Learning through COVID-19

Maximising educational outcomes for Australia’s children and young people experiencing disadvantage

Pillar 3 Report: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?
Pillar 3 Report: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Prepared for: Paul Ramsay Foundation
Prepared by: Lisa McBain, Anne Cleary, Mark Robinson, Melissa Johnstone, Mathew Curry, Tyrone Ridgway, Mark Western
Date: 11 May 2021
Revision: Final

This report is 'Draft' until approved for final release, as indicated below by inclusion of a signature from the Director (Institute for Social Science Research) or their authorised delegate. A Draft report may be issued for review with intent to generate a 'Final' version, but must not be used for any other purpose.

Director (or delegate):

The Institute of Social Science Research at the University of Queensland (UQ) acknowledges the Traditional Owners and their custodianship of the lands on which UQ operates. We pay our respects to their Ancestors and their descendants, who continue cultural and spiritual connections to Country.

Table of contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Summary</td>
<td>5</td>
</tr>
<tr>
<td>Approach</td>
<td>5</td>
</tr>
<tr>
<td>Core actions</td>
<td>5</td>
</tr>
<tr>
<td>Promising Programs</td>
<td>6</td>
</tr>
<tr>
<td>Impact of COVID-19 on educational disadvantage</td>
<td>6</td>
</tr>
<tr>
<td>Background</td>
<td>7</td>
</tr>
<tr>
<td>Purpose of this report</td>
<td>10</td>
</tr>
<tr>
<td>Methodological approach</td>
<td>11</td>
</tr>
<tr>
<td>Study design</td>
<td>11</td>
</tr>
<tr>
<td>Learning through COVID-19 Driver Tree</td>
<td>11</td>
</tr>
<tr>
<td>What Works review</td>
<td>11</td>
</tr>
<tr>
<td>Promising Programs</td>
<td>11</td>
</tr>
<tr>
<td>Implementation readiness</td>
<td>12</td>
</tr>
<tr>
<td>Evidence of effectiveness</td>
<td>12</td>
</tr>
<tr>
<td>Learning through COVID-19 Driver Tree</td>
<td>14</td>
</tr>
<tr>
<td>Priority Action Areas</td>
<td>17</td>
</tr>
<tr>
<td>Priority Action Area 1: Student mental health, wellbeing, and hope</td>
<td>19</td>
</tr>
<tr>
<td>Priority Action Area 2: The future role of teachers, schools and communities</td>
<td>21</td>
</tr>
<tr>
<td>Priority Action Area 3: Digital equity</td>
<td>24</td>
</tr>
<tr>
<td>Priority Action Area 4: Protections for the most vulnerable students</td>
<td>26</td>
</tr>
<tr>
<td>Knowledge gaps and other opportunities</td>
<td>28</td>
</tr>
<tr>
<td>What else should be done to reduce educational disadvantage in Australia?</td>
<td>30</td>
</tr>
<tr>
<td>Ways forward</td>
<td>31</td>
</tr>
<tr>
<td>Acknowledgements</td>
<td>31</td>
</tr>
</tbody>
</table>

The Institute of Social Science Research acknowledges the Traditional Owners and their custodianship of the lands on which UQ operates. We pay our respects to their Ancestors and their descendants, who continue cultural and spiritual connections to Country.
Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Executive Summary
In response to COVID-19, most of the world’s student population was impacted by transitions to remote learning. COVID-19 has also significantly affected families, health and socio-economic circumstances. Some children and young people already experiencing disadvantaged circumstances may be at greater risk of poorer educational outcomes than they would have been had the pandemic not occurred.

The Institute for Social Science Research (ISSR) at the University of Queensland undertook a study, funded by the Paul Ramsay Foundation, to explore the impact on learning through COVID-19. The Learning through COVID-19 project was structured across three interrelated stages of work (Pillars 1 to 3) that were designed to inform solutions to address worsening educational disadvantage.

Pillar 1 provided a rapid assessment of educational disadvantage in Australia prior to the pandemic, and Pillar 2 examined the lived experience of COVID-19 on Australia’s children, young people and families experiencing disadvantage, its impact on their educational outcomes and engagement with school, and the response to COVID-19 of service providers. Pillars 1 and 2 showed that COVID-19 has had varying multifaceted impacts on educational disadvantage.

This Pillar 3 Report presents evidence-based options for action to inform policy and programmatic solutions. The solutions identified throughout the Learning through COVID-19 project target those elements of the system of educational disadvantage directly impacted by COVID-19 and are thus most likely to be successful in countering the disruptive effects of the pandemic.

Approach
The Pillar 3 study design incorporated an integrative synthesis across complementary information sources to produce a framework to locate Promising Programs, higher-level system design features to promote educational equity, and knowledge gaps requiring further investigation.

The influence of COVID-19 on educational disadvantage was mapped onto a Driver Tree that show a set of pressures on existing factors influencing disadvantage, which in turn expose children and young people to experiences that have an impact on their educational outcomes. The Driver Tree is essentially a map that allows effort to be targeted to modifiable risk factors that may mitigate the effects of COVID on educational disadvantage. The Driver Tree also allows the effect of the effort to be monitored without oversimplifying the complex causes. While the Driver Tree was comprehensive at time-of-writing, it will require ongoing monitoring and updating as new information arises.

A ‘What Works’ review, that was supported by stakeholder consultation, was conducted to understand existing interventions and programs (termed Promising Programs) across four priority Action Areas. These Promising Programs were assessed for their evidence base and implementation readiness for the Australian context.

Core actions
Three to five core actions were identified across four priority Action Areas.

References
Appendix 1: Stakeholder consultations
Appendix 2: Priority Action Area mapping tables
Appendix 3: Implementation readiness score indicators
Appendix 4: Promising Programs key to Figures 8, 10, 12
Appendix 5: Example Promising Programs...
Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Introduction

In response to COVID-19, most of the world’s student population was impacted by transitioning to remote learning (United Nations, 2020). COVID-19 disrupted schooling and significantly affected families’ health and socio-economic circumstances. The impacts of COVID-19 on young people, particularly those who are more vulnerable, such as those from low-income communities, have worsened. Defined as Year 10, 11 and 12 students with school attendance below a 50% threshold (or appropriate proxy where AEDC data are not available), students in this age group are also more likely to be disengaged from school, but the impact of this has yet to be explored.

In Australia, recent insights point to the impact of the lack of digital access, the challenges of learning from home, lack of social connections, mental health impacts, and uncertainties around future study, training and employment opportunities (Australian Human Rights Commission, 2020; Commission for Children and Young People, 2020a, 2020b; The Smith Family, 2020). The second lockdown in Victoria (from 9 July to 26 October 2020) created additional challenges to teachers in providing remote learning for young people, and families there, and extended home schooling increased the risk of disengaging from school, but the impact of this has yet to be explored.

The Learning through COVID-19 project was structured across three interrelated stages of work (Pillars 1 to 3) to design informed solutions to address educational disadvantage and support young people’s ability to explore new learning opportunities.

In Australia, the Learning through COVID-19 project is structured across three stages of research. Stage 1 involved a rapid assessment of existing evidence of effective programs and potential solutions to support young people, their families and schools amid the COVID-19 pandemic. This involved evaluating and identifying the effectiveness of programs currently operating in Australia, and efforts to monitor and evaluate COVID-19’s impact on educational disadvantage, highlighting the need for solutions to be grounded in a research-based understanding of the implications and targets for interventions.

