Upon completion of the mapping activity, an all-staff reflective meeting (in person or online) will be convened, inviting staff to think of how positive relationships could affect teens, identify students who are ignored or disengaged, pair these students with school staff and develop strategies to address specific students’ needs.
3. Learning session: Staff who are paired with students will receive training from a child psychologist to learn effective ways to approach children and guide them.

Though the adult-student relationship mapping is a program that will be implemented in a school environment to identify students’ in need of emotional or academic support, implementing this program is an opportunity for schools and families to communicate and build a collaborative

relationship to support students' holistically in and outside of school. To initiate this program, a comprehensive letter to parents and families that explains the mapping program's objectives will inform guardians and prime relationships that will be needed for the sustainability of the program. Having families support the program will allow school psychologists to gather information of behavior, activities, and trends in conduct at home that can be utilized in analysis and implemented in support plans.

The tools and resources used in these three activities include meeting rooms that the general population of students do not have access to, white boards, colored stickers and markers. The project can take place in a variety of forms to accommodate schools with different sizes and level of access to technology. School with large populations can conduct the activity by grade-level while smaller schools can treat the initiative as an all-school activity. While schools that decide to conduct the activity in person can use existing infrastructures, schools that decide to go virtual need additional investment in technical development, maintenance and reporting. The district will also need to draw on existing human capital. A guidebook "Strategies and Lesson Plans of Virtual Relationship Mapping" by Making Caring Common Project suggests that school leaders cannot take for granted that relationships between students and teachers will form and thrive on their own (Making Caring Common Project, 2020). For relationship-building to develop and sustain, assistance and guidance from children psychology experts are necessary. If the existing psychological professionals in the district are not equipped with the level of expertise to facilitate the relationship-building, an investment in human capital will be needed to train existing professionals or attract competent ones.

Upon completion of the mapping, school staff designated with students in need can start approaching them using knowledge learned in sessions. One of the effective strategies is daily or weekly emotional check-ins through short video calls, where teachers become more aware of students' lives and current emotional state. As highlighted by Stephanie Jones, an SEL expert at HGSE, teachers need to be creative and responsive, making sure the connection does not become a rote routine which could stop students from passionately sharing (Prothero, 2020).

To ensure the relationship is formed and maintained, follow-up meetings will be convened in small groups to discuss any progress and concerns regarding connecting with students. A district child psychologist will assist the group with any problem and concerns relating to approaching the target students and will assess whether meaningful connections have been made and sustained. While the time needed for the previous mapping activities might not be long (few hours or days), the time that school staff dedicates to connecting students might vary due to different strategies and student needs. It is important to ensure that school staff personalize connection strategies based on students' access to internet and family background, so that no student is left behind due to the technology divide.

Some variances could be incorporated into the standard procedure. In addition to connection within the paired student and school staff, there could be informal group check-ins, for example, a teacher asking about students' current mood at the beginning of every class. It not only enables teachers to leverage existing classroom routines but create a sense of community and promote the development of socio-emotional skills for students. Moreover, it is recommended by Charania and Fisher from the Christensen Institute to involve parents and

caregivers into the relationship mapping (Charania & Fisher, 2020). At the beginning of the mapping process, teachers can reach out to parents to get on a read on students' family backgrounds and who they trust the most, so they will be able to identify students who are in most need of positive adult relationship at school (see appendix for more details).

Online Support Groups for Students and Parents

Another approach is to form student support group as well as support group for parents, so that children can receive support from both peers and their families. The envisioned outcome is to ameliorate the damaging effects of stressors on people's mental health and maximize the strengths of children and their families. Independent of other factors that are associated with students' academic outcome, the outcome will likely lead to our goal of better academic performance, which is consolidated by research mentioned in the literature review section. Three result measures are used: forming a peer support system and strengthening self-care knowledge for both stakeholder groups (students and parents); for parents only, they are expected with improved capabilities as supporters of their children' mental health. Voices from parents and students will be gathered to assess the results.

The support group serves as a platform to exchange concerns regarding the pandemic and ideas about coping strategies. Specifically, the students will be paired by the school, and they can form connections and meet on regular basis (same for parents/caregivers). An online platform will be developed to offer mental-health related resources and practical strategies for formed support groups to better cope with stress and face disruptions due to the COVID-19 crisis.

Parents will navigate through modules which guide them on the topics of children psychology in addition to the former two activities.

