



**Knowledge hub**  
-  
**Collection of best practices**

**Summary of the best practice**

1. Title of the best practice (e.g. name of policy, programme, project, etc.) \*

Malawi HEART Back to School: arts-based psychosocial support to help the return to learning

2. Country or countries where the practice is implemented \*

Malawi + 29 other countries worldwide

3. Please select the **most relevant** Action Track(s) the best practice applies to \*

- Action Track 1. Inclusive, equitable, safe, and healthy schools
- Action Track 2. Learning and skills for life, work, and sustainable development
- Action Track 3. Teachers, teaching and the teaching profession
- Action Track 4. Digital learning and transformation
- Action Track 5. Financing of education

4. Implementation lead/partner organization(s) \*

Save the Children

5. Key words (5-15 words): Please add key descriptive words around aims, modalities, target groups etc. \*

children, teachers, caregivers, arts-based approach, psychosocial support, holistic learning outcomes

6. What makes it a best practice? \*

The HEART program aims to address the problem of a lack of social workers, psychologists, child counsellors, and other mental health support professionals in communities in which Save the Children works. The approach aims to strengthen psychosocial support skills amongst the non-mental health professionals already working with children, such as teachers in pre-schools and primary schools, so that those trained adults can facilitate HEART activities for children to enhance their psychosocial well-being, development, and learning. HEART Back to School was specifically designed to respond to social-emotional and mental health needs of children impacted by COVID-19, adapting an evidence-based approach to mitigate the high risk of children not returning to school.

## Description of the best practice

7.

Introduction (350-400 words)

This section should ideally provide the context of, and justification for, the practice and address the following issues:

- i) Which population was affected?
- ii) What was the problem that needed to be addressed?
- iii) Which approach was taken and what objectives were achieved? \*

In Malawi's Zomba District, public pre-schools, primary schools, and secondary schools were closed from March to September 2020 due to COVID-19. Not only did this leave thousands of children at home to follow remote classes and lessons, often without appropriate support from their parents/caregivers, and/or technological equipment to engage fully, but the disruption to children's support systems, resulted in increased child protection, health, and food insecurity risks. Children and teachers alike experienced considerable amounts of stress in trying to cope with this unprecedented situation. As schools reopened in October 2020, teachers needed appropriate tools to support themselves and children's psychosocial well-being alongside regular learning, and children had to process the accumulated stress to be able to re-engage with full academic learning process.

HEART (Healing and Education Through the Arts – a Save the Children MHPSS approach) is an arts-based approach to providing psychosocial support for children. It uses the arts to help children—in schools, child friendly spaces, youth centers and other structured settings—process and communicate feelings, experiences, or ideas in an emotionally safe and supportive environment where they can connect with peers and caring adult facilitators. HEART has a strong evidence base, both from decades of global research on the impact of the arts on stress reduction, well-being, learning, and development, as well as from recent evaluations of the program in different settings around the world. It is always adapted to the local context and has also been adapted centrally to respond to different needs, such as the COVID-19 pandemic. In the Malawi context, the team employed HEART Back to School to support children in the initial weeks and months when they returned to school after months of school closure.

This approach made the transition back to school more gentle, creative, interactive, fun, and supportive for children. It helped to support children to process and recover from the stress of lockdown, so they were able to gradually transition back into formal learning in a way that supports their well-being, making them better able to concentrate, communicate, and engage in the formal learning environment.

In total, over 70,000 children were supported through HEART Back to School in Malawi. The existing HEART program that had been targeting 24,000 children in informal and extracurricular settings was scaled up to reach the additional 46,000+ children in 57 formal primary schools.

Interviews with teachers indicated numerous areas of positive impact including increased attendance, increased engagement in the classroom, improved concentration, and improved emotional regulation.

## 8. Implementation (350-450 words)

Please describe the implementation modalities or processes, where possible in relation to:

- i) What are the main activities carried out?
- ii) When and where the activities were carried out (including the start date and whether it is ongoing)?
- iii) Who were the key implementation actors and collaborators? (civil society organizations, private sector, foundations, coalitions, networks etc.)?
- iv) What were the resources needed (budget and sources) for the implementation?\*

HEART Back to School focuses on:

1. very simple relaxation activities (including breathing and physical movement, stretching and fun),
2. structured activities - focusing on expressive arts, sharing and listening to each other,
3. free arts activities - allowing children to have a safe space and free time to express themselves in any way they like, using expressive arts, movements, locally appropriate songs, dance and games.

Main Activities:

Preparatory phase – logistics, training schedule, translating the Manual into local language, pairing the trainers, providing art supplies for the trainings. September 2020: Initiated 1 month before the actual programming in schools, where SC US global HEART technical team and local Malawi HEART team organized a series of calls to discuss all preparatory details and set-up the roadmap, with clear milestones and regular ongoing check-ins.

Organizing series of 2-day condensed HEART trainings for teachers from the primary schools. October 2020 (just before school re-opening): Series of 2-day HEART Back to School trainings was organized in selected primary schools, in a safe environment for teachers. Organizing trainings in primary schools simplified the overall logistical process, both for teachers and Save the Children.

Providing primary schools with art supplies. October 2020: Malawi HEART team procured and disseminated appropriate art supply packages to the trained teachers in the selected 57 primary schools, to be able to kick-off and run the HEART activities with children after the trainings.

Implementing condensed HEART in primary schools. October 2020 onwards: Teachers implemented HEART in their schools with children, over the first 6+ weeks after returning to school. Many of them continued to use HEART activities longer, as they have found it very helpful for children and themselves.

Monitoring and ongoing technical support by HEART Malawi team. October – November 2020: Malawi HEART team provided ongoing technical monitoring and support to the teachers in all schools, with regular check-ins to ensure quality implementation of the program.

