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Analysis of Educational Policies on Student Mental Health and Psychological Well-being in School Settings in the Republic of Congo

Yvette BAKINGU BAKIBANGOU

Enseignante chercheure, Maitre-Assistant (Université Marien Ngouabi), République du Congo

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***Corresponding author:** Yvette BAKINGU BAKIBANGOU

Enseignante chercheure, Maitre-Assistant (Université Marien Ngouabi), République du Congo

Abstract

In response to the growing needs related to students' psychological well-being and mental health, this qualitative study was conducted in Brazzaville to assess the response of the Congolese education system. The study involved 26 key stakeholders, including school principals and educational administrators. Data were collected through semi-structured interviews, complemented by an analysis of official policy documents and regulatory frameworks. The content analysis revealed a substantial institutional gap, coupled with a critical operational deficit. This situation is reflected in the near-total absence of school-based counselling units and a significant shortage of specialized personnel trained in student mental health and psychological well-being support. The findings indicate that current educational policies insufficiently address the mental health needs of students within school environments. The study concludes that there is an urgent need to comprehensively rethink educational policies by systematically integrating and strengthening the mental health and psychological well-being components of student support. Priority actions should include the initial and continuous training of educational professionals in student mental health, the establishment of counselling and support units within schools, and the strengthening of coordination among schools, families, and specialized services to ensure effective, coherent, and sustainable support mechanisms.

Keywords: Student support, psychological well-being, student mental health, educational policy, school-based mental health.

1. Introduction

According to the United Nations International Children's Emergency Fund (UNICEF, 2021), one in seven adolescents aged 10 to 19 is affected by a mental disorder. Depression and anxiety account for approximately 40% of diagnosed mental disorders within this age group. Reflecting growing international concern, UNESCO, UNICEF, and the World Health Organization (WHO) jointly issued, in November 2025, a call for strengthened policies and increased investment in children's and young people's mental health and psychological well-being.

Beyond its traditional mission of knowledge transmission, the school constitutes a complex psychosocial ecosystem in which students' social, emotional, and personal development takes place. As such, schools must increasingly function as protective environments and active agents in the promotion and management of student mental health and psychological well-being. In this regard, the National Research Council and the Institute of Medicine (2009) emphasize the unique capacity of schools to deliver large-scale prevention and intervention services, thereby reaching a broader adolescent population than conventional clinical settings.

To address this imperative, education systems worldwide are progressively adopting integrated and multi-tiered models of student support. The most widely recommended framework is the Multi-Tiered System of Supports (MTSS), as documented by several scholars (Bohanon et al., 2021; Marsh & Mathur, 2020; Arora et al., 2019). This framework aims to ensure that each student receives an appropriate level of support, ranging from universal prevention to targeted and individualized interventions.

Despite the existence of legal and regulatory provisions, many school systems continue to show significant shortcomings in their capacity to provide effective psychosocial support. This mismatch between policy intentions and operational realities has been documented by Aniekwu (2009) and Lebrun (2009). Dubet (2018) further highlights that the crisis of the school institution, combined with growing uncertainty about future prospects, exacerbates students' psychological distress and disengagement. Such discrepancies disproportionately affect developing countries.

In the Republic of Congo, although Law No. 25-95 explicitly affirms the state's commitment to students' holistic development, the education system faces substantial institutional and psychosocial challenges. In recent years, a marked increase in school-based violence has been recorded. According to UNICEF data (2020), more than 70% of students' experience multiple forms of violence verbal, physical, sexual, economic, and online with a particularly severe impact on girls. Beyond violence, schools increasingly reflect broader patterns of adolescent psychological distress, including risk-taking behaviours such as tobacco, alcohol, and drug use, as well as involvement in juvenile delinquency. In this context, schools risk becoming spaces of vulnerability rather than protection, highlighting the urgent need for a structured institutional response.

