Literature Review

Effects of remote learning on socialisation and mental health

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Literature Review.

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## Glossary

| Term                          | Definition                                                                 |
|-------------------------------|---------------------------------------------------------------------------|
| Collective distress           | traumatic psychological effect shared by a group of people                |
| Depersonalisation             | a feeling of disconnection from one’s own identity. People with depersonalisation feel like they have no control of their own thoughts and actions |
| Dissociation                  | problems with memory, identity, emotion, perception, behavior and sense of self |
| Ecofascism                    | individuals and groups which combine either environmentalism or green politics with fascist or authoritarian viewpoints and tactics |
| Emotional dysregulation       | an inability to control one’s emotional responses                         |
| Great replacement theory      | also white replacement or replacement theory, a white nationalist far-right conspiracy theory that states that white people are purposely being replaced with immigrants, migrants, Muslims, and refugees across the world |
| Incel                         | involuntary celibate, a member of an online subculture of mainly heterosexual white men who desire a female partner but are unable to get one. Incel forums online are often focused on resentment and hatred of women, self-pity and self-loathing, racism, and advocacy for violence, including sexual violence |
| Jihadist                      | a person involved in a jihad, an Islamic militant                         |
| Left wing terrorism           | also revolutionary terrorism, a form of terrorism meant to overthrow capitalist systems and replace them with socialist societies |
| Post-traumatic stress disorder (PTSD) | a mental health condition that develops following a traumatic event, usually characterised by intrusive thoughts about the incident, recurrent distress/anxiety, flashback and avoidance of similar situations |
| QAnon                         | a wide-ranging, completely unfounded theory that says that President Trump is waging a secret war against elite Satan-worshipping abusers in government, business and the media |
| Resilience                    | ability to withstand adversity and bounce back from difficult life events |
| Right wing terrorism          | or far-right terrorism, is motivated by a variety of different right-wing and far-right ideologies, most prominently by neo-Nazism, neo-fascism, ecofascism, white nationalism, white separatism, ethnonationalism, religious nationalism, and anti-government patriot/sovereign citizen beliefs and occasionally by anti-abortionism and tax resistance |
| Risky behaviours              | actions undertaken by children which are normally considered adult behaviours and can negatively affect their lives (ie sexual activity, gambling, drug taking etc) |
| White nationalism            | a type of nationalism or pan-nationalism which espouses the belief that white people are a race and seeks to develop and maintain a white racial and national identity. Many of its proponents identify with and are attached to the concept of a white nation, or a “white ethnostate” |
| White separatism              | a form of white supremacy that emphasises the idea that white people should exist separately from all inferior, non-white races, whether by establishing an all-white community somewhere or removing non-whites from their communities |
| Vicarious                     | experienced in the imagination through the feelings or actions of another person |
LITERATURE REVIEW

Introduction

Schools are more influential on children’s development than any other social institution besides their family (Blum et al., 2002). Schools are also a relatively non-stigmatising setting in which to identify and address children’s mental health concerns, and to counter antisocial behaviours that promote positive connections and engagement with others.

This literature review focuses on the effects of remote learning on mental health, including acute mental health issues and possible ongoing implications for student wellbeing and socialisation. It provides an overview of some of the challenges that can impact on the mental health and relationships of young people, many of which have accelerated or become more complex during the COVID-19 pandemic.

In the light of concern about rising antisocial behaviour and extremism there is a focus on socialisation and self-regulation on return to school post-pandemic. In the face of limited Australian research on these topics, the review takes a global focus and includes experiences from other countries as evidenced in the emerging research literature.

Based on these findings the review offers advice to school leaders regarding the self-regulatory behaviours of students on return to school after periods of remote learning, and addresses social and emotional considerations as students transition back to school. It also considers ways in which schools can promote wellbeing and respond to mental health concerns as a way to address and prevent antisocial behaviours, recognise manifestations in extremism (including religious fundamentalism), and challenge a general rise in extremist views.
What’s the issue?

It is estimated that more than 1.6 billion students have been impacted by the COVID-19 pandemic, with school closures affecting around 80 percent of the world’s student population (UNESCO, 2020). As a result, many students have received some form of remote schooling, and are likely to continue to do so with increasing cases, new variants, and different levels of vaccinations impacting on educational continuity around the world.