The Learning through COVID-19 project was structured across three interrelated stages of work (Pillars 1 to 3) to design informed solutions to address educational disadvantage and support young people’s ability to explore new learning opportunities. The project was informed by the rapid assessment of existing evidence of effective programs and potential solutions to support young people, their families and schools amid the COVID-19 pandemic. This involved evaluating and identifying the effectiveness of programs currently operating in Australia, and efforts to monitor and evaluate COVID-19’s impact on educational disadvantage, highlighting the need for solutions to be grounded in a research-based understanding of the implications and targets for interventions.

Stage 1: Rapid Assessment

This stage involved a rapid assessment of the most promising evidence-informed options for action.

Pillar 1: Rapid Assessment of Evidence-Based Options for Action

Pillar 1 provided a rapid assessment of educational assistance in Australia to address the ongoing impact of COVID-19 on educational disadvantage. The project was informed by the rapid assessment of existing evidence of effective programs and potential solutions to support young people, their families and schools amid the COVID-19 pandemic. This involved evaluating and identifying the effectiveness of programs currently operating in Australia, and efforts to monitor and evaluate COVID-19’s impact on educational disadvantage, highlighting the need for solutions to be grounded in a research-based understanding of the implications and targets for interventions.

In Australia, the Learning through COVID-19 project is structured across three stages of research. Stage 1 involved a rapid assessment of existing evidence of effective programs and potential solutions to support young people, their families and schools amid the COVID-19 pandemic. This involved evaluating and identifying the effectiveness of programs currently operating in Australia, and efforts to monitor and evaluate COVID-19’s impact on educational disadvantage, highlighting the need for solutions to be grounded in a research-based understanding of the implications and targets for interventions.

Learning through COVID-19: Maximising educational outcomes for children and young people experiencing disadvantage

In Australia, the Learning through COVID-19 project is structured across three stages of research. Stage 1 involved a rapid assessment of existing evidence of effective programs and potential solutions to support young people, their families and schools amid the COVID-19 pandemic. This involved evaluating and identifying the effectiveness of programs currently operating in Australia, and efforts to monitor and evaluate COVID-19’s impact on educational disadvantage, highlighting the need for solutions to be grounded in a research-based understanding of the implications and targets for interventions.

In Australia, the Learning through COVID-19 project is structured across three stages of research. Stage 1 involved a rapid assessment of existing evidence of effective programs and potential solutions to support young people, their families and schools amid the COVID-19 pandemic. This involved evaluating and identifying the effectiveness of programs currently operating in Australia, and efforts to monitor and evaluate COVID-19’s impact on educational disadvantage, highlighting the need for solutions to be grounded in a research-based understanding of the implications and targets for interventions.
Within and across cohorts, boys, Aboriginal or Torres Strait Islander children and young people, students with limited English language proficiency, and students from low socio-economic status (SES) backgrounds are at greater risk. Having health or mental health conditions, facing challenges in education environment (such as parents having difficulty supporting home learning or weaker student connectedness to teachers and schools), financial hardship and food insecurity in families heighten risks further.

The cohorts were unevenly distributed geographically, with the highest prevalence rates (but small numbers) in rural and remote areas, and higher than average the inner and outer regions of most capital cities, and the non-metropolitan regions of some states. Within these cohorts, the children and young people in greatest need are those with multiple risk factors who live in places and communities with high levels of socioeconomic disadvantage.

Learning loss was described as a multifaceted and dynamic experience. Children and young people talked of feeling ‘stuck’ in one location, losing social, family and peer connections, and missing important milestones or events, which affected their mental and emotional health. Feelings of anxiety were palpable, but strengths and resilience to adapt and overcome challenges were evident. The National Literacy and Numeracy Project (1996) found 61% of students in Cohort 1 had a clear target to develop their reading and writing skills, 90% had targets for maths, almost 100% had a focus on spelling, and 85% had identified a growth area in other areas.

The long-term impacts of COVID-19 reflect individual, family, school and community circumstances, and characteristics of the places where children and young people live. The Pillar 1 Report set out an understanding of educational disadvantage in the context of this ecological system and the life course over which human development and educational trajectories progress (Figure 2).

Pillar 2 examined the lived experience of COVID-19 on Australia’s children, young people and families experiencing disadvantage, its impact on their educational outcomes and engagement with school, and the response to COVID-19 of service providers. The Pillar 2 Report found that educational disadvantage did not substantially worsen during the pandemic. The disadvantage gap in school attendance increased in Cohorts 1 and 2 and was reported by others to rise in Victoria (Learning First, 2020). The percentage of students who are absent from school fell in Cohort 1, and students who are absent from school fell further in Cohort 2. This is likely due to the fact that the distance learning and remote learning programs were launched in response to the pandemic to ensure that students who are absent from school could continue their education, and that students who are absent from school could continue to learn from home.

The risk factors for educational disadvantage that are likely to be exacerbated by COVID-19 reflect individual, family, school and community circumstances, and characteristics of the places where children and young people live. The Pillar 1 Report set out an understanding of educational disadvantage in the context of this ecological system and the life course over which human development and educational trajectories progress (Figure 2).
Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Methodological approach

Study design

The Pillar 3 study design incorporates an integrative synthesis across complementary information sources to provide a framework to locate Promising Programs. Higher level system design features to promote educational equity, and knowledge gaps requiring further investigation. The report centres COVID-19 as a driver of educational disadvantage. The solutions are embedded in the social-ecological systems model, the life course perspective of educational trajectories (Figure 4), and the evidence-based understanding of the effects of COVID-19 on educational disadvantage.

Learning through COVID-19 Driver Tree

The Driver Tree illustrates how the COVID-19 pandemic disrupts existing educational disadvantage. Understanding where these disruptions occur and how they exacerbate educational disadvantage is key to identifying and targeting effective solutions.

The Driving-Forces-Pressures-States-Exposures-Effects-Actions (DPSEEA) framework approach (Gentry-Shields and Bartram, 2014) was used to derive and present the Driver Tree. DPSEEA describes the likely cause-and-effect (or) causal effects of changes to their driving forces and, by separating out exposures from state changes, helps to identify areas for interventions that may seek to reduce exposures or remedy the state changes.

Driver Tree and Promising Programs

The Driver Tree illustrates how the COVID-19 pandemic disrupts existing educational disadvantage. Four priority Areas of Action were identified and validated:

1. Student mental health, wellbeing and hope
2. Families, carers, and caregivers
3. Education and support services for children and young people experiencing disadvantage in NSW, TAS, and QLD (including four which provide services across the five levels (student, school, family, community, policy or whole-of-system settings) of our defined system of educational disadvantage. Four priority Areas of Action were also identified and validated: student mental health, wellbeing and hope; families, carers, and caregivers; education and support services for children and young people experiencing disadvantage in NSW, TAS, and QLD; and policy readiness for the Australian context.

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?
Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Only programs or interventions with available outcome evaluations were assessed for implementation readiness.