In light of international expectations regarding the integration of psychosocial support within school environments, this study explores the nature of educational policies and institutional mechanisms addressing student mental health within the Congolese education system. The central research question guiding this study is therefore as follows:

Does the Congolese normative framework formally ensure the adequacy and effective implementation of institutional psychosocial support mechanisms required to meet adolescents' mental health and psychological well-being needs?

To contribute empirically to this emerging field of research, the present study is structured around the following specific research questions:

- What educational policies currently in force within the Congolese education system explicitly regulate adolescent mental health and psychosocial support?
- What institutional mechanisms, programs, and human resources are effectively mobilized within schools for the identification and management of adolescent mental health difficulties?

Accordingly, this study aims to assess both the formal adequacy and the operational effectiveness of the current Congolese legal and regulatory framework in relation to student mental health and psychological well-being in school settings. More specifically, it seeks to:

- evaluate the formal integration and practical implementation of student mental health and psychosocial support within Congolese schools;
- identify the institutional, structural, and operational bottlenecks that hinder the effective implementation of psychosocial support mechanisms for students.

This article is structured into four distinct sections:

- The first section establishes the conceptual and theoretical foundations of the analysis;
- The second section presents the methodological approach and research design;
- The third section reports the empirical findings derived from fieldwork;
- The fourth section discusses the results in light of the theoretical framework and concludes with key findings and policy-oriented recommendations.

To structure the analysis and argumentation, this study relies on two core concepts: psychological well-being and mental health. These concepts represent complementary dimensions of a broader state of psychological equilibrium. Baudoin and Galand (2021) define well-being as a multidimensional construct encompassing:

- an affective dimension, characterized by the predominance of positive emotions;
- a cognitive dimension, including life satisfaction and perceived competence;
- the absence of significant pathology.

This notion extends beyond the mere absence of illness and refers to a state of flourishing that enables individuals to fully realize their potential. The World Health Organization (2001) defines mental health as a state that allows individuals to develop, cope with daily challenges, and participate actively in society. In educational contexts, Janin (2017) conceptualizes student mental health as the capacity to meet academic demands, regulate

emotions, and maintain positive interpersonal relationships conducive to learning.

Together, these dimensions form the foundation of holistic development, understood as a continuous process supporting students' physical, cognitive, socio-emotional, and moral growth.

Psychological equilibrium may be disrupted by stress. Drawing on Selye's (1975) General Adaptation Syndrome, individuals are often exposed to excessive adaptive demands. When external stressors become chronic (e.g., financial hardship, adverse physical environments), they may lead to exhaustion and psychological imbalance. According to Lazarus and Folkman's (1984) transactional model of stress, such imbalance occurs when individuals appraise situational demands as exceeding their coping resources. Furthermore, cognitive distortions identified by Beck (1976) and Ellis (1962) may transform adverse or neutral experiences into perceived existential threats, intensifying emotional distress and further undermining psychological well-being.

In school contexts, empirical research consistently demonstrates that student well-being is not an end in itself but a fundamental determinant of academic success. Students who experience emotional security and psychological stability exhibit greater cognitive availability and stronger executive functioning, which are essential for learning. Large-scale studies and meta-analyses (Baudoin & Galand, 2021; Durlak et al., 2011) show that positive mental health is associated with improved academic performance and reduced absenteeism. These studies also indicate that specific teaching practices such as social support, classroom management, and evaluative climate have measurable effects on student well-being.

Ensuring holistic development and sustainable educational outcomes therefore requires positioning student mental health and psychological well-being as foundational pillars of educational policy. The promotion of psychosocial skills and the establishment of a supportive school climate constitute key strategies for strengthening student resilience. Psychological support should not be treated as a peripheral objective, but rather as a central condition enabling students to engage fully in their educational trajectories.

To frame this analysis, two complementary theoretical perspectives are mobilized.

