



**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.) \*

The 'Better Learning Programme' and the Right to Wellbeing

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

Palestine, Jordan, Lebanon, Iraq, Syria, Libya, Burkina Faso, Niger, Cameroon, CAR, DR Congo, Mali, Nigeria, Kenya, Mozambique, Sudan, Yemen, Colombia, Ecuador, Venezuela, Honduras, Iran, Afghanistan, Bangladesh and Myanmar Salvador

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) \*

Norwegian Refugee Council in collaboration with Ministries of Education, UNRWA and international/local partners, in addition to the University of Tromsø, the University of Auckland and the MHPSS Collaborative.

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

The 'Better Learning Programme' (BLP) is an NRC-signature PSS intervention focusing on improving children/youth learning capacity for coping with traumatic stress.

6. What makes it a best practice? \*

The psychosocial support (PSS) classroom-based intervention, the Better Learning Programme (BLP) mobilises a child/youth's support network of caregivers, teachers and counsellors, encompassing a multi-layered approach to restore a sense of normality and hope. The BLP is innovative in the Education in Emergency sector where there are no other similar multi-tiered and evidence-based programmes. It is fluid, responsive, and can be implemented by any teacher or counsellor who has been trained on the approach, making it ideal for emergency and under-resourced humanitarian settings. This level of flexibility allows for quick adaptation according to differing levels of emergency and other contextual challenges. A core reason for the effectiveness of the BLP is the evidence base which underpins it. The foundation of the BLP is research on child/youth well-being and recovery and, over its years of implementation in multiple contexts, evidence generation on the efficacy of the programme has continued, being consistently fed back into programme development.

## 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? \*

The initial conceptualization of the BLP and development of the initial intervention was undertaken in 2006 by Professor Jon-Håkon Schultz of the Institute of Education within the Arctic University of Norway, Tromsø (UiT), in collaboration with the NRC and the Norwegian Centre for Violence and Traumatic Stress Studies. The first version of the BLP was developed at that time, named Trauma Education: Fighting Nightmares and Sleeping Problems to Promote Learning. This intervention sought to integrate trauma education into NRC's existing Youth Education Pack (YEP) programme in North Uganda. The NRC programme for former child and youth soldiers had found that, despite having high quality teachers, school and curriculum available, the children and youth in their programme were still not learning. The introduction of the Trauma Education programme aimed to enable the learners to better understand themselves and their reactions to trauma, hence to promote learning.

Over the years, the BLP programme have undergone consistent monitoring and revision, and a myriad of research, field-based learning and best practice collection has been conducted in seeking to better understand the outcomes of the programme and to evaluate its efficacy. Based on strong impact and positive results, the BLP has been successfully scaled-up in all NRC Middle East programmes, and is now also being implemented in NRC countries of operation across the globe. The demand for the BLP has increased over recent years in response to ongoing and new emergencies and protracted crises which are reducing the well-being and learning outcomes of children affected by displacement, for example during the COVID-19 pandemic. These crises continue to underline the need to integrate PSS into education programming, including in formal education where – for example in Palestine, Lebanon and Jordan – NRC is supporting formal education systems to institutionalize the BLP within MoE formal schools. A critical initial step towards external institutionalization has included, first, internal institutionalization of the BLP and implementation processes within NRC. NRC's new global education strategy aspires to integrate PSS across all EiE programmes, including by scaling up the BLP, and plans to invest in a 3-year initiative 'Right to Well-being 2024'. In more recent years, NRC has partnered with the University of Auckland, the New York University's Global TIES initiative and the MHPSS Collaborative to support with ongoing BLP evaluations, joint work on research-based measurement tools, and broader PSS/SEL research.

## 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?

\*

NRC has been implementing the BLP as an integral part of its education programming in Palestine since 2012. It has since grown to be incorporated into education programming in various regions and country programmes around the globe.

The BLP focuses on improving children/youth's learning capacity by integrating techniques for coping with traumatic stress into daily teaching and learning, and encouraging pupils' natural recovery. BLP consists of three components of programme intervention: the first is a general, classroom-based psychosocial support (PSS) approach targeting all children and young people (BLP1); the second is a small group intervention to support resilience amongst a more specific target group of academic under-achievers (BLP2) and the third is a specialized PSS approach to address nightmares, which many children experience as a chronic symptom of traumatic stress (BLP3).