Educational responses to the COVID-19 pandemic varied around the world. Online learning platforms were adopted to reach students remotely and mitigate the effects of education disruption (Oladipo et al., 2020). While many countries within the OECD opened their schools after initially strict lockdown measures, school closures and disruption in educational settings continue to affect students and teachers. Closure of schools was a precautionary measure to stem further spread of the virus, however the justification of ongoing, nationwide school closure as a public health intervention has been widely contested (Esposito & Principi, 2020; Poletti & Raballo, 2020); particularly when considering the non-virus-related consequences of school closures on mental health (Rothstein & Olympia, 2020). The World Health Organization (2022) predict that the mental health impacts of social isolation and social distancing measures during the pandemic are likely to be devastating for adults and children alike.

While research into ways to improve remote teaching and learning has been a focus for many education systems over the past 2 years, and the impact on student mental health is an emerging concern. The influence of remote learning on socialisation has had less attention. Therefore, this literature review will focus on the effects of remote learning on mental health, with specific consideration of ongoing implications for student connection and socialisation.

The report will also provide advice to school leaders regarding the self-regulatory behaviours of students on return to school after periods of remote learning. It will address social and emotional considerations when students transition back to school, with associated factors such as antisocial behaviours, manifestations of extremism (including religious fundamentalism) and a general rise in extremist views. This study will have a global focus and with comparison to experiences in other countries as evidenced in the literature. In addition, it will draw from recent international research and literature focusing on the impact of remote learning during COVID-19 restrictions.
Mental health in schools

Mental health conditions affect more than 25% of individuals over the lifespan, account for approximately 10% of all global health issues, and are currently one of the leading causes of serious illness and ongoing disability amongst children and adolescents. While mental health conditions are common, vulnerable and marginalised children, and those exposed to violence and instability, are more likely to develop mental health conditions.

Adolescence is often described as the peak time for the onset of mental health problems, with up to 50 per cent of all cases occurring prior to 14 years of age (Kessler et al., 2005). A study of different conditions found that the average age of onset for anxiety was six years, 11 years for behavioural disorders, 13 years for depression and 15 years for substance use issues (Merikangas et al., 2010). There are also gendered differences in mental health conditions: girls are more likely than boys to have mood and anxiety disorders, but less likely to have behavioural and substance use disorders (Riecher-Rössler, 2017).

Children and adolescents with disabilities, those of LGBTIQ+ orientation, those who are homeless, and those with a family history of mental health concerns are also at greater risk. According to the World Health Organisation, depression is now the top cause of illness and disability among adolescents globally, and suicide is the third-highest cause of death. The relatively early ages of onset points to the need for early intervention (Berger et al., 2020).

Educational settings have a key role to play in supporting the health and wellbeing of children and adolescents through promotion, prevention, and response programs. However, research indicates that the impacts of the COVID-19 pandemic, along with school closures and educational disruptions, have resulted in many young people being left without the support of the school environment, and vulnerable to developing acute mental health conditions. Student wellbeing was already an area of concern for many schools and systems (Semple & Mayne-Semple, 2020), and the COVID-19 pandemic has increased awareness of mental health amongst children and adults alike. The COVID-19 crisis also provides an opportunity for an education system wide reset, particularly reflecting on the challenges that face students who are most at risk.

Acute mental health issues

Although there was already an urgent need to support the mental health of children and adolescents, research indicates that mental health conditions have increased across all age groups due to the COVID-19 pandemic, with acute mental health issues amongst children and adolescents in low-income contexts most likely to have increased during the COVID-19 pandemic (Holmes et al., 2020; Lee, 2020; Liu et al., 2020).

Lockdowns and periods of remote learning are widely reported to have impacted on young people, including the most vulnerable (Pfefferbaum & North, 2020). A lack of stability and disconnection from services such as school, results in lower levels of help seeking (Phelps & Sperry, 2020), social and educational engagement, low levels of health, and reduced overall wellbeing into the future. Furthermore, children and adolescents exposed to violence, trauma, and conflict are at additional risk of developing profound mental health conditions, particularly if the mental health of parents/caregivers is also impacted.