RE-AIM Framework

RE-AIM is a well-established approach used to support implementation of effective and evidence-based interventions. RE-AIM includes five dimensions:

- Reach (the number, proportion, and representativeness of settings and those delivering the intervention, which are willing to initiate a program, and why)
- Effectiveness (the impact of an intervention on individual outcomes, including potential adverse effects, broader impact on quality of life and economic outcomes (where relevant); and variability across subgroups)
- Adoption (the number, proportion, and representativeness of settings and those delivering the intervention, which are willing to initiate a program, and why)
- Implementation (fidelity of delivery of the intervention's key components, including consistency of delivery as intended, adaptations, implementation strategies, and the time and cost of the intervention)
- Maintenance - long-term effects, and the extent to which an intervention becomes part of routine practices and policies.

Further information on RE-AIM is available at https://www.re-aim.org/.

Evidence of effectiveness

Evidence of effectiveness as reported in the materials reviewed for the Promising Programs was grouped across four levels:

- No effect
- Mixed
- Effective
- No evidence

No evidence

- None of the studies reported any evidence (Appendix 2).

Mixed

- Where there is not yet an evaluation completed or publication from an evaluation (recognising that new programs or interventions that are still in development or testing could not be scored for implementation or evaluation readiness, but could still be of interest and use in the immediate response to COVID-19).

Effective

- Statistically significant findings reported from an evaluation.

No evidence

- When there is not yet an evaluation completed or publication from an evaluation (recognising that new programs or interventions that are still in development or testing could not be scored for implementation or evaluation readiness, but could still be of interest and use in the immediate response to COVID-19).

For Promising Programs that were relevant to the impact of COVID-19, and which had demonstrated effectiveness (or have not yet been evaluated), summary "mapping tables" were produced (Appendix 2). These tables present key high-level information from the Promising Programs, including core actions — activities that describe a key focus or feature of the Promising Program. Example Promising Programs are further included throughout this Pillar 3 Report. Based on the project scope, the mapping tables suggest Promising Programs that may be of most immediate interest to potential funders, governments, service providers, and other interested decision-makers.

The level of evidence for each Promising Program varies: some are based on national and state level programs, which have been developed and evaluated at scale; others are based on pilot studies conducted on a much smaller and exploratory scale. It is important to recognise this when considering the level of evidence available. Further work will be required to translate these Promising Programs into the practical application of new program responses and solutions to COVID-19.

Implementation readiness

Pillar 3 also assessed the extent to which the Promising Programs were ready to be deployed. Assessing implementation readiness required an understanding of:

- What the program is (intervention components and causal mechanisms)
- Who it has been delivered to
- The context in which it was delivered
- How it was delivered
- Whether it worked

While a number of different approaches were considered for this purpose, the RE-AIM (Reach, Effectiveness, Adoption, Implementation and Maintenance) Framework for Implementation Evaluation was considered most appropriate to the Learning through COVID-19 project scope (Glasew et al., 2019). The Promising Programs were given an Implementation Readiness score from 0 to 25 for programs or interventions. Higher scores indicate that the program or intervention is more ready to be implemented in a new setting. Programs or interventions with a score of less than 10 were considered not to have the information required to be ready to be implemented in a new setting in accordance with the RE-AIM Framework.

For each of the 25 indicators, a score of 0 (= no evidence provided) vs 1 (= evidence provided) was assigned and combined to calculate the total score. Indicator questions are included in Appendix 3.

Institute for Social Science Research
Learning through COVID-19 Driver Tree

The collective insights from the Pillar 1 and Pillar 2 Reports have built the understanding of how COVID-19 has impacted the system of educational disadvantage in Australia. Figure 3 is a Learning through COVID-19 Driver Tree that depicts how COVID-19 has placed specific pressures on the education system, leading to changes across system levels. The changes expose children and young people to factors that may lead to adverse and interrelated effects on educational and wellbeing outcomes.

The framing of Figure 3 from the perspective of adverse effects experienced by the individual student. It is based on our current understanding of pathways linking exposures to immediate or short-term effects on children and young people. Broader contextual factors and longer-term perspectives on educational disadvantage are considered in the final section of this Report.

The Driver Tree is a map, showing how COVID-19 disrupts educational disadvantage to worsen educational outcomes for disadvantaged students. Like a map, it contains many routes or pathways from the various starting points to the different destinations associated with worsening educational disadvantage.

For example, the pressure of school closures resulted in a change to the school system with a sudden dominance of online learning. This is likely to have resulted in increased exposure to digital equity risks as those with limited access to digital technologies may have disproportionately experienced detrimental effects on learning experience and outcomes (Figure 4).

By following different routes, from starting pressures through system changes to exposures to effects, decision-makers can identify sites for intervention, where they can prevent or treat exposures that lead to educational disadvantage. The later stages of this Report, Appendices 2 and 4, and the associated Promising Programs Template list relevant preventative and treatment programs for different exposures.

Decision-makers can also contrast their understandings or mental maps of COVID-19 impacts on disadvantage against the Driver Tree to inform actions and advance understandings of how COVID-19 disrupts disadvantage. For example, a decision-maker might believe that some of the connections in the Driver Tree are not valid, ruling out the need for particular interventions if certain pressures or state changes occur. Conversely, a decision-maker might believe that causal connections exist that are not shown, requiring interventions that would not be supported simply by following the Driver Tree. In both cases, well designed research projects can also help adjudicate between these different expectations providing a way to update the map and advance decision-makers’ knowledge of the phenomena they are trying to influence.

The Driver Tree also contains interdependencies and feedback loops. For example, a decrease in student wellbeing would likely decrease student engagement with school, which might further reduce student wellbeing. The impact for different students will depend on the characteristics of their learning environment and their own resources, and where they are in their educational life course. Similarly, system-level changes due to COVID-19 may be interdependent and lead to changes in other parts of the system, and they have unintended and unexpected consequences elsewhere in the system.

Although the adverse effects of drivers are emphasised, not all changes associated with COVID-19 are negative. For example, as noted in the Pillar 2 Report, more direct and one-on-one remote contact between students and schools during school closures may have led to improved engagement among students who previously had poor attendance at school. When considering the Driver Tree, it is important to consider the differential direction of effects and how these may vary within different student contexts, and within different systems.
Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Institute for Social Science Research

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Note:

Icons in System Level Changes reflect those presented in the ecological life course model in Figure 2.

The Driver Tree contains many routes or pathways from the various starting points to the different destinations associated with worsening educational disadvantage. In this example, the pressure of school closures resulted in a sudden dominance of online learning, which likely resulted in increased exposure to digital equity risks, which may have resulted in detrimental effects on learning experience and outcomes.

Figure 4. Learning through COVID-19 Driver Tree showing an example path for school closures.

Priority Action Areas

The Learning through COVID-19 project identified four priority Action Areas in Pillars 1 and 2 that were tested in the stakeholder and academic expert roundtables and informed the ‘What Works’ review. The four Action Areas are:

- Student mental health, wellbeing and hope
- Future role of teachers, schools and communities
- Digital equity
- Protections for the most vulnerable students

For each, the ‘What Works’ review identified programs and interventions that could be solutions in the response to the pandemic. Many potential solutions could be included under these Action Areas. By focusing on those Promising Programs that had immediate relevance to the theorised effects of COVID-19; were relevant to at least one of the three cohorts; and which either had evidence of positive effect from evaluation studies, or had not yet been evaluated; core actions of the selected interventions were identified. These represent a prominent aspect (or aspects) of the intervention that need to be maintained in order to preserve its distinctiveness and potential efficacy. Figure 5 outlines the four priority focused Action Areas and their associated core actions.