The theory behind the designed activities is to address adolescents' mental health crisis from two perspectives: getting social support and fostering a nurturing family environment. Evidence points to the stress-buffering effects of social support, which could be attributable to the understanding and positive self-image boost people obtain from being supported by peers (Coleman & Iso-Ahola, 1993). Support from peers also works as an encourager of an achievement identity, fostering self-esteem and a "can do" spirit among children. Adolescents with positive self-images are more likely to use problem-focused coping strategies, which are effective in reducing distress (Cong, Ling, & Aun, 2019).

Family support is another integral perspective to address the mental health crisis among adolescents. Research highlighted the importance of a nurturing family climate with low level of conflicts, as family provides the foundation for children to learn trust and build resilience (Prioste, 2020). By engaging in discussions about Covid-19, social distancing and disruption of family life, parents can validate their own anxieties as well as their children's, so they will be able to manage their stress and facilitate their children through uncertainties in the pandemic.

While those strategies work theoretically to buffer the negative impacts of Covid-19 on both parents and children's mental health, there are some risks that could undermine the effectiveness of this policy. One of the major assumptions is that the online materials provide knowledge in practice, and children and parents apply what they discussed and learned into real life situations. In addition, the practice of mentioned activities could lead to desired outputs only

if every household has access to internet with enough bandwidth and devices to support online chatting and learning. Other assumptions include the completion of designed activities and good learning results. However, it is difficult to systematically assess the result as the only means of verification is the voice from parents and students, which could be subjective.

Multimodal SEL

Students K-12 benefit the most when it comes to multimodal SEL programs. There is a wealth of empirical evidence that demonstrates many positive outcomes that these programs provide. Some of these outcomes are better achievement, attendance, responsible decision making, social awareness, self-management and mental health in students (Prothero 2019). These outcomes provide a strong foundation to cultivate skills that will be useful for children while they are in school environments as well as professional settings in the future. However, comprehensive multimodal SEL programs can be incredibly expensive, especially for public schools. Many schools in urban settings do not have the financial resources to adopt these types of programs into their curriculum or maintain funding for the programs long enough for them to be effective. Additionally, training teachers and administrators to conduct these programs, analyze the effectiveness, and maintain the consistency requires immense coordination. Luckily, there is an alternative to multimodal SEL that does not require a long-term, comprehensive curriculum to be effective to combat the mental health crisis: multimodal SEL kernels.

The Ecological Approaches to Social Emotional Learning (EASEL) laboratory at Harvard University created a cost-effective way to implement multimodal SEL programs in schools that were more flexible and sustainable by using shorter, less time-consuming and less complex

activities. Some of these activities include 5-minute breathing exercises that ask students K-12 to focus on their breathing which allows them to regulate their emotions as well as to engage in mindfulness, which reduces stress and anxiety. Other examples of a multimodal SEL activities range from non-verbal communication exercises to problem solving role-playing games. These exercises allow students to focus on making ethical and healthy choices as well as visualizing being accountable for their actions in difficult scenarios.

A unique and advantageous aspect of multimodal SEL kernels is that these exercises do not need to be imparted inside a classroom setting; rather, they may sometimes be more effective when they are conducted during break, recess, and lunch periods, depending on the type of exercise. Lastly, these multimodal SEL kernels do not need to be implemented in a school learning environment. During the pandemic, for example, many multimodal SEL kernels can be conducted via online or virtual classes with little or no difference in outcomes if implemented in person.

A case study of an effective multimodal SEL kernel was conducted at Hagginwood Elementary, a school that consists largely underserved and under-resourced students, in Sacramento, California (Prothero, 2019). As 120 K-6 students out of 380 served out-of-school suspensions in the 2016-17 academic school year, the school's principal, Gina Pasquini, decided to implement multimodal SEL kernels with the hopes of seeing positive outcomes in student behavior. After just one year, in the 2017-18 academic school year, suspensions were down to 66 and in 2018-19, suspensions fell again to just 25 (Prothero, 2019).