Family and carer wellbeing

Research indicates mothers are at particular risk of mental health conditions as a result of COVID-19 (Davenport et al., 2020; Guo et al., 2021), with mothers across the globe...
reporting impacted mental health as a result of school closures (Clark et al., 2020; Said et al., 2021; Thapa et al., 2020; Zamarro & Prados, 2021).

During the pandemic, the family environment has become less stable for many young people, with rates of family financial insecurity (Van Lancker & Parolin, 2020), child abuse (Baron et al., 2020; Griffith, 2020), and family violence reported as increasing dramatically during the COVID-19 pandemic (Humphreys et al., 2020; Piquero et al., 2020; Xue et al., 2020). Changes in daily routine including lack of outdoor activity, disturbed sleeping patterns, and social distancing have affected the mental well-being of students (Awal et al., 2020).

Anxiety, depression, and sleeping disorders have been widely reported as impacting on children as a result of the pandemic. Fears that family members or oneself may be infected, social isolation, the death of grandparents or other family members, parental job loss and other traumatic events are likely to have both immediate and long-term impacts (Cénat & Dalexis, 2020).

In the short to medium term, these children may experience symptoms of anxiety and depression, as well as post-traumatic stress disorder (PTSD), dissociation, depersonalisation, or emotional dysregulation. In the long term, these traumas can cause physical, social and intellectual development problems, violent and risky behaviours (self-harm, unsafe sexual practices, substance use), or altered or antisocial relationships with others (Cénat & Dalexis, 2020).

Research also indicates that many children and young people are likely to experience distress even long after a traumatic event, because of an unaddressed traumatic atmosphere in schools or families (Zhou, 2020). For those who already possess profound mental health issues and antisocial behaviours, the impacts of COVID-19 are likely to be even more pronounced (Hardin et al., 2021; Khan et al., 2020).

Teacher wellbeing

As schools reopen, it is not only students who need help adjusting to ‘the new normal’. The pandemic has also affected teachers’ mental health due to an increase in teacher workloads, and the requirement to negotiate continuity of learning in challenging circumstances (Dabrowski, 2020). Research in Germany showed that remote teaching was challenging for many teachers due to intensive periods of teaching online, technical barriers, and requirement to use unfamiliar technologies (Klapproth et al., 2020). Teachers report feeling undervalued as a profession (Asbury & Kim, 2020).

Teachers have long been documented as experiencing burnout, which is typically characterised by a reduced sense of personal achievement, exhaustion, and frustration (Herman et al., 2018). However, secondary traumatic stress (STS) or vicarious traumatisation is now also widely reported amongst educators during the pandemic (Etchells et al., 2021; Nagasawa & Tarrant, 2020) and in other periods of disruption caused by natural disasters or political unrest (Turnbull et al., 2020).

There is research about the link between mental health of teachers and their students (Gray et al., 2017; Harding et al., 2019). Teacher workload is recognised as a common barrier to both teacher self-care, and a teacher’s ability to support the mental health of their students (Mazzer & Rickwood, 2015; Palmer et al., 2017). COVID-19 has clearly exacerbated the stresses facing teachers, and as countries continue to navigate disruption and remote education, recognising and supporting teacher wellbeing is a key priority for schools.
Socialisation

Periods of remote learning due to COVID-19 or other disruptors have also had an impact on the social skills and connectedness of young people. Individual health and wellbeing are intricately tied to the health of communities and interactions with others (Turkle, 2017), and the connectedness between individuals has been affected by social distancing, track and trace protocols, and prohibited relationships (Dabrowski, 2020).

However, the risks of disconnection and loneliness on young people during the pandemic and periods of school closures have not been well explored. While there is increasing research into the mental health effects of COVID on adolescents and young adults in relation to anxiety and depression (Fegert et al., 2020), few studies have focused on the impacts of loneliness and social isolation as a contributing factor to poor mental health. Consequently, the prevalence and potential worsening of loneliness, substance abuse, and other mental health symptoms in young adults remains important to assess (Chaturvedi et al., 2021), especially post-COVID (Gabbatt, 2020).

During school closures, despite the virtual interactions and learning opportunities provided by the internet and social networks, a barrier is created which can heavily impact on relationships in future settings (Colao et al., 2020). As with mental health, research indicates that children and adolescents from less advantaged backgrounds are more likely to be impacted in terms of their social skills and mental health (Aucejo et al., 2020).