One core action, integrate flexible learning models, appears across two priority Action Areas. Flexible learning models in this context, are programs inside and outside schools that are designed to address the diverse needs of students, by tailoring what is taught and ways of teaching and learning to respond to those needs, whether these be related to mental health or educational outcomes.

While the Promising Programs have been identified as relevant to the context of COVID-19, the existing evidence base pre-dates COVID-19 and none of these Promising Programs have therefore been specifically tested in this context. The core actions with which the Promising Programs align have been validated through stakeholder consultation. The core actions allow linkage of the detailed ‘What Works’ review findings to the Driver Tree (Figure 6). Core actions are mapped across the exposures potentially leading to adverse and interrelated effects on educational and wellbeing outcomes. These represent the points in the system at which to intervene.

Figure 5. Priority focused Action Areas and core actions.
Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Institute for Social Science Research

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?
Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Eleven of these have some evidence of effectiveness and six had been delivered in Australia. Nine Promising Programs were targeted at one more than the whole school level and all had aligned at the student level. Promising Programs were distributed across the following core actions:

- Provision of mental health programs.
- Integration of flexible learning needs.
- Engaging parents/carers on mental health.
- Building teacher capacity on mental health.

Across the core actions there is a clear trade-off between implementation readiness and effectiveness (Figure 8). Most programs with high levels of implementation readiness (>10) have only mixed effectiveness, and none of the three effective programs that are already implementation ready are available in Australia. In contrast, the Australia-based effective programs are not yet implementation ready, although one (Children’s University Australasia) does approach the threshold.

Four Promising Programs involved the provision of specific mental health programs (e.g. therapeutic or psychological interventions). All involved teachers delivering classroom-based mental health programs based on cognitive and behavioral strategies and psycho-education. All programs show mixed effectiveness (e.g. therapeutic or psychological interventions). All involved teachers delivering classroom-based mental health programs based on cognitive and behavioral strategies and psycho-education. All programs show mixed effectiveness (e.g. therapeutic or psychological interventions).

The majority of Promising Programs included building teacher capacity on mental health, wellbeing and hope (n=6). The approaches to flexible learning were diverse, ranging from classroom based, positive reinforcement, behaviour management strategies (e.g. The Good Behaviour Game), to building social skills via weekly creative drama sessions (e.g. Speech Bubbles); to incorporating activities shown within the curriculum (e.g. Incorporation of Little J & Big Cuz: Climate School): The evidence of effectiveness is mixed for most of these Promising Programs.

A number of Promising Programs sought to integrate flexible learning models with the aim of improving student mental health, wellbeing and hope (n=6). The approaches to flexible learning were diverse, ranging from classroom based, positive reinforcement, behaviour management strategies (e.g. The Good Behaviour Game), to building social skills via weekly creative drama sessions (e.g. Speech Bubbles); to incorporating activities shown within the curriculum (e.g. Incorporation of Little J & Big Cuz: Climate School). The evidence of effectiveness is mixed for most of these Promising Programs.

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Notes:
- Prioritised Programs can be represented more than once if they fall across different core actions.
- The data points (+ and o) themselves reflect the implementation readiness score but the numbers along the lines reflect the effectiveness (Figure 8).

Figure 8. AA1: Implementation readiness versus effectiveness of Promising Programs.

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Priority Action Area 1: Student mental health, wellbeing and hope

Children’s University

• The Children’s University program in the UK has evidence of effectiveness as well as a high implementation readiness score. The Children’s University aims to enhance student mental health and wellbeing through a number of interventions, including: building teacher capacity on mental health; engaging parents/carers on mental health; and provision of mental health programs.

• Children’s University Australasia is managed by the University of Adelaide and offers educational and volunteering programs to promote awareness and aspirations for future education and career pathways for children and young people who might otherwise not consider university study. The program is funded under the Department of Education’s Higher Education Participation and Partnerships Program (HEPPP), which funds strategies to improve access to universities, museums, and libraries, and ‘social action’ opportunities such as volunteering. The Evidence shows mixed effectiveness (e.g. Adelaide-based effective programs are not yet implementation ready, although one (Children’s University Australasia) does approach the threshold).

• The Children’s University program built mental health content into the curriculum and introduced new material without overly ‘crowding out’ the curriculum or increasing flexible learning. This is an important design feature that may be worth exploring as a potential approach to addressing the mental health impacts caused by COVID-19, providing children and young people with diverse experiences and opportunities to develop their skills and interests. The program is available. Given the mental health burden that COVID-19 has placed on both children and young people, developing such programs could be worth exploring as a potential approach to addressing the mental health impacts caused by COVID-19.

• The majority of Promising Programs included building teacher capacity on mental health as a key component of the intervention design (n=6). The Healthy Minds program, delivered by Beyond Bourke Forward in the UK, involved comprehensive teacher training (33 days of teacher training across four year levels) to enable teachers to deliver a 24-module evidence-based module course within the Personal, Social, Health and Economic (PSHE) curriculum over four years in secondary schools. The evaluation reported higher average student self-assessed general health and wellbeing over four years.

• Programs to enhance teacher capacity to deliver mental health content at schools need to consider a ‘build in’ as opposed to a ‘bolt on’ approach to adapting the curriculum. For example, the Healthy Minds program built mental health content into the curriculum by adapting the existing PSHE curriculum. This is an important design feature that may be worth exploring as a potential approach to adapting the curriculum or increasing teacher workloads, each of which can compromise intervention effectiveness, and lead to unintended exposures such as staff turnover, as raised by the stakeholders engaged in the Learning through COVID-19 project and illustrated in the Driver Tree Figure 9.

Only one Promising Program, the Resilient Families program, sought to engage parents/carers in student mental health and wellbeing.

Resilient Families

The Resilient Families program, delivered across Australia by Positive Choices, aims to help families reduce the mental health impact of COVID-19. The program is evidence-based and addresses risk factors associated with mental health issues for children and young people and their families, the majority of which is due to COVID-19, which has caused by COVID-19, providing children and young people with diverse experiences and opportunities to develop their skills and interests. The program is available. Given the mental health burden that COVID-19 has placed on both children and young people, developing such programs could be worth exploring as a potential approach to addressing the mental health impacts caused by COVID-19.

• The program delivered in primary schools in Western Australia; the evidence base for this program is lacking, although the program is funded under the Department of Education’s Higher Education Participation and Partnerships Program (HEPPP), which funds strategies to improve access to universities, museums, and libraries, and ‘social action’ opportunities such as volunteering. The Evidence shows mixed effectiveness (e.g. Adelaide-based effective programs are not yet implementation ready, although one (Children’s University Australasia) does approach the threshold).

• The majority of Promising Programs were targeted at more than one of the four education pathways (n=6). Thirteen had some evidence of effectiveness and twenty had been implemented in an Australian context. The majority of Promising Programs were targeted at more than one of the four education pathways (n=6). Thirteen had some evidence of effectiveness and twenty had been implemented in an Australian context.

• Thirteen had some evidence of effectiveness and twenty had been implemented in an Australian context. The majority of Promising Programs were targeted at more than one of the four education pathways (n=6). Thirteen had some evidence of effectiveness and twenty had been implemented in an Australian context.

