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## UNICEF EDUCATION

# Mental Health and Psychosocial Support Case Study

## BRAZIL

### Prioritizing children's and adolescents' mental health and protection as schools reopen

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Following the onset of the COVID-19 pandemic, Brazil rapidly became one of the most affected countries globally. Most schools remained closed for over 170 days, having a **negative impact** on the learning, skills development, mental health, and access to nutrition and protection services for children and adolescents. According to the survey, *Primary and Secondary Impacts of COVID-19 on Children and Adolescents*, 56 per cent of adults reported that an adolescent in their household experience one or more symptoms related to mental health issues. For example, sleep alteration (i.e., insomnia), anxiety about the future, decreased interest in routine activity, or changes in appetite. In November 2020, over 5 million girls and boys aged 6–17 did not have access to education. Of these children, **over 40 per cent** were aged 6–10, a group that virtually had universal access to education prior to the pandemic. Compounding this unprecedented disruption to essential services for children and adolescents, were challenges in coordination around a national plan to safely reopen schools and provide information to school communities about connecting students to the mental health and psychosocial support and protection services they need.

In response, UNICEF Brazil organized consultations with education and protection professionals from the municipalities most affected by the pandemic. The aim was to develop a cross-sectoral strategy to address the learning, mental health and protection needs of students during and after school reopening. Between November 2020 and January 2021, UNICEF developed **three guides** and piloted trainings under the Education that Protects Framework, which provide education professionals with:

- Strategies for the safe reopening of schools and for creating supportive school environments in the context of crises and emergencies. Recommended actions include caring for professionals who look after children and adolescents, mapping challenges and resources (inside and outside the school), and incorporating mental health and well-being into classroom and student activities.
- Practical guidance on how to identify, prevent and respond to mental health risks or violence, including utilizing local referral services. Recommended actions include designating specific actors or groups to lead strategies that ensure a protective environment within the schools. For example, some schools have formed committees for reporting cases of violence. This can include welcoming students in need, identifying the type of support required and referring cases to the appropriate services.

With the help of implementing partners [FIOCRUZ](#) (Oswaldo Cruz Foundation) and [Luta pela Paz](#) (Fight for Peace CSO), asynchronous courses based on the three guides were offered to education professionals working with children and adolescents through Moodle, in addition to a blended model focused on those working in highly vulnerable territories affected by violence or crisis. In-person trainings were dedicated to territories where UNICEF was already working through other initiatives.

## RESULTS

- At the end of the pilot phase, 726 professionals (573 from the education sector) participated in at least one activity of the courses offered, with 413 professionals (335 from the education sector) receiving certifications.
- As part of the training activities, participants developed mental health and psychosocial support (MHPSS) action plans to take forward in their schools, resulting in 164,816 children and adolescents impacted overall.

## LESSONS LEARNED

- **Prioritize teachers' and education professionals' participation in the design of resources made for them.** Designing the guides and training through a participatory process built a sense of ownership among teachers and education managers and ensured the resources were easy to use and reflected their needs and concerns.
- **Leveraging training activities as an opportunity for integrating local approaches.** In-person trainings created an opportunity to draw from local experiences and identify promising solutions. Moving forward, special attention should be given to identifying MHPSS approaches that are already being implemented within municipalities and integrating them into education and protection programming.
- **Strengthening cross-sectoral integration.** Based on the results of the pilot, there is a pressing need to coordinate with child protection authorities to review and improve the existing mechanisms within schools to identify and respond to situations of violence. Cross-sectoral linkages and integration enhances the capacity, sustainability, and efficacy of systems to respond to the holistic needs of children and adolescents.

## NEXT STEPS

UNICEF is now offering trainings through the [UNICEF Municipal Seal of Approval](#) (Selo UNICEF) initiative with over 2,000 municipalities enrolled for the new cycle. UNICEF is also developing a [series of resources](#) to support schools to reopen safely. These are for specific groups within the school community, including adolescents, caregivers, teachers and others. They offer guidance on how to identify signs of acute situations, such as violence or mental suffering, and how to seek or indicate help.

**Cost effectiveness:** UNICEF's investment of US\$ 56,182.12 supported the development of the guides and training for 726 professionals.

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