A number of strategies were reported by young people to cope with the impacts of school closures brought about by COVID-19 (Colao et al., 2020). While participation in online classes and self-study were used as medium used for learning, internet use through avenues such as social media, online gaming, and smartphone use also increased significantly amongst young people during the pandemic (Chen et al., 2021; Elhai et al., 2021; Rioseco & Vassallo, 2021). Unfortunately, efforts to stay connected online can place young people at risk of developing poor self-regulation and antisocial behaviours, as outlined in the next section.
Self-regulation

Given the amount of time young people have been spending online during the pandemic, the blurring of responsibility between schools and homes has become problematic in monitoring the self-regulation of young people. Problematic patterns that affect the self-regulation of children and adolescents have been reported. These include problematic or addictive smartphone use (Elhai et al., 2021), excessive online gaming (King et al., 2020; Ko & Yen, 2020; Zhu et al., 2021), consumption of pornography (Sallie et al., 2021), and excessive social media and social networking use (Chen et al., 2021).

Efforts to stay connected with others through the above internet related activities are often also associated with negative patterns including lower levels of sleep, decreased physical activity, increased weight, poor social life, and poor mental health (Fazeli et al., 2020). Research also demonstrates that excessive gaming, social media and smartphone use during periods of remote learning remain significant predictors of poor mental health (Chen et al., 2021).

Antisocial behaviours

In addition, many children and adolescents spend extended periods of time unsupervised in online spaces. As a result, antisocial behaviours between students are increasing globally (Awal et al., 2020). The prevalence of antisocial behaviours amongst young people who have spent extended periods of time in remote learning must be monitored by schools moving forward. Antisocial behaviours amongst young people highlighted in recent research range from online bullying (Vaillancourt et al., 2021), to xenophobia, racism, and hate speech (Chan & Montt Strabucchi, 2021; Ong, 2020).

Xenophobia and discrimination have been noted in both online and offline communities frequented by young people, including sinophobia and racially motivated attacks towards members of the Chinese community related to the pandemic (Tahmasbi et al., 2021). Increased use of social media, along with a rise in hate speech and antisocial behaviours has also been reported (Hardin et al., 2021).

There is more extensive research into bullying which indicates that while students in most countries have reported reduced rates of bullying during remote learning, rates of cyber bullying (Vaillancourt et al., 2021) have stayed constant or increased. While some students may be at risk during online interactions with strangers, harassment from their fellow students via smartphones or social media is far more common. Specific differences in bullying activities remain consistent before and during the pandemic: 1) girls were more likely to report being bullied than boys, (2) boys were more likely to report bullying others than girls, (3) elementary school students reported higher bullying involvement than secondary school students, and (4) gender diverse and LGTBQ + students reported being bullied at higher rates than students who identified as gender binary or heterosexual (Vaillancourt et al., 2021). Vulnerable children and their families are also at much greater risk in terms of cyber bullying (Leach, 2015; Masters et al., 2020), with girls also at greater risk of exploitation, particularly in periods of instability and disruption (Onyango et al., 2019).

Along with the antisocial behaviours identified above, participation in extremist ideologies (Lawrence & Davis, 2020), including violent white nationalism and misogynistic movements, has also increased during the pandemic (Andrews, 2020). Extremism is perhaps the most problematic issue to deal with and is explained in more detail in the following section.
Extremism

Historically, epidemics and periods of economic instability have led to scapegoating and vilification of certain groups, and the COVID-19 pandemic has been no exception (Davies et al., 2021). Building on public fear, many groups have attempted to weaponise the impacts of the pandemic, and to use periods of instability in order to proliferate extremist ideologies and radicalise others (Davies, 2021). Young people are particularly at risk of encountering extremist ideologies in online spaces and not recognizing the process of radicalisation (Ong, 2020).

Indeed, counter-terrorism units note that an “increasing number of quite young people are being caught up in terrorism, including new forms of terrorism – not just conventional Islamist, extremist or right-wing terrorism, but other new emerging forms” (Adams et al., 2021). Though not as widely discussed in Australia as in the United Kingdom or United States, extremist ideologies such as those associated with incel movements (Bates, 2021), or great replacement theory (Cosentino, 2020; Goetz, 2021) continue to appeal to disaffected young people, particularly young white men who may be vulnerable to radicalisation. This has accelerated due to social equity movements and social media campaigns such as #metoo and #blacklivesmatter, that challenge social norms and seek to recognise male and white privilege.