Notes:
- Prioritised Programs can be represented more than once if they fall across different core actions.
- The data points (+ and o) themselves reflect the implementation readiness score but the numbers along the lines reflect the effectiveness (Figure 8).

Figure 8. AA1: Implementation readiness versus effectiveness of Promising Programs.
The majority of Promising Programs in this priority Action Area sought to integrate flexible learning models for the purpose of enhancing student education engagement, attainment and achievement (n=14). It was most common for the Promising Programs to align with either one (n=22) or two (n=6) core actions. Six were scored at 10 or above in terms of implementation readiness, with only one Australian-based program (School Breakfast Clubs) being implementation ready and effective. The two school-based tutoring programs and a single flexible learning program that are effective and implementation ready are not available in Australia. The effective Australian programs that engage families, promote flexible learning or teacher capacity all need more work to be implemented ready. Decision-makers who prioritise effectiveness and are focused on engaging families, supporting flexible learning, or building teacher capacity have a number of programs available that could be customised and scaled for implementation. The data points (+ and o) themselves reflect the implementation readiness score but the numbers along the x-axis reflect the number of programs available that could be customised and scaled for implementation. Notes: Promising Programs can be represented more than once if they fall across different core actions. The data points (+ and o) themselves reflect the implementation readiness score but the numbers along the x-axis reflect the number of programs available that could be customised and scaled for implementation. While the program has driven evidence of effect, the implementation score was low, suggesting that the information required to adapt and implement the program in a new setting was not available.

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?
Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

In Australia, MinLit aims to improve literacy skills through delivering 80 sessions in small groups to improve reading outcomes for low-performing primary school students. 25%

The Magic Breakfast Club (the Magic Breakfast Club in the UK provides schools with support and resources to deliver effective parent engagement through delivering an online module containing content on effective parent–school–community engagement strategies and practices.

Four Promising Programs targeted the provision of free school meals.

During school closures, education was predominantly delivered via online learning. Three Promising Programs aimed to engage parents/stakeholders talked about the importance of parental support during school closures and home learning. Three Promising Programs aimed to engage parents/stakeholders talked about the importance of parental support during school closures and home learning.

Magic Breakfast Club

The Magic Breakfast Club in the UK provides schools with support and resources to deliver effective parent engagement through delivering an online module containing content on effective parent–school–community engagement strategies and practices.

Table 1: Digital equity core actions and recommendations

<table>
<thead>
<tr>
<th>Priority Action Area</th>
<th>Digital equity core actions and recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Device access</strong></td>
<td>- <strong>Flexible models</strong>&lt;br&gt;- Use of free, low-cost devices for remote learning&lt;br&gt;- Diverse models of technology for different learning needs (e.g. in/outdoor learning)</td>
</tr>
<tr>
<td><strong>Technical support</strong></td>
<td>- <strong>Optimise content for users with diverse needs</strong>&lt;br&gt;- <strong>Affordable, reliable, and scalable internet connection</strong>&lt;br&gt;- <strong>Device access</strong>&lt;br&gt;- <strong>Resourcing</strong>&lt;br&gt;- <strong>Support to teachers</strong></td>
</tr>
<tr>
<td><strong>Affordable, reliable, and scalable internet connection</strong></td>
<td>- <strong>Device access</strong>&lt;br&gt;- <strong>Technical support</strong>&lt;br&gt;- **Training **&lt;br&gt;- <strong>Support for students</strong>&lt;br&gt;- <strong>Support for teachers</strong></td>
</tr>
</tbody>
</table>

Table 1 continues:

| **Access to digital devices** | - **Device access**<br>- **Remote learning: Rapid Evidence Assessment**<br>- **Australian Digital Inclusion Alliance**<br>- **Learning at home during COVID-19: Effects on vulnerable young Australians** |

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?
Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Institute for Social Science Research

There is some evidence from reviews of remote learning programs (Education Endowment Foundation, 2020b). While these are evaluations of interventions for remote learning instead of digital equity per se, building digital literacy among teachers and schools and designing engaging and effective online learning content will be important. However, the Pillar 2 Report noted that government funding for online learning is limited to schools with distance education school accreditation. For most schools, government would not currently provide additional funds to implement the types of reforms currently being recommended.

Priority Action Area 4: Protections for the most vulnerable students

COVID-19 has heightened educational risk factors by placing increased pressure on children and young people already experiencing educational disadvantage, as well as exposing children and young people to educational disadvantage who previously may not have been considered vulnerable. This particularly applies to children and young people in out-of-home care and in contact with the child protection system. Five Promising Programs were identified in this priority Action Area (Figure 11). Four had some evidence of effectiveness. The majority were targeted at more than one system level, and one Promising Program was targeted at the policy level.

Promising Programs were distributed across the following core actions:

- Provision of targeted services for the most vulnerable students.
- Provision of targeted family support.
- Strengthened support networks for children at risk.

Two of the Promising Programs aligned with all three core actions. Three were scored at 10 or above in terms of implementation readiness. There are no Australian-based programs supporting vulnerable students with any evidence of effectiveness (Figure 12). The overseas programs that are both implementation ready and effective are spread relatively evenly across the core actions. If transferred, these programs would need to be evaluated in Australia, but sufficient information is available about implementation to support decision-makers who may be considering them.

Only one program to support vulnerable students had been implemented in an Australian context (LOOKOUT Education Support Centres). LOOKOUT Education Support Centres aim to improve the educational outcomes of children and young people living in out-of-home care, but this program has yet to be evaluated. Programs from the USA that also support students in out-of-home care include the On the Way Home Transition Program and the Multidimensional Treatment Foster Care Model. While both programs show evidence of effectiveness, both had implementation readiness scores of 12 or less, suggesting that further work would be needed to adapt these approaches to the Australian context. Similarly, Social Workers in Schools and Devolved Budgets from the UK also showed evidence of effectiveness, but had implementation readiness scores of 12 and 13 respectively, which signals the need for further work and adaptation prior to implementation in Australia.

The Learning through COVID-19 project stakeholder interviews suggested that COVID-19 had led to both the placement breakdowns and increased numbers of young people entering residential care. While this suggests that action is needed to address these adverse effects of COVID-19, none of the Promising Programs identified in this report would be appropriate for immediate implementation and would first need to be adapted and piloted in an Australian context.

The ‘What Works’ review identified a number of review papers that captured insights across a diverse range of interventions in this Action Area (Hambrick et al., 2016; Krakouer et al., 2017; Nurmatov et al., 2020; Sheehan et al., 2018). However, the quality of the studies included in the reviews was generally low. Several reviews emphasised the need for more rigorous development of evaluation of programs and interventions aimed at reducing the need for out-of-home care.
Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Support for vulnerable children and young people in Australia

There are already a number of organisations within Australia that deliver a range of services and interventions aimed at supporting society’s most vulnerable children and young people. For example, Crave Foundation supports young people in out-of-home care through accessing of educational opportunities.

Knowledge gaps and other opportunities

The previous sections of this report identified priority Action Areas and Promising Programs that were designed to address the impacts of COVID-19 on educational outcomes. Much of the evidence base for solutions has not been tested directly in Australian contexts, particularly in regional or remote contexts. Partnering and co-development are central to effective implementation, particularly in complex environments with vulnerable populations. Programmes have also highlighted the importance of:

- Building the capacity of schools and service providers to implement evidence-informed practices and partnerships across education, non-government and academic sectors to support best practice in implementation and evaluation. Capacity building involves training and skill development to generate and use evidence, and also resourcing. While the immediate response to COVID-19 primarily involved schools and teachers, some actions could put additional pressure on teachers’ workloads and stress and the impact of these will be monitored.

- Recognition that the greatest need is likely to be experienced by those children and young people with existing vulnerabilities and cumulative effects of COVID-19 infections and related intermittent lockdowns or other policy responses that disrupt the learning and the impacts of such programmes.

- Much of the evidence base for solutions has not been tested directly in Australian contexts, particularly in regional or remote contexts. Partnering and co-development are central to effective implementation, particularly in complex environments with vulnerable populations.

- Solutions to promote digital equity, with a systemic and sustainable approach to support evidence and evaluation-informed approaches to service delivery.

- Development and evaluation of approaches to online and mixed learning delivery.

- Development and evaluation of approaches to online and mixed learning delivery.

- Efforts to harness the positive impacts of COVID-19 (e.g. benefits of remote learning for students experiencing mental and physical ill health, increased contact between service providers and some previously disengaged children and families) and to capitalize on the strengths and resilience of children and young people experiencing disadvantage that have been evident during the pandemic.

- Solutions to promote digital equity, with a systemic and sustainable approach to support evidence and evaluation-informed approaches to service delivery.

- Recognition that the greatest need is likely to be experienced by those children and young people with existing vulnerabilities and cumulative effects of COVID-19 infections and related intermittent lockdowns or other policy responses that disrupt the learning environment.

- The remaining gaps in knowledge identified across Pillars 1 to 3 will ideally need to be filled to provide a stronger evidence base from which to address the impact of COVID-19 on educational disadvantage. These include:

  - Investigations of school-level strategies for mitigating effects of COVID-19 and intergenerational among students within schools.
  - Research into attendance levels of children and young people at risk of disadvantage and disengagement.
  - Solutions to promote digital equity, with a systemic and sustainable approach to support evidence and evaluation-informed approaches to service delivery.

- The remaining gaps in knowledge identified across Pillars 1 to 3 will ideally need to be filled to provide a stronger evidence base from which to address the impact of COVID-19 on educational disadvantage. These include:

  - Investigations of school-level strategies for mitigating effects of COVID-19 and intergenerational among students within schools.
  - Research into attendance levels of children and young people at risk of disadvantage and disengagement.
  - Solutions to promote digital equity, with a systemic and sustainable approach to support evidence and evaluation-informed approaches to service delivery.

- The remaining gaps in knowledge identified across Pillars 1 to 3 will ideally need to be filled to provide a stronger evidence base from which to address the impact of COVID-19 on educational disadvantage. These include:

  - Investigations of school-level strategies for mitigating effects of COVID-19 and intergenerational among students within schools.
  - Research into attendance levels of children and young people at risk of disadvantage and disengagement.
  - Solutions to promote digital equity, with a systemic and sustainable approach to support evidence and evaluation-informed approaches to service delivery.
Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Ways forward

A comprehensive response to COVID-19 impacts on educational disadvantage will need to contain a number of elements:

- A multi-pronged set of solutions including solutions from more than one priority Action Area, approached thoughtfully and rigorously in implementation and evaluation.
- Ongoing research into the immediate and longer-term impacts of COVID-19 on the educational outcomes of children and young people, and on the system of educational disadvantage.
- Ongoing development and monitoring of the Learning through COVID-19 Driver Tree.
- Building data assets, systems and platforms to further support research and evaluation.
- Promotion of a public understanding of the systemic nature of educational disadvantage, and the reasons for promoting excellence and equity as goals of the system.
- Ongoing development and monitoring of the Learning through COVID-19 project’s ecological life course model and Driver Tree.
- Tailoring these solutions to work in settings with vulnerable children and young people will require partnering and co-design methodologies with communities and stakeholders. Co-design approaches should consider the different requirements for effective solution development and implementation in context, and teams and methodologies should be co-designed with these communities.
- Interventions should be evaluated for positive and negative outcomes, including negative outcomes to stakeholders in the system. Considering sets of interventions may be one way to address unintended system effects.

The greatest need for support occurs in cohorts and sub-cohorts with multiple risk factors for disadvantage, particularly when these cohorts are concentrated in disadvantaged schools and disadvantaged places. These circumstances are also the ones in which it is hardest to effect change.

Acknowledgements

Thanks are extended to the Paul Ramsay Foundation for their vision and financial support of the Learning through COVID-19 project. Additional thanks to the Paul Ramsay Foundation Learning through COVID-19 project team.

Thanks are also extended to the service providers who supported recruitment of children, young people and their families to participate in Pillar 2 activities; the TASC and NSW Department of Education for the provision of data; the service providers and stakeholders who took part in consultations; and the academic experts who have contributed to the study.

Thanks are also extended to our research partners at the Porter Underwood Centre at the University of Tasmania: Kitty te Rele and Emily Audling.

Finally, thanks are extended to the numerous ISSR personnel who contributed to the KI 5 1 and 2 activities and report: Wojciech Tomaszewski, Sally Staton, Jenny Povey, Sarah Murray, Karen Thorpe, Rhea Vaihiansan, Bronwyn Dilly, Karen Allen-Smith, Olisa Baylus, Tony Schram, Karilyn Bellotti, Lartieta Cokes, Steely Cook, Emma Morgan, Emma Copley, Shelley Des, Zeliinch, Matthias Kubler, Nicole Lakeman, Cassandra Pattinson, Stephanie Plige, Ashar Rehara, Olivia Van Helden, Ning Kung, Tomasz Zajac, Chunhui Zheng, and Gina Naulti.
Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

References


Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Institute for Social Science Research


Appendix 1: Stakeholder consultations

Table A1.1: Academic experts involved in roundtable.

<table>
<thead>
<tr>
<th>Name</th>
<th>Organisation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professor Helen Cahill</td>
<td>The Youth Research Centre, Melbourne Graduate School of Education, The University of Melbourne</td>
</tr>
<tr>
<td>Associate Professor Jess Harris</td>
<td>School of Education, University of Newcastle</td>
</tr>
<tr>
<td>Dr Lesley-Anne Ey</td>
<td>Education Futures, University of South Australia</td>
</tr>
<tr>
<td>Professor Lucas Walsh</td>
<td>Educational Policy and Practice, Youth Studies, Monash University</td>
</tr>
<tr>
<td>Associate Professor Mark Reddel</td>
<td>Faculty of Education, Monash University</td>
</tr>
<tr>
<td>Dr Nina VanDyke</td>
<td>Mitchell Institute, Victoria University</td>
</tr>
<tr>
<td>Dr Jennifer Buitenski</td>
<td>Arts and Social Sciences, University of New South Wales</td>
</tr>
<tr>
<td>Professor Martin Mills</td>
<td>School of Teacher Education and Leadership, Queensland University of Technology</td>
</tr>
<tr>
<td>Professor Kitty McKeite</td>
<td>Peter Underwood Centre, University of Tasmania</td>
</tr>
<tr>
<td>Professor Tim Reddel</td>
<td>Institute for Social Science Research, the University of Queensland</td>
</tr>
</tbody>
</table>

Table A1.2: Service provider stakeholders involved in roundtable.

