



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.) *

Roll-out of response to COVID-19 wellbeing training for female teachers

2. Country or countries where the practice is implemented *

Bosnia and Herzegovina

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) *

UNICEF and local CSO specialized in psycho social support to women (MUIOS)

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

well-being; female teachers; mental health

6. What makes it a best practice? *

Early detection that the COVID-19 kick-started a serious of mental health issues among the general population and in particular female population and quick action to address

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? *

Female teachers as part of population who had extensive caregiver's role due to COVID-19, and sudden change of working modality due to online teaching, were identified as at high risk of suffering from endangered well-being. The quality assessment was conducted to test the hypothesis, and the results came as expected. The problem manifested in findings among teacher' population: increased levels of depression, sense of disorientation, lack of self-motivation and uncertainty in their skills to deliver education due to lack of digital skills, the latter especially evident with older age groups.

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?

*

The main activities were research, ensuring the activity is based on evidence, and secondly the tailored trainings to address the problem. As COVID-19 restrictions in movement and face to face trainings were still not allowed, professionals in psycho-social care identified the online modality that would best suit the female teachers. This related to timing (two shifts of trainings based on teachers' shifts in school, group size, substance of modules related to COVID-19 findings etc.

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? *

The practice had a strong impact on teachers, in that they felt cared for, supported and recognized as a key stakeholder in delivering education while at the same time, along with students, the most-affected population, with the dramatic change in practices of teaching. The policy change followed, through several initiatives, including the introduction of new bylaws on 'position of pedagogues, defectologists and other members of schools' aiming at assisting teachers and generally improving the school environment to help students and teachers in the process of recovery from COVID-19 and beyond. In addition a number of teachers were trained with coping mechanisms to deal with stress, re-assurance and simultaneous trainings on digital skills that would allow teachers to feel more confident.

All trainings except the final stage of well-being trainings were carried out online, and this modality while not ideal, was quite well received by teachers. The costs were significantly lower, than the face-to face trainings.

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? *

First and foremost, the available funding and good programming. The COVID-19 Response Fund recognized the area of education in the broadest terms to help overcome the challenges, and mental health of teachers was identified as part of the overall problem in addressing the transformative processes in education sector in Bosnia and Herzegovina. Online trainings worked well, and facilitation of this was largely driven by demand - teachers were interested, and found trainings helpful - knowing they are not alone. What did not work is a question perhaps for future, as COVID-19 is retrieving, the question remains whether online modality will be widely acceptable, knowing that fa-to face trainings will add costs to this kind of initiative.

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)? *

This is a best practice in that the mental health is recognized as an integral part of the overall approach to transforming education process by investing in teachers' soft skills and capacities. The implementation in the field and the policy change it triggered, proves that the approach was well contextualized and yielded results and should be recommended for scaling up.

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://drive.google.com/file/d/1d5JvxrQIGDkvV2ONUCvqb4HsR7vHVNx3/view?usp=sharing>
<https://drive.google.com/file/d/1ty2Jx4DDrMuShWsS8y9VH6fkRWMi1p3P/view?usp=sharing>