- **Ecological theory of human development (Bronfenbrenner, 1979)**

This theory provides a systemic lens for understanding how environmental contexts influence student development. According to Bronfenbrenner, students develop within interconnected systems:

- the microsystem, encompassing the immediate environment of the student (classroom, family, peer group), where direct interactions and psychological support occur;
- the mesosystem, referring to interactions between microsystems (e.g., school-family relationships), where weak coordination may hinder effective mental health support;
- the exosystem, involving broader institutional structures such as educational policies and community resources

that indirectly influence students and are central to the analysis of institutional gaps;

- the macrosystem, comprising cultural values, social norms, and ideologies that shape the societal positioning of mental health in the Congolese context.

This framework is particularly relevant as it prevents the reduction of mental health issues to individual factors alone and situates them within a broader systemic context.

- **Public policy implementation theory**

Given the policy-oriented focus of this study, the public policy implementation model proposed by Pressman and Wildavsky (1973) is adopted. This model conceptualizes implementation as a linear and rational process led by the state. Policy effectiveness depends on:

- the clarity and coherence of objectives defined by ministerial authorities;
- the capacity of central administration to guide and regulate implementing actors within schools;
- the adequacy of financial and human resources allocated by public authorities to ensure effective implementation at the operational level.

This approach provides a rigorous framework for assessing whether official documents and national directives in the Republic of Congo establish a sufficiently structured basis for the promotion of student mental health and psychological well-being in school settings.

The methodological approach adopted to address these issues is presented in the following section.

2. Methodology

2.1. Research design and Study Population

This study adopts a qualitative research approach. It was conducted in the Department of Brazzaville and involved a purposive sample of 26 key informants, including:

- 16 school principals from primary and secondary schools, selected due to their managerial responsibilities and their role as institutional coordinators within the education system;
- 10 officials from the School Health Directorate, targeted for their technical expertise and operational insight into the implementation of school health programs.

Participants were selected using purposive sampling. Key selection criteria included professional role, institutional function, and years of experience. This sampling strategy was chosen to ensure the relevance and expertise of participants, which are essential conditions for obtaining an in-depth and nuanced understanding of the phenomenon under study.

2.2. Data collection Instruments

Data collection relied on two complementary methodological approaches: documentary analysis and semi-structured interviews.

The documentary analysis involved a systematic review of the main legislative and strategic frameworks shaping the research context. Specifically, the analysis focused on:

- Law No. 25-95 of 17 November 1995, reorganizing the education system;
- The Education Sector Strategy (ESS) 2015–2025 of the Republic of Congo;
- Law No. 18-2018 of 13 December 2018, governing the organization of public health.

Semi-structured interviews were designed to facilitate in-depth and individualized exchanges with each informant. The interview guide was organized around four main thematic areas:

- the policy and organizational framework;
- practical implementation modalities;
- challenges;
- future perspectives.

2.3. Data collection and Analysis Protocol

The data collection process followed a sequential protocol consisting of two complementary phases aimed at triangulating information sources:

- Documentary data collection:

This initial phase involved a rigorous documentary analysis conducted prior to the interviews. It served to contextualize the research problem within its legal and institutional environment and to establish a comprehensive knowledge base of the regulatory framework governing student mental health and psychosocial support in school settings (laws, official reports, and sectoral strategies).

- Interview-based data collection:

Semi-structured interviews were conducted individually with each participant. To ensure a comfortable and confidential exchange, interviews took place in locations chosen by the participants themselves. All interviews were audio-recorded to ensure the completeness and accuracy of the data collected. The average duration of each interview was approximately 45 minutes. The entire data collection process adhered to strict ethical standards. Informed consent was systematically obtained from all participants, and anonymity was ensured through the immediate removal of names and identifying information, in accordance with qualitative research ethics.

Data collected across both phases were subsequently subjected to thematic content analysis, following established qualitative research procedures (Paillé et al., 2016).

3. Results

This section presents the main findings of the study, derived respectively from the documentary analysis and the field interviews.