Note that whilst HEART Back to School is no longer being used, the full HEART program is still being implemented in Malawi.

Resourcing:

To deliver this program, four local HEART trainers dedicated approximately 30% of their time over four months, and teachers dedicated between 1.5 – 4 hours per week to facilitating HEART

activities in schools. Overall, this specific programming cost approximately \$3 per child for 3 months of programming. Regular HEART programming in Malawi runs in 9-month cycles (the full school year) and costs between \$10 - \$20 per child per year.

#### 9. Results – outputs and outcomes (250-350 words)

To the extent possible, please reply to the questions below:

- i) How was the practice identified as transformative? (e.g., impact on policies, impact on management processes, impact on delivery arrangements or education monitoring, impact on teachers, learners and beneficiary communities etc.);
- ii) What were the concrete results achieved with regard to outputs and outcomes?
- iii) Has an assessment of the practice been carried out? If yes, what were the results? \*

Qualitative evaluation of HEART programming in several countries has demonstrated significant impact on children's self-expression and emotional regulation as well as teacher and caregiver ability to support children's psychosocial well-being and development.

Quantitative evaluation of year-long HEART programming in learning spaces in Malawi demonstrated a 12% gain in cumulative holistic learning for children attending HEART integrated classrooms compared to children in classrooms without HEART over a full school year. The gains were seen in emergent literacy, numeracy, fine-motor skills development, and social emotional learning – measured through Save the Children's IDELA tool.

HEART Return to School recorded the following results at output level:

57 primary schools supported by the HEART Back to School Program in 2020

70,246 children benefiting from participation in HEART Back to School in 2020

Qualitative feedback indicates that teachers observed improved school attendance after the launch of HEART in wider education programming in October 2020 and observed improved self-expression, communication, concentration, and engagement in the classroom. Numerous teachers indicated their intention to continue with HEART activities beyond the scope of the project.

## 10. Lessons learnt (300 words)

To the extent possible, please reply to the following questions:

- i) What were the key triggers for transformation?
- ii) What worked really well – what facilitated this?
- iii) What did not work – why did it not work? \*

Experiential training in safe environments: Organizing trainings in safe environment for teachers was useful for them to feel relaxed and engaged. Training for HEART Back to School is crucial and provides opportunity for teachers to experience the activities themselves, to better understand the program and address any concerns they might have. One of the challenges was that a small number of local HEART trainers had to dedicate a significant amount of time and energy to train all teachers. For future similar opportunities, it would be important to plan more HEART trainers to be involved.

Timely, relevant and locally available art supplies: Timely procurement of art supplies with a clear distribution list ensured smooth material delivery to all primary schools. Using the simple art supplies that are easily accessible is recommended. If some art supplies are not available, there is guidance for making the art supplies from locally available materials.

HEART activities that were designed to recognize the lack of time available in the existing academic timetable: Implementing the activities required well-prepared scheduling by teachers, who needed to integrate HEART into their daily/weekly schedules. Since HEART Back to School uses very simple, short and light activities, it was possible for teachers to integrate them. On the other hand, demands for catching-up and continuing with the academic/learning process at times put pressure on teachers to make sure all needs are met (socio-emotional needs, learning needs, etc.). Once they started to integrate HEART, with time, teachers found it relatively easy to use HEART activities during the weeks. In using the HEART activities with children, teachers reported they found some activities beneficial for improving their own well-being as well as that of the children.

Ongoing technical monitoring and support: The Malawi HEART technical team ensured ongoing monitoring and technical support to all teachers during the program implementation. This was not without challenges, and one of the main challenges was that relatively small number of Malawi HEART team members providing support to a large number of teachers. Having more HEART team members included is a recommendation for future similar opportunities.

## 11. Conclusions (250 words)

Please describe why may this intervention be considered a “best practice”. What recommendations can be made for those intending to adopt the documented “best practice” or how can it help people working on the same issue(s)? \*

HEART Back to School was specifically designed to respond to social-emotional and mental health needs of children impacted by COVID-19, adapting an evidence-based approach to mitigate the high risk of children not returning to school. The HEART program aims to address the problem of a lack of social workers, psychologists, child counsellors, and other mental health support professionals in communities in which Save the Children works. The approach aims to strengthen psychosocial support skills amongst the non-mental health professionals already working with children, such as teachers in pre-schools and primary schools, so that those trained adults can facilitate HEART activities for children to enhance their psychosocial well-being, development, and learning.

HEART activities focus on relaxation, stress processing, understanding emotions, emotional regulation, self-expression, confidence building, problem solving, conceptualizing the future, and supportive communication. Through engaging in the HEART activities on a weekly basis over time, children develop empathy and understanding of themselves and those around them and the classroom transforms into an emotionally supportive space where children receive emotional support from trusted caring adults (teachers) and become able to support themselves and each other in times of stress.

When parents and caregivers of the children participate in the parent/caregiver support HEART activities, the creatively expressive and emotionally supportive environment that develops in the classroom extends to the home environment, providing increasingly consistent emotional support for children in the two main spaces they live their lives (school and home).

## 12. Further reading

Please provide a list and URLs of key reference documents for additional information on the “best practice” for those who may be interested in knowing how the results benefited the beneficiary group/s. \*

<https://www.savethechildren.org/us/what-we-do/protection/healing-and-education-through-the-arts>

<https://www.routledge.com/Arts-and-Culture-in-Global-Development-Practice-Expression-Identity-and/Maquire-Holt/p/book/9780367708375>

<https://medium.com/@SavetheChildren/a-place-in-her-heart-6d428d747fc>

<https://www.youtube.com/watch?v=1fRPRIwiwkl>