The implementation of multimodal SEL kernels program in the Municipality of Santa Ana would be a quick, easy, and cost-effective solution and may greatly impact students' affected by the mental health crisis during the pandemic. To initiate the program, school administrators would have to conduct an all-staff comprehensive training session on: 1) the importance and objectives of the multimodal SEL kernels; 2) training on various grade-level appropriate multimodal SEL kernels; 3) organizing the administration and reporting of the program (i.e. scheduling the frequency of kernels to not interrupt curriculum, reporting and tracking the effectiveness in grades and behavior, etc.). Materials required from schools depend on the type of SEL kernels that are selected by administrators to be implemented, which is extremely cost-effective. As all schools in the Costa Rican education system require a designated staff member dedicated to student counseling and psychology (a “psychopedagogue” as they are called in Costa Rica), this staff member can lead or assist in the kernel training that is tailored to school or classroom idiosyncrasies.

In the context of the current pandemic, however, the effectiveness of the majority of the SEL kernels may be diminished when implemented via virtual school platforms. There is little empirical evidence that supports the effectiveness of online multimodal SEL kernels. For example, breathing exercises can be done virtually in an online classroom where students, but problem-solving role-playing games and non-verbal communication exercises would be difficult to conduct effectively.

Furthermore, barriers that undermine efforts to bring general SEL programming to scale, like poor integration into educational practice and low sustainability, are likely to be exacerbated

in low-income and low-resource communities like certain districts in Santa Ana (Jones, et al., 2017). Having limited buy-in for multimodal SEL kernels from parents, guardians and teachers during virtual school platforms will affect the sustainability and thus the overall effectiveness.

The multimodal SEL kernels program offers an expeditious and effective way to create a positive impact on school populations, especially for those students impacted by the mental health crisis, but during online virtual instruction and the pandemic, this program may not achieve the desired results. However, the implementation of this program into a “building back better” plan should be highly considered.

Policy Recommendation

After considering the tradeoffs and evaluating practical alternatives in multimodal SEL kernels and online support groups for students and parents, the most feasible and effective education policy to implement for the Municipality of Santa Ana is the adult-student relationship mapping program. With activities practiced and inputs given, the project is expected to have three main outputs: development of a web of connection between students and school staff, acknowledgement of adult relationship’s importance for youth and strengthened capability as supporters of youth mental health for school staff.

A network of connection between students and teachers or “map” will be formed as a result of school staff using strategies and plans to approach students and maintain the relationship. Specifically, results of student survey and teachers’ self-reports will be collected to ensure a trusting tie is formed and maintained between every student and at least one school staff until the end of the project. The mapping and reflective meeting activities are expected to help

school staff identify students in need and realizing how relationship with an adult could help them, while the learning sessions aims to render school staff knowledge and practicable strategies to improve students' mental health. Survey on teachers' insight into student mental health will be passed out before and after the project to reflect perspective change and knowledge capacity in that field is increased. Furthermore, in the context of Santa Ana, the designated school psychologist or "psychopedagogue" will be able to utilize this information to tailor individualized education plans (IEP) and implement proper accommodations to improve the learning environment of each student. Lastly, the information would be inputted in each students' personal school file which will ensure the continuity of the academic accommodations as they progress through grade levels and in the case that the student transfers schools. This information will be critical from both the perspectives of school administrators and faculty, as well as parents or guardians when considering holistic approach.

The major assumption for school staff's enactment of the stated activities leading to the mentioned outcomes is that the school faculty are motivated participants and have "bought into" the activities. Since the follow-up meetings will be a new routine for school staff, motivation has to be provided to ensure active attendance and participation. In addition, connecting to students and personalizing strategies require school staff to dedicate a great amount of time to this project. The extended job responsibilities add great burden to their workload, so they may lack the time and incentive to treat the project seriously. The project's successful implementation is also based on the premises that students and their families accept and have also bought into this program, and they are willing to cooperate. Moreover, a set of challenges relate to the institutional, technical and administrative capacity and conditions exists for implementing this project at

municipal levels. For schools which conduct the activity online due to safety concerns, a significant investment in technical assistance and capacity-building by the government or private sectors will be needed.

The envisioned outcome as a result of the three outputs is improvement in students' mental health and resilience for all K-12 schools in Santa Ana, especially for those most at-risk. A number of research shows the importance of adult relationship for youth's mental health. The potential benefits of having a strong connection with adults includes better emotion management and a healthy development for students. A trustworthy adult could not only serve as a source of comfort for teens, helping them unburden their feelings, but also serve as a role model for them to learn emotion management. In addition, bonding with a caring adult provide teens with relational experiences that help build neural connections in the brain. Having a relationship in which a teen feels heard and understood outside the family also promotes identity development.