The programme provides teachers with tools to address often complex psychosocial issues without requiring a PSS background which means that it can be used systematically in classrooms to address, not only the well-being needs of children affected by conflict or displacement, but also to improve classroom management through supporting all children to manage their stress and learn how to calm themselves. The simplicity of the BLP allows it to be easily integrated into broader education projects, catalysing results for both teachers and children/adolescents, and leading towards sustainable results at an institutional level.

The BLP is almost never implemented as a stand-alone programme but integrated into an existing education programme, hence it is not usually expensive to implement. It is a programme based on continuous capacity development activities hence, beyond BLP staff costs, the bulk of the budget is usually composed of capacity building events, workshops and related activities.

## 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? \*

Data across evaluations, research, M&E data show considerable improvement in well-being across countries and regions, specifically in terms of self-regulation, confidence and self-awareness which translates into increased capacities to cope with challenges and stressful situations. Moreover, the relationships and communication between students, their families and teachers improved.

Countries that also implement the BLP2, report an improvement in study skills and learning outcomes in addition to the improvements in well-being as stated in the key achievement above. The improved well-being is probably due to mainstreaming of BLP1 techniques into BLP2 programming. As such it is highly recommended to always implement BLP2 in combination with or consecutive to BLP1.

Attendance of the BLP sessions is very high (on average over 90%) and when the BLP sessions are over, children ask for more sessions. These findings highlight the need and relevance of PSS for displacement affected children.

Both, students and teachers, report applying the BLP strategies inside and outside the classroom and share them with others, showing that BLP has a lasting impact beyond the standard classroom sessions included in the manuals. Capacity building in BLP has improved the teachers' professional efficacy through an increase in knowledge and tools for classroom management which positively impacts the quality of education and teaching practises. The teachers' improved ability to cope with stress and to understand students' stress responses improved which has a positive impact on the relationship with their students. Teachers have reported that BLP helped them as much as it helped their students to cope with stress and anxiety. Teacher across regions indicate that they use the exercises to calm down themselves as well.

Ministries of Education are increasingly acknowledging that PSS is a basic educational need. In some regions and countries BLP practise was included in the national curriculum or teacher training of government schools. Through institutionalization and implementation of the BLP through formal education, NRC and Ministries of Education, were able to have a positive impact on the well-being and learning of displacement affected children at scale.

## 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? \*

Overall, the most recent external evaluation carried out in the end of 2021, has indicated that BLP has had a significantly positive impact on the wellbeing of the targeted students, providing them with a supportive and safe environment to practise relaxation techniques, as well as improving teacher-pupil relationships and increase study skills and academic performance. In addition, BLP 3's specialised approach has effectively focused on trauma and nightmare prevention, enabling students to better prepare themselves in the context of war. As the findings represent, the students of BLP have integrated and internalised the practise of BLP and were fully aware of the programme within their educational contexts, as well as the importance and overall objectives. This has been corroborated throughout the study alongside surveys and KIs with teachers, parents, Master Trainers and programme staff validating the findings.

The simplicity of the programme design has been reported to be effective as a result of greater dissemination across the beneficiaries and decreasing misperception of the programme amongst staff and facilitators. However, from an M&E perspective, the link between the research, implementation, operations and consequent findings will continue to be a challenge. Establishing a credible link between wellbeing and learning outcomes when adapting the programme to different contexts requires consideration.

To address the above, the MHPSS Collaborative in collaboration with NRC will carry out research on the BLP1 in Kenya and Colombia seeking to improve understanding of different aspects of the enabling educational environment that may affect implementation, decision-making and ultimately impact children's mental health and psychosocial wellbeing in humanitarian crises.

## 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)? \*

A core reason for the effectiveness of the BLP is the evidence base which underpins it. The foundation of the BLP lies on the research carried out on child/youth well-being and recovery and, over its ten years of implementation in multiple contexts, evidence generation on the efficacy of the programme has continued, being consistently fed back into programme development.

## 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. \*

We will share below the latest research on educational and psychosocial support for conflict-affected youths: 'The effectiveness of a school-based intervention targeting academic underachievement'

<https://www.tandfonline.com/doi/full/10.1080/21683603.2022.2043209>

We remain available should you be interested in this best practise/programme, to share additional resources