3.1. Results of the Documentary Analysis

The documentary analysis focused on three key policy and legal texts:

- Law No. 25-95 of 17 November 1995, reorganizing the education system;

- The Education Sector Strategy (ESS) 2015–2025;
- Law No. 18-2018 of 13 December 2018, governing public health organization.

In the Republic of Congo, the education law emphasizes the fundamental principles of the education system. While it guarantees certain rights, such as access to free education, its overall orientation remains traditional. The law primarily focuses on academic structures, performance, and institutional management.

Nevertheless, Article 10 refers to the “holistic development of personality” and the “flourishing of students’ psychological abilities.” These intentions, however, remain largely theoretical. The law does not provide any concrete mechanisms to ensure students’ physical and psychological well-being within school settings.

This legal gap translates directly into practice through a significant lack of resources and qualified health professionals in schools. The acute shortage of structural resources and trained personnel in school psychology leaves students’ specific mental health needs largely unmet.

Moreover, the Education Sector Strategy (ESS) 2015–2025, which is intended to serve as a strategic roadmap, fails to address the shortcomings of the 1995 education law. The structure of the ESS is based on three core objectives:

- access and equity;
- improvement of education quality;
- strengthening governance and financing.

Student health is addressed exclusively from the perspective of basic school health services (medical consultations, vaccinations). Consequently, student mental health is excluded from the strategic framework and benefits neither from a distinct strategic objective nor from dedicated measures or budgetary allocations. The absence of a clear policy directive constitutes a major obstacle to the development and financing of psychosocial support programs in schools.

Law No. 18-2018 of 13 December 2018 provides the legal foundation for the right to health in the Republic of Congo, including mental health. However, despite its importance, this law remains largely insufficient for the education sector. Its primary limitation lies in its lack of specificity and operational guidance. The law establishes a general framework without detailing concrete implementation modalities and does not create any explicit legal obligation to establish school-based psychological services.

Furthermore, the absence of implementing decrees specifically tailored to the education sector perpetuates a persistent legal and practical vacuum. The impact on service provision is direct: the law does not mandate measures to address the shortage of qualified school psychologists, nor does it allocate dedicated funding to integrate mental health into school budgets.

In conclusion, the documentary analysis reveals the existence of a clear but fragmented institutional mandate for action in school-based mental health. A legal and institutional gap is evident, as the education law and the public health law operate in parallel without a clear point of intersection concerning student well-being in school environments. The absence of explicit references to health

and mental health in the education law allows psychosocial support measures to be treated as optional rather than mandatory, thereby undermining their institutionalization and sustainability.

3.2. Results from Interviews

Three major thematic areas emerged from the interview analysis: political will versus normative instrumentation, operational challenges, and pathways for policy reform.

Theme 1: Political Will versus Normative Instrumentation

Table 1: Distribution of findings related to the normative deficit and institutional anchoring of psychological support

Sub-theme	Excerpt from verbatim
1.1. Absence of a specific regulatory framework	«But a specific regulatory text that describes in detail the organization of psychological support in schools... does not yet exist.»
1.2. Status as an 'emerging axis'	«Psychological support is not yet a pillar of our educational policy... It is more of an emerging focus that we are currently developing.»
1.3. Indirect integration approach	«We have initiated a reform of the programs that incorporates concepts of health, well-being, etc. It is an indirect way of providing psychological support.»

Source: Bakingu Survey, 2025.

First, a normative vacuum is evident: the absence of a specific regulatory framework does not legally compel schools to organize psychological support services, directly resulting in territorial disparities in access. Second, psychological support suffers from a non-priority status; it is treated as an “emerging axis” rather than as a structural policy pillar supported by dedicated and protected funding. This lack of recognition compromises both its sustainability and long-term development. Finally, the current insufficient approach forces institutional actors to compensate for this normative void through indirect strategies, such as integrating well-being themes into educational curricula. While valuable, these strategies cannot substitute for structured, specialized, and professional psychological care.