Unfortunately, despite the increasing recognition that schools have a vital role to play in countering extremist ideology (Harris-Hogan et al., 2019), there remains a lack of research in the Australian context on the implementation of anti-extremist programs and practices, particularly in educational settings. However, there are emerging examples from comparable contexts, such as the United Kingdom, where there is renewed attention on the role of schools in countering extremism (Taylor et al., 2021). While traditionally recognised forms of extremism including religious fundamentalism remain a concern for schools in the United Kingdom, “mixed or unclear ideologies such as conspiracy theories, misogynistic viewpoints, a fixation on school shootings, or Q-Anon” are harder to educate students about, let alone develop appropriate educational responses to (Adams et al., 2021).

There have been limited studies into extremist activity online during the COVID-19 pandemic. However, research does indicate that violent right-wing extremist and incel forum activity increased significantly following the declaration of the pandemic, while left-wing and jihadist activities did not increase (Davies, 2021; Davies et al., 2021). The increase in right wing and incel ideologies highlights the grievance-based and online nature of some of the most concerning forms of extremism (Dodd & Grierson, 2019; Laurie et al., 2021).
Conspiracy theories

Increasingly spread on social media, an acceleration of conspiracy theories and disinformation campaigns during the pandemic and recent election periods has also provided further areas of concern for schools. COVID-19 disinformation acted as a gateway to broader conspiracy theory investment and disinformation campaigns are now used by many extremist organisations, including the far right, to recruit followers (Lawrence & Davis, 2020). Although, very little research has focused on conspiracy beliefs amongst Australian school-aged students, Jolley et al. (2021) note that conspiracy thinking often begins around the age of 14, which is also the age more students begin spending extended periods of time using smartphones and social networking sites (Rioseco & Vassallo, 2021).

While engagement with conspiracy theories can demonstrate critical thinking ability, belief in conspiracies can also demonstrate a lack of criticality (Wineburg et al., 2020), and lack of ability to recognise fake news or propaganda, particularly on social media platforms, which can in turn be linked to extremist behaviours. Research suggests that students’ interest in conspiracy theories should not be ignored or ridiculed (Taylor et al., 2021), but should instead provide opportunities for genuine discussion of issues where a range of opinions can exist. Such discussions expose students to difference, challenge individual thinking, and make students more tolerant of different perspectives, values, and beliefs (Hess & Gatti, 2010). Many students want open debate on controversial topics at school, so they can better understand the world and its political complexities (Taylor et al., 2021). Critical understanding and reading of the media can support them in recognising fake news and biased reporting, as well as understanding of the media’s preoccupation with ‘dark’ stories (Elwick & Jerome, 2019).
What does this mean for schools?

Given the widespread impacts of the pandemic and natural disasters on children and adults alike, it will be critical for health systems to continue to monitor and support the wellbeing of individuals within school settings. There is also a need for national systems to monitor young people's mental health status over the long term, and "to study how prolonged school closures, strict social distancing measures, and the pandemic itself affect the wellbeing of children and adolescents" (Lee, 2020, p. 421).

Understanding ways to overcome challenges of socialisation and self-regulation are also important. Young people are spending extended periods online and are seeking information through social media. There is also evidence that they are increasingly seeking belonging and connectedness in online spaces, not of all which are productive for relationships or mental health (Bates, 2021; Cosentino, 2020). With many more people experiencing disaffection and disillusionment in governments, and growing suspicion about the media, it can be difficult for to resist the lure of alternative and sometimes radical movements when they seem to offer understanding or connection. Schools have a role to play in fostering critical thinking, but schools alone cannot address all issues facing young people, particularly radicalisation and extremism.

The pandemic offers opportunities to look at our education systems differently. Schools can become part of a targeted effort by government and local communities to support young people to problematise hateful rhetoric, discuss and challenge conspiracy theories, and expand their understanding of the historical narratives and political movements that often breed hate and terrorism. This period of history is challenging, but it is also an opportunity for school and community members to reflect upon what we have learnt over the past two years to better support young people into the future.

