Rethinking the role of the school after COVID-19

Closure of schools and the psychological impact on children and adolescents’ health, resulting from staying at home for several weeks with uncertain perspectives for the near future, is a crucial issue.¹ The worst consequences of this temporary shutdown are experienced by the most vulnerable children who already rely on school for educational, nutritional, and health needs due to their socioeconomic disadvantages or disabilities. In addition to the possible lack of parental support at home, major inequalities arise in the access to digital learning resources. With the aim of ensuring continuity, inclusion, and equity for all students, the UN Educational, Scientific and Cultural Organisation (UNESCO) has launched the Global Education Coalition, calling for coordinated and innovative actions to support students through remote learning and to guide the school reopening phase, thanks to the involvement of public and private stakeholders.

The COVID-19 crisis highlights that school fulfils not only an educational mission of knowledge acquisition, but it also satisfies the socialisation needs of young people. With students at home, the school community is absent and despite the virtual interactions and learning opportunities provided by the internet and social networks, a barrier is created in the educational relationship between pupils and teachers. Moreover, children are missing a physical space in which to share interests, thoughts, hopes, and emotions among peers. School provides a structured setting in which children can learn and develop social competencies, such as self-confidence, friendship, empathy, participation, respect, gratitude, compassion, and responsibility. Social and emotional learning is important for young people to become conscious members of a solidarity-based community.² Learning objectives can be achieved remotely (and evaluated to some extent), but the core mission of any school system also comprises the promotion of students’ wellbeing, which is closely related to school performance.²³

The COVID-19 crisis gives us the opportunity to re-assess what type of school we want for the future. Paakkari and Okan⁴ recently highlighted the need to improve health literacy. Teachers should act as health promoters for their students from a young age, by actively fostering healthy habits (physical activity, good personal hygiene, and balanced diet) and raising awareness of the consequences of risky behaviours.

For a more inclusive and student-centred education, didactic methodologies, such as cooperative learning (based on student collaboration), should be used to convey health topics among students, to encourage personal reconstruction of knowledge, and to engage them with adopting healthy lifestyles. A wide range of participatory activities can be used, including debates, small working groups, authentic learning activities (concerning real-life situations), storytelling, role playing, educational games and simulations, audio and visual laboratories, or arts, music, theatre, and dance.

Health literacy should be integrated into school curricula, either within scientific subjects or as extracurricular matter. Medical professionals, pedagogists, and psychologists could support teachers in this task. Moreover, educational interventions that aim to promote children’s wellbeing in the school setting might also represent the most effective anti-bullying strategy and are expected to facilitate the scholastic pathway of children belonging to the most disadvantaged socioeconomic groups.¹

The UNESCO Chair on Health Education and Sustainable Development strongly believes that education is health. Wellbeing promotion in the school setting, resulting from a process of meaningful and transformative learning, can represent the lever for a knowledge-based health culture, impacting not only the behaviours of students, but also those of their families and communities.

We declare no competing interests.

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