<table>
<thead>
<tr>
<th>Name</th>
<th>Organisation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dale Murray</td>
<td>Director, Education, Life without Barriers</td>
</tr>
<tr>
<td>Anne Hampshire</td>
<td>Head of Research and Advocacy, The Smith Family</td>
</tr>
<tr>
<td>Shelly Wallrett</td>
<td>Director, Research and Policy Centre, Brotherhood of St Laurence</td>
</tr>
<tr>
<td>Matthew Cox</td>
<td>Director, Logan Together</td>
</tr>
<tr>
<td>Steven Puges</td>
<td>General Manager, RGSS / ARTIE Academy</td>
</tr>
<tr>
<td>Craig McLeay</td>
<td>Chief Operations Officer, Gondar Foundation</td>
</tr>
<tr>
<td>Sally Lazzetti</td>
<td>Principal, Westmead Academy</td>
</tr>
<tr>
<td>Ebony Bridle</td>
<td>School Engagement Manager, Beacon Foundation</td>
</tr>
</tbody>
</table>
Table A2.1. Mapping student mental health, wellbeing and hope.

<table>
<thead>
<tr>
<th>Promising Program</th>
<th>Country</th>
<th>Possible mental health programs</th>
<th>Integrate existing learning models</th>
<th>Engage parents/caregivers on mental health</th>
<th>Build teacher capacity on mental health</th>
<th>System level</th>
<th>Cohort</th>
<th>Implementation Readiness (0-25)</th>
<th>Information available on evaluation design (Y/N)</th>
<th>Evidence of effectiveness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthy Minds</td>
<td>UK</td>
<td>X</td>
<td>X</td>
<td>Student, School</td>
<td>Cohort 2</td>
<td>14</td>
<td>Y</td>
<td>Effective</td>
<td>No evidence</td>
<td>Mixed</td>
</tr>
<tr>
<td>Speech Bubble</td>
<td>UK</td>
<td>X</td>
<td></td>
<td>Student, School</td>
<td>Cohort 1</td>
<td>N/A</td>
<td>Y</td>
<td>No evidence</td>
<td></td>
<td>No evidence</td>
</tr>
<tr>
<td>Supporting Teachers And Children in Schools (STEAM: Incredible Years) Tutor Classroom Management</td>
<td>UK</td>
<td>X</td>
<td>Student, School</td>
<td>Cohort 2</td>
<td>14</td>
<td>Y</td>
<td>No evidence</td>
<td></td>
<td>No evidence</td>
<td></td>
</tr>
<tr>
<td>Incorporation of Little J &amp; Big G</td>
<td>Australia</td>
<td>X</td>
<td>X</td>
<td>Student</td>
<td>Cohort 1</td>
<td>7</td>
<td>Y</td>
<td>Effective</td>
<td></td>
<td>No evidence</td>
</tr>
<tr>
<td>Resilient Families Program</td>
<td>Australia</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>Student, Family, School</td>
<td>Cohort 2</td>
<td>16</td>
<td>Y</td>
<td>Mixed</td>
<td></td>
</tr>
<tr>
<td>Positive Optimism Programme-Positive Thinking Skills (AOP-PTS)</td>
<td>Australia</td>
<td>X</td>
<td>X</td>
<td>Student</td>
<td>Cohort 2</td>
<td>11</td>
<td>Y</td>
<td>Mixed</td>
<td></td>
<td>No evidence</td>
</tr>
<tr>
<td>Friends for Life</td>
<td>Australia</td>
<td>X</td>
<td>X</td>
<td>Student</td>
<td>Cohort 2</td>
<td>14</td>
<td>Y</td>
<td>Mixed</td>
<td></td>
<td>No evidence</td>
</tr>
<tr>
<td>Good Behaviour Game (GBG)</td>
<td>Worldwide</td>
<td>X</td>
<td></td>
<td></td>
<td>School</td>
<td>Cohort 1</td>
<td>13</td>
<td>Y</td>
<td>Mixed</td>
<td></td>
</tr>
<tr>
<td>Resilience Program (RSP), with a Dutch adaptation called the Op Volle Kracht (OVK), and an adaptation in the UK called UK Resilience Program</td>
<td>Netherland, UK, USA</td>
<td>X</td>
<td></td>
<td>Student, School</td>
<td>Cohort 2</td>
<td>15</td>
<td>Y</td>
<td>Mixed</td>
<td></td>
<td>No evidence</td>
</tr>
<tr>
<td>Children’s University</td>
<td>UK</td>
<td>X</td>
<td></td>
<td>Student, School, Community</td>
<td>Cohort 2</td>
<td>18</td>
<td>Y</td>
<td>Effective</td>
<td></td>
<td>No evidence</td>
</tr>
<tr>
<td>Children’s University Australia</td>
<td>Australia</td>
<td>X</td>
<td></td>
<td>Student, School, Community</td>
<td>Cohort 2</td>
<td>9</td>
<td>Y</td>
<td>Effective</td>
<td></td>
<td>No evidence</td>
</tr>
<tr>
<td>Climate Schools</td>
<td>Australia, UK, USA</td>
<td>X</td>
<td></td>
<td>Student, School</td>
<td>Cohort 2</td>
<td>16</td>
<td>Y</td>
<td>Mixed</td>
<td></td>
<td>No evidence</td>
</tr>
</tbody>
</table>

Institute for Social Science Research
Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Table A2.3. Mapping protections for the most vulnerable students.

<table>
<thead>
<tr>
<th>Promising Program</th>
<th>Country</th>
<th>Provide targeted family support</th>
<th>Strengthens support networks for children at risk</th>
<th>Provide targeted services for the most vulnerable students</th>
<th>System level</th>
<th>Cohort/risk group</th>
<th>Implementation Readiness (0-25)</th>
<th>Information available on evaluation design (Y/N)</th>
<th>Evidence of effectiveness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social workers in Schools†</td>
<td>UK</td>
<td>X</td>
<td>School, Community</td>
<td>Cohort 1, Cohort 2</td>
<td>Cohort 3</td>
<td>12</td>
<td>Y</td>
<td>N</td>
<td>Effective</td>
</tr>
<tr>
<td>Devolved Budgets†</td>
<td>UK</td>
<td>X</td>
<td>Policy</td>
<td>Cohort 1, Cohort 2</td>
<td>Cohort 3</td>
<td>13</td>
<td>Y</td>
<td>N</td>
<td>No evidence</td>
</tr>
<tr>
<td>LOOKOUT¥</td>
<td>Australia</td>
<td>X, X</td>
<td>School, Community</td>
<td>Cohort 1, Cohort 2</td>
<td>Cohort 3</td>
<td>8</td>
<td>Y</td>
<td>N</td>
<td>No evidence</td>
</tr>
<tr>
<td>Multidimensional Treatment Foster Care Model¥</td>
<td>USA</td>
<td>X, X</td>
<td>Student, Family</td>
<td>Cohort 1, Cohort 2</td>
<td>Cohort 3</td>
<td>8</td>
<td>Y</td>
<td>N</td>
<td>No evidence</td>
</tr>
</tbody>
</table>

Notes:
- † Primary outcome of the studies included here is number of children and young people entering and re-entering out-of-home care, rather than educational outcomes.
- ¥ Primary outcome=educational engagement.
Appendix 3: Implementation readiness score indicators

Table A3.1. RE-AIM framework indicators.