Readiness of communities to respond

The mental health and socialisation issues discussed in this review are challenging for schools to address alone. Fortunately, the pandemic has seen parents and carers become increasingly involved in educational practice, and this shift marks an opportunity to continue to engage families moving forward. There are many opportunities for the development of respectful and relevant communications between teachers and families (Emerson et al., 2012; Hohlfeld et al., 2010) that allow for the development of shared accountability and shared bonds between families and teachers, sharing the load of enhancing student health, wellbeing, and educational outcomes.

Research relating to the effect of past bushfires in Australia on schooling found that in disaster situations school leadership teams must "adapt, work and innovate with the teachers and staff, parents, the broader community, the assets management teams and other schools" (Nye, 2016, p. 94). Strengthened school-community parental relationships are also commonly mentioned in disaster experience literature (Nye, 2016; O’Connor & Takahashi, 2014).

Whole school approaches to mental health support are also particularly effective (Dix et al., 2012), and engagement of community members is an effective implementation practice. Evidence over time emphasises how the role of family and community members are particularly relevant to ensure that interventions have the desired impact in the communities (García-Carrión, et al., 2019) and that these are culturally appropriate and culturally grounded (Bloemraad & Terriquez, 2016; Kia-Keating et al., 2017; Puffer et al., 2016). Thus, providing parents, caregivers or community members with communicative skills and fostering home-school communication are
critical for the success of mental health and socialisation interventions (García-Carrión, et al., 2019). Ongoing teacher training and support to address tricky areas such as extremism and antisocial behaviour is also a key enabler.

However, low levels of parental support and education can impact the access and effectiveness of educational practices. Parents who have low levels of awareness or understanding of mental health and its impacts, or do not have positive attitudes towards help-seeking, are less likely to be able to engage with programs and practices in the home, and to model appropriate behaviours to their children (Velasco et al., 2020). For this reason, understanding the levels of readiness amongst parent and community members to engage with any potentially stigmatised or contentious issue is a key priority for schools seeking to address these challenges.

Priorities on return to school

It is widely accepted that schools play a key role in promoting positive health, behaviors, and attitudes. Additionally, children's developmental milestones, for example, academic goals as well as social competence, emotional regulation, and moral development, are achieved (or not) within the context of schools. However, COVID-19 and natural disasters have changed the experience of education for many young people, who are part of an evolving situation where they are uncertain about what will happen next.

The concept of ‘building back better’ is not new (Mannakkara & Wilkinson, 2013). It has been drawn upon in many different contexts and educational systems, from post disaster reconstruction in New Zealand, after the 2011 Christchurch earthquake (Francis et al., 2018), to curricula reform and culturally responsive practice in Rwanda after periods of ethnic cleansing and genocide (Freedman et al., 2008). Change is possible if challenges are acknowledged. Reflecting on what we have learnt from past crises and recognising possibilities that can support students in a changed world is crucial in fostering ongoing discussion and engagement between young people and those that care for them.

Some people demonstrate resilience, while others experience feelings of what researchers call ‘collective distress’, a scenario in which individuals who have shared in the same traumatic experience (such as a pandemic) experience grief and loss in different ways, with some people more impacted than others.

Responding to extremism

Several European countries are responding to the threat of extremism within schools, and implementing practices that support young people (Davies & Limbada, 2019). Austria has devoted much work in schools to educating students about Islam as a religion and not an extremist ideology. Slovenia and France have made efforts to encourage intercultural communication and reduction in prejudice. In Spain and France, teacher training addresses contextually-relevant ideological, cultural, racial, and religious tensions, in order to shape attitudes and improve teaching and learning practices (Taylor et al., 2021).

The extent to which schools address extremism is largely shaped by teachers’ attitudes towards tolerance and discrimination (Busher et al., 2019), and their levels of understanding of extremism (Bryan, 2017). Islamic extremism is often singled out as a focus for teachers and schools (Vincent, 2019). However, white nationalism, and gender-based extremism arguably pose a much greater risk to
most Australian students who participate in online spaces (Davies, 2021), though these forms of extremism are less often discussed. Understanding that there is often an established intersection between racial and gender-based violence (including violence against women as well as violence against the LGBTIQ+ community), is also not widely discussed in most education settings (Bates, 2021).

In studies where there is evidence of school level practices that can counter extremism, a number of factors have been highlighted as fostering a culture of reform. Trust-building, risk taking, dedicated curriculum time, the promotion of democratic values, and a peer-supportive environment were contributing factors to successful attitude change in students in Northern Irish schools who held prejudiced or radicalised views (McCully, 2006). Adequate teacher training and engaging parents in conversations around extremism are also seen as enabling factors (Lockley-Scott, 2019). However, efforts to undertake anti-extremism work in schools can be impacted by a crowded curriculum, a lack of resources, a desire to detect and report extremist views rather than address the root causes (McCully, 2006).

What we don’t know

There are challenges and limitations of a literature review such as this. The pandemic is an ongoing, oft-changing situation with much variation between countries, school systems and individual communities, families and students. The initial search for this review was conducted in 2021 and is thus based on research and data published prior to this. The review was updated in 2022, but research into the implications of the pandemic on young people is continuing to emerge. More recent publications may have more nuanced data but the general conclusions from this review provide an initial summary of key areas for school leaders to consider against their own lived experience of mental health, socialisation, and the return to school after remote learning.

Note also that some of the literature referenced in the overview of the effects of COVID-19 on mental health is based on expert commentary and some of it may not be specific to school students. This reflects the challenges of conducting research with this age group while schools were closed. Finally, there remains a scarcity of empirical research in the Australian context. Research from comparable contexts, particularly the United Kingdom, is relevant to issues facing Australian students, but as always, context is crucial, and further research looking at both challenges and responses to mental health and social support mechanisms in Australian schools is needed.
Schools play a critical role in promoting, protecting, and caring for young people’s mental health and relationships. The complexity of the linkages between health, mental health, psychosocial wellbeing, and learning has been exposed during the pandemic, particularly during periods of remote learning and school closures. However, crises also offer schools a unique opportunity to strengthen and develop policies and practices that support the mental health and social needs of young people. The following section summarises successful practices and recommendations identified in the literature that may support school leaders and teachers to counter some of the mental health and socialisation issues raised in this review.

School leaders

There is no quick fix for addressing student and staff mental health issues, nor for responding to antisocial behaviours. However, there are steps that school leaders can take to support the relationships and mental health of young people in school settings.

Practice self-care

School leaders need to engage in self-care strategies so they can respond to the needs of staff and students. Self-care can be promoted by understanding, acknowledging, and responding to individual mental health and wellbeing needs, as well as participation in activities that foster connections with others and build adaptive coping strategies. School leaders who make self-care a priority are likely to function better during and after times of stress.

Support teachers

Teachers are often required to support the short-term mental health challenges that arise immediately following a crisis, as well as long term mental health conditions amongst children and adolescents. Teachers need to be given time and support for their own mental health and wellbeing, and encouraged to practice self-care and seek help for their own mental health. Any teacher may find themselves in situations where they need to discuss controversial and sensitive issues with students, and they will likely require support and training to avoid experiencing secondary stress or vicarious trauma.

Engage experts

While schools play a key role in prevention and early intervention of mental health issues, some issues are beyond the remit of schools. Engaging experts to support young people and staff is important. Experts that draw upon evidence-based practices to serve the needs of an individual school community are an important resource. External expertise can be aligned with existing curricula, either within scientific subjects or as extracurricular activities. Moreover, interventions that aim to promote children’s wellbeing and socialisation in the school setting can reduce barriers of access that commonly effect disadvantaged students.

Integrate mental health and social connectedness into learning

There are several factors that can support the mental health and relationships of students and build capacity in the teachers and parents/caregivers that support them. Understanding the relationship between mental health and academic achievement for example, can result in programs or practices being more effectively targeted towards those students and families who require additional support for mental health and engagement, as well as creating integrated opportunities for mental health and relationships to be prioritised in school policies and programs.
Avoid stigmatisation

Mental health, socialisation, and antisocial and radical movements are already being discussed in many schools, and these discussions should be encouraged and not avoided. School leaders can promote these opportunities in the curriculum and in wider school life, such as pastoral time, assemblies, or in incidental conversations with students, and encourage the use of these opportunities for such views to be problematised. Any controversial programs should be clearly communicated to both teachers and parents, to encourage buy-in, ensuring that all programs and practices focused on mental health and socialisation are also culturally appropriate and able to support students from different backgrounds.