While stronger ties with adults predict mental health improvement, it is based on the premise that the children are supported by adults who can serve as role models and are capable of effectively communicating. However, in reality, the risk is that communicating with teenagers might not be the school staff's expertise. If the adult always conveys pessimistic information to the student, it might even end up generating negative influence on them. Even though the school staff are trained to be better supporters in learning sessions, they could hardly positively impact on students' mental health unless practicable knowledge is offered, and school staff are motivated to apply the knowledge learned to help students.

Conclusion

It is sometimes said that education cannot be conflated with schooling. With virtual lessons occurring at home, the differentiation between the academic content that students are expected to master at school and the education that children receive from their parents at home have become blurred to the point that the former overshadows the latter. However, by focusing on mental health through relationship mapping, the pedagogical skills of teachers and personal knowledge of parents can be effectively combined so as to not only mitigate the trauma of a pandemic that has greatly affected the healthy development of children in Costa Rica, but also serve as a foundation where schools can better integrate family involvement and develop a more humanistic vision of the role that schools can have in promoting nurturing relationships within communities.

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Appendix 1

Logical Frame Matrix for Adult-Student Relationship Mapping

Narrative Summary	Objectively Verifiable Indicators (OVIs)	Means of Verification (MOVs)	External Factors (Positive Assumptions & Risks)
<p><u>Goal</u> Improved academic outcome for K-12 in the municipality of Santa Ana</p>	<ul style="list-style-type: none"> -lowered dropout rate -higher attendance rate -positive attitudes towards schooling -better academic performance 	<ul style="list-style-type: none"> -reports of Ministries on K-12 dropout rates -school reports documenting the overall attendance rate and test scores -student survey results 	<ul style="list-style-type: none"> -School authorities' agreement on the project -School authorities, teachers, students' participation - Agreement and support from the MEP
<p><u>Outcome</u> Improved mental health and resilience formed among youths</p>	<ul style="list-style-type: none"> -reduced symptoms of depression and anxiety among youths -less parents indicating their children exemplifying depression or anxiety symptoms 	<ul style="list-style-type: none"> -parent interview results -teacher interview results -statistics indicating fewer phone calls from youths to the mental health hotline 	<ul style="list-style-type: none"> -absence of mental-wellness unrelated factors that influence learning: financial dilemma, physical health conditions, etc; -quality education provided by schools;
<p><u>Output/Result 1:</u> to develop a network of connections between students and school staff</p>	<ul style="list-style-type: none"> -trusting connections formed between each student and at least one school staff and maintained until the end of the project 	<ul style="list-style-type: none"> -self-reported data from teachers -voices of students 	<ul style="list-style-type: none"> - the school staff paired with students is knowledgeable and competent, bringing positive impacts on students' mental wellness instead of negative ones; -cooperation between students and school staff; -the school staff have enough staff to reach out to every student in need
<p><u>Output 2:</u> to cultivate understanding and acceptance from school staff</p>	<ul style="list-style-type: none"> -Awareness and understanding of a caring student-adult relationship's positive impacts on students among school staff 	<ul style="list-style-type: none"> - briefing session/ meeting record - voice of teachers & school staff 	<ul style="list-style-type: none"> -school staff actually move beyond understanding to action;
<p><u>Output 3:</u> to improve capabilities of teachers and school staff as supporters of student mental health</p>	<ul style="list-style-type: none"> -strengthened skills to approach students and communicate with them 	<ul style="list-style-type: none"> - Training instruction document - follow-up meeting record 	<ul style="list-style-type: none"> - school staff feel motivated to apply the skills learned to communicate with students; -good learning results;

<p><u>A1</u> Mapping: the mapping requires staff and faculty to stop by a meeting room and identify his or her closeness with given student names. Students' names and two check boxes next to each name will be shown to them: one indicating that the staff has a trusting relationship with this student, another suggesting that the staff believes this students may be exposed to high academic and personal risks.</p>	<p>Summary of resources and tools: -meeting rooms which students don't have access to -white boards, colored stickers, markers (if mapping is conducted in person); -online platforms for the mapping activity; -a children psychologist for every school to coach the staff training</p>	<p>Summary of inputs and budgets: -technical development, implementation, analysis and reporting (if mapping is conducted online); -investment in human capital (capable psychopedagogue)</p>	<p>-Sufficient school space for the project; -cooperation from teachers and school staff; -school staff's attendance;</p>
<p><u>A2</u> Reflective meetings: a whole-staff reflective meeting (in person or online) will be convened, inviting staff to think of how positive relationship could affect teens, identify students who are going unseen, pair them with school staff and develop strategies to approach students in need.</p>			<p>-school staff's attendance and active participation;</p>
<p><u>A3</u> Learning session: staff who are paired with students will receive training by a children psychologist to learn effective ways to approach children and guide them.</p>			<p>-Teachers' positive attitude towards the trainings; -Presence of competent and motivated children psychology experts, and their good attitude and work result</p>
<p><u>A4</u> Follow-ups: school staff starts connecting with students at risks; follow-up meeting will be convened in small groups; a district children psychologist will assist the group with any problem and concerns relating to approaching the target students, and will assess whether meaningful connections have been made and sustained.</p>			<p>-Teachers' willingness to follow the new routine; -students and parents' understanding and acceptance of the project; -students have access to internet and technology to keep in contact with school staff;</p>

Logical Frame Matrix for Online Support Group

Narrative Summary	Objectively Verifiable Indicators (OVIs)	Means of Verification (MOVs)	External Factors (Positive Assumptions & Risks)
<u>Goal</u> Improved academic outcome within the Santa Ana county	-lowered dropout rate -higher attendance rate -more positive attitudes towards schooling -better academic improvement	-reports of Ministries on K-12 dropout rates -school reports documenting the overall attendance rate and test scores -student survey results	-School authorities' agreement on the project -School authorities, teachers, students' participation - Agreement and support from the MEP
<u>Outcome</u> Improved mental health and resilience formed among youths	-reduced symptoms of depression and anxiety among youths -less parents indicating their children exemplifying depression or anxiety symptoms	-parent interview results -teacher interview results -statistics indicating fewer phone calls from youths to the mental health hotline	-absence of mental-wellness unrelated factors that influence learning: financial dilemma, physical health conditions, etc -quality education provided by schools
<u>Output/Result 1:</u> to form connections between students and parents/caregivers respect	-every student has at least one peer to connect on a constant basis (weekly) -every parent/caregiver joins at least one support group and attends activities on a regular basis (weekly) -the support groups are formed within one week and maintained till the end of the semester	-voices of students and parents	- the peer paired with the student is helpful and he/she constantly show up - meaningful conversations and interactions happen between parents/caregivers (strategies and solutions), as opposed to mere complaints which generate negative influence on mental health without solving the problem
<u>Output 2:</u> to strengthen self-care and emotional management knowledge of both parents and youths	-parents and youths are capable of accepting their negative emotions and self-caring with learned strategies	- voice of teachers & school staff (self reports)	-parents and students are able to put learned strategies into practice
<u>Output 3:</u> to improve capabilities of parents as supporters of their children' mental health	- parents are capable of identifying when their children are in need of support and how to support their children effectively - at least three skills learned to promote better communication between children and adults by parents	- voices of parents -result of student surveys	- parents feel motivated to apply the skills learned - parents are able to put the skills learned into effective practice -good learning results

<p><u>A1</u> Group formation: students will be paired, as well as parents, by the school with contact info given; they will be asked to contact each other within a week; they will be able to switch partners during this phase</p>	<p>Summary of resources and tools: -technical development, implementation, and maintenance for the online learning platform -a team of experts to design the learning materials for the platform -phones and tablets to maintain communication on a constant basis for both parents and students</p>	<p>Summary of cost and budget:</p>	<p>-acceptance from parents and students to join the project and share their contact information -cooperation from teachers and school staff</p>
<p><u>A2</u> Follow-up meetings: based on group members' agreement, they will meet weekly/biweekly to check partners' situations and have discussions</p>			<p>-students and parents/ caregivers' attendance and active participation, as well as preparation -access to internet and electronic devices whenever the follow-up meetings take place</p>
<p><u>A3</u> Learning platforms: information on physical and mental self-care will be provided online (lectures, tip-sheets...); there will also be lectures and discussion panels for parents to learn child psychology and effective strategies to provide mental support for their children during the pandemic</p>			<p>-parents' positive attitude towards the learning more about child psychology and caring strategies -Presence of experts with knowledge in practice to design the learning platform -presence of technology support to design and manage the online platform</p>
			<p>-students and parents are motivated to access and learn those materials -their households are equipped with internet and electronic devices for them to access the online learning platform -students and parents' understanding and acceptance of the project</p>