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reach</td>
<td>Method to identify target population, Inclusion criterion, Exclusion criterion, Participation rate, Representativeness</td>
</tr>
<tr>
<td>Effectiveness</td>
<td>Results for at least follow-up, Intent to treat analysis utilized, Quality of data, potential negative outcomes, Moderation analysis, Percent attrition</td>
</tr>
<tr>
<td>Maintenance - individual</td>
<td>Annual outcomes 6 months post intervention, Qualitative measure of individual-level maintenance, Measures of cost of maintenance</td>
</tr>
<tr>
<td>Adoption</td>
<td>Descriptions of interventions delivered, Descriptions of staff who delivered intervention (target delivery agent), Level of expertise of delivery agent, Inclusion/exclusion criteria of delivery agent or setting, Adoption rate of delivery agent or setting</td>
</tr>
<tr>
<td>Implementation</td>
<td>Intervention fidelity and frequency, Extent protocol delivered as intended, Measures of cost of implementation</td>
</tr>
<tr>
<td>Maintenance - organisational</td>
<td>Indicators of program-level maintenance, Alignment with organisational mission, Measures of cost of maintenance</td>
</tr>
</tbody>
</table>

Note: Some elements (especially adoption and maintenance) can be reviewed prospectively and relate to jurisdictions, context and settings where an intervention might be deployed in the future. For the purpose of this study, all indicators were reviewed with respect to the organisation through which or in which the intervention/program was being delivered.

Appendix 4: Promising Programs key to Figures 8, 10, 12

Table A4.1. Priority Program identification of programs that were considered effective or had mixed effectiveness.

<table>
<thead>
<tr>
<th>Number</th>
<th>Program identification</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Healthy Minds</td>
</tr>
<tr>
<td>2</td>
<td>Beacon Program (implemented at Cressy District High School)</td>
</tr>
<tr>
<td>3</td>
<td>Supporting Teachers And children in Schools: Incredible Years Teacher Classroom Management</td>
</tr>
<tr>
<td>4</td>
<td>Incorporation of Little &amp; Big Coo</td>
</tr>
<tr>
<td>5</td>
<td>Resilient Families Program</td>
</tr>
<tr>
<td>6</td>
<td>Aussie Optimism Programme-Positive Thinking Skills</td>
</tr>
<tr>
<td>7</td>
<td>Friends for Life</td>
</tr>
<tr>
<td>8</td>
<td>Good Behaviour Game</td>
</tr>
<tr>
<td>9</td>
<td>Peer Resilience Program</td>
</tr>
<tr>
<td>10</td>
<td>Children’s University</td>
</tr>
<tr>
<td>11</td>
<td>Children’s University Australia</td>
</tr>
<tr>
<td>12</td>
<td>Thinking Maths</td>
</tr>
<tr>
<td>13</td>
<td>Children’s University Australia</td>
</tr>
<tr>
<td>14</td>
<td>Social Workers in Schools: An Evaluation of Pilots in Three Local Authorities in England</td>
</tr>
<tr>
<td>15</td>
<td>Challenge The Gap</td>
</tr>
<tr>
<td>16</td>
<td>Multidimensional Treatment Foster Care Model</td>
</tr>
<tr>
<td>17</td>
<td>Teach for Australia</td>
</tr>
<tr>
<td>18</td>
<td>Climate Schools</td>
</tr>
</tbody>
</table>

Note: Program numbers relate to Figures 8, 10, 12 in the Report.
Learning through COVID-19: What can be done to maximise educational outcomes for children and young people experiencing disadvantage?

Appendix 5: Example Promising Programs

**Student mental health, wellbeing and hope**

**Example Promising Program: Children's University Australia**

- **Core action:** Encourage parents and carers to take mental health learning and socially connectedness seriously in family life

**Example Promising Program: Resilience First Program**

- **Core action:** Support emotional learning and social connectedness

**Example Promising Program: Healthy Minds**

- **Core action:** Provide mental health support

**Example Promising Program: Inclusion of Little & Big Bugs**

- **Core action:** Build emotional learning and social connectedness

**Example Promising Program: Resilient Families Program**

- **Core action:** Provide mental health support

**The future role of teachers, schools and communities**

**Example Promising Program: School Breakfast Clubs**

- **Core action:** Provide meals

**Example Promising Program: SEDA**

- **Core action:** Provide flexible learning

**Example Promising Program: Teach for Australia**

- **Core action:** Build teacher capacity

Qualitative case study: perceptions of students, self and stakeholders, and recommendations for future programs.

Aims to provide a safe learning environment.

Schools were helped to create a programme that was tailored to their needs.

Incorporating extra-curricular activities into school curriculum.

Aims to ensure that students are able to participate in a safe, supported, and inclusive learning environment.

Aims to provide healthy, affordable, and nutritious meals.

Aims to support the education and professional development of teachers.

Aims to support educational outcomes for all students.

Aims to build a truer role of educational inequality, including through flexible learning programs.

Funded by the Australian Government.

High-achieving students graduate, being placed in occupations that pay high salaries and are well paying.

Community engagement with parents.

Increased engagement with parents.

Increased engagement with parents.

Increased engagement with parents.
Aimed to improve the reading ability of young children struggling with reading.

50 mins/day totalling ~100 hours.

RCT evidence for 2nd/3rd graders:
- Improved reading of real words and non-words.
- Improved reading rate, passage reading and spelling.
- Sustained gains at 1 year follow-up.

Delivered in New York City, so population density and availability of tutors different to regional/remote Australia.

**Core action:**
Provide high-dose tutoring

**Example Promising Program:** Intensive Reading Remediation

21 social workers embedded across 37 primary and secondary schools in 3 pilot areas in UK.

Schools major sources of referrals to Children’s Social Care.

Need for social workers to work more closely with schools to address safeguarding concerns and do statutory work.

All pilots successful in embedding social workers within schools.

Some evidence of reduction in Section 47 (Child Protection) enquiries but not consistent across all pilot sites.

Many interagency working challenges but evidence that collaborative model helped to overcome these issues.

**Core actions:**
- Strengthen support networks for children at risk
- Provide targeted family support

**Example Promising Program:** Social Workers in Schools

Aims to support youths, families, and schools during the reintegration of youth from home, school, and community settings following a youth stay in out-of-home care.

Small-scale study of 44 youths participating in the program.

Youths participating remained in the home or community.

No school dropouts at the last time point.

12-month transition program administered to youths and their families.

**Core actions:**
- Provide targeted services for the most vulnerable students
- Strengthen support networks for children at risk
- Provide targeted family support

**Example Promising Program:** On the Way Home Transition Program

Aims to create opportunities for youth to live successfully in the community.

MTFC is based on social learning theory and aims to target the key factors underlying behavior of the family.

- Improved homework completion.
- Improved school attendance.
- Reduced weapon-handling.
- Improved community connections.
- Improved school attendance.

**Core actions:**
- Provide targeted services for the most vulnerable students
- Strengthen support networks for children at risk
- Provide targeted family support

**Example Promising Program:** Multidimensional Treatment Foster Care Model

**Institute for Social Science Research**

The University of Queensland

Level 2, Cycad Building (1018)

80 Meiers Road, Indooroopilly 4068, Queensland, Australia

+61 7 3346 7471

issr.research@uq.edu.au | issr.uq.edu.au

CRICOS Provider 00025B