Build teacher capacity

Research also shows that building teacher mental health awareness and capacity to address issues of socialisation first, can be more effective than interventions that focus on building student capacity (Dix et al., 2020). All teachers need to be provided with professional learning opportunities on developing critical thinking skills, and training in how to address controversial and sensitive issues in the classroom. This may include clear guidance on managing discussion, creating safe spaces, and the limits of free speech. Many teachers are also parents of school-age children and face a double risk of mental health issues related to periods of remote learning.

Support parents and encourage accountability

Parental engagement is often key to enhancing educational outcomes. Parents are also important in supporting the development of students’ socioemotional skills and monitoring their relationships and connections to others. In extended school closures, parents and caregivers become central in supporting the challenges of children and adolescents. Adopting a parents-as-partners mechanism can support the mental health and relational experiences of students and allow for a sharing of care and accountability.

Monitor, reflect and evaluate

Many schools in Australia use mechanisms and tools to measure student wellbeing and socialisation capacity, and the implementation of these programs continues to accelerate. However, the evidence base for many of these tools remains inadequate, and context is key. It is important to recognise that any measurement or evaluation instruments must be integrated into ongoing pastoral care programs and practices and contextualised based on the needs of the community. Programs and practices that are fit for context are far more impactful.
Teachers

Reconnect with others
Self-care is also crucial for teachers, but maintaining connection is equally important and can foster positive mental health and build resilience. Remote learning can disrupt connections and make it challenging for positive mental health and productive relationships to continue, among students as well as educators. Taking time to reconnect, and focusing on relationships as part of classroom practice as well as in conversations with colleagues, can cultivate positive patterns of thinking and feeling, support trust, and foster help seeking. Debriefing and talking to trusted colleagues and/or friends and family, can also reduce the cognitive load that comes with supporting students during periods of challenge.

Know the referral process
It is not the job of teachers to diagnose, but teachers have an important role to play in the referral process for supporting students with suspected mental health concerns or antisocial behaviours. Familiarity with mental health referral processes can help teachers to support students who require specialist intervention and support, engage mental health experts and parents/families during the process, and allow teachers to receive specialist support.

Embed mental health and social skills in daily practice
There is increasing evidence of schools focusing on wellbeing and relationships as part of classroom practice. While a whole-school approach to mental health and wellbeing is important, it is also necessary to set aside time to teach social and emotional skills, particularly ahead of working on challenging issues like those raised in this review. Social and emotional learning skills, particularly understanding and managing emotions, are often seen as an important pre-condition for positive mental health and for overcoming relational issues with others, and as critical for overcoming periods of challenge and stress associated with learning.

Ask questions and seek feedback
Some of the issues facing young people can be overwhelming and challenging for many adults to discuss. However, there are increasing numbers of young people participating in online groups and movements, and consuming content that can promote antisocial behaviours and impact on mental health. It is important to learn what you can, but also create opportunities to ask students about the time they spend online and the people they spend time with, free from judgement. Finally, seeking feedback from students can create a continuous loop that will help you to understand when you get it right with students, and when you need to try a different way.

Encourage student voice and discussion
As students return to face-to-face learning, it is important to acknowledge that levels of self-regulation are likely to be diminished. Furthermore, it is likely that some students have participated in, or consumed, problematic material online that can lead to antisocial behaviours. These choices must not be stigmatised, but acknowledged and discussed where possible. This can allow space to allow for trust to be built, and for a space in which more extreme views may be expressed and challenged.
Key messages

• Building resilience in young people during times of uncertainty is challenging. Finding ways to live with uncertainty can help to reduce anxiety and depression amongst young people, improve relationships, and encourage a sense of resilience.

• Mental health, and associated mental health issues, can lead to disengagement in schooling, while extended periods of disruption can reduce connectedness between students.

• During periods of disruption, young people are likely to seek connections online, which may place them at increased risk of developing antisocial attitudes and behaviours, including placing them at risk of radicalisation.

• On return to school students can be encouraged to speak freely about these issues within the classroom and given a safe space to discuss and problematise their experiences, beliefs, and values.

• Teachers and parents who are adequately prepared can facilitate challenging discussions in a way that does not marginalise or further enforce problematic views.

• Open dialogue that recognises, rather than minimises the experience of young people returning to school from a disaster event is crucial for schools operating in a time of uncertainty.
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