Overall, it is the absence of robust normative and budgetary mechanisms that fundamentally undermines the effectiveness of the school-based psychological support system.

Theme 2: Operational Challenges

This theme is examined through two main dimensions: resource centralization and scarcity, and field-level consequences.

Resource Centralization and Scarcity

Sub-theme	Excerpt from verbatim
2.1. Dependence on the Central Structure (IPP)	« The IPP is the enforcement arm of this policy. Without them, we have virtually no systematic psychological care outside the capital. »
2.2. Severe shortage of specialists	« We need ten times more psychologists to cover even 50% of our institutions. The lack of staff is the main

obstacle. . »

Table 2.1. Shortage of human resources and centralization of the intervention system

Source: Bakingu Survey, 2025.

These findings indicate that the implementation of psychological support within the Congolese education system is hindered by a dual structural constraint. On the one hand, the excessive centralization of resources in the capital generates territorial inequities in access to services. On the other hand, the chronic shortage of qualified mental health professionals makes effective nationwide coverage structurally unattainable.

- Field-level Consequences

Table 2.2. Operational consequences: task shifting and inequalities in access to psychological support

Sub-theme	Excerpt from verbatim
2.3. Frontline amateurism	«Teachers are on the front line without bulletproof vests. They are asked to be psychologists without being given the necessary training.»
2.4. Territorial inequality in access	«For students in the capital, it's the IPP. For students in remote rural areas, it's silence, and sometimes total disengagement from the system.»

Source: Bakingu Survey, 2025.

The analysis of these verbatim excerpts reveals two major operational pitfalls that weaken the education system as a whole. The first is task shifting, vividly illustrated by the metaphor of teachers being “on the front line without a bulletproof vest.” This situation reflects institutional abandonment, whereby teaching staff are implicitly required to assume psychological support roles without appropriate training or structural backing. Such conditions inevitably lead to professional disqualification and significantly increase the risk of burnout.

The second pitfall is the territorial divide. The stark contrast between access to psycho-educational services in the capital and the “silence” experienced in remote rural areas provides compelling evidence of deep inequities. Inefficient centralization results in near-total institutional disengagement in decentralized regions, undermining equity in the right to health and revealing that access to psychological support depends less on public policy than on geographic location.

Theme 3: Pathways for reform: conditions for sustainability and institutional autonomy

Table 3. Strategic levers for the sustainability and transformation of the support model

Sub-theme	Excerpt from verbatim
3.1. Need for a precise regulatory framework	«Until we have a specific decree on the organization and role of each actor in each institution, we will remain in a state of general uncertainty.»
3.2. Urgency of professionalization	«The urgent need is to train our teachers to detect and refer cases correctly. That is the quickest way to make a difference»

3.3. Requirement for protected pillar budgeting and evaluation	«This budget must be ring-fenced. And we need clear indicators to know whether our efforts are really reducing failure and psychological suffering. »
3.4. Vision of school-level autonomy	«True success does not mean overloading the IPP. It means each institution becoming an autonomous prevention unit with its own trained and dedicated resources. »

Source: Bakingu Survey, 2025.

Participants converge on the urgent need for normative and human investment to ensure the effectiveness and sustainability of school-based psychological support. The adoption of a precise regulatory decree is identified as the sine qua non condition for structuring professionalization and establishing an effective territorial network of services. This regulatory clarification is viewed as the most immediate operational lever. The long-term institutionalization of this systemic approach rests on two essential pillars. The first is financial consolidation, achieved through stable and protected budget allocations. The second is the establishment of robust impact indicators, ensuring accountability and the measurable evaluation of outcomes. Ultimately, the strategic objective of this reform trajectory is to achieve institutional autonomy at the school level, enabling each school to manage student mental health and psychological well-being proactively and sustainably.

4. Discussion

This study aimed to assess the formal integration and practical implementation of mental health and psychosocial support (MHPSS) within the regulatory framework governing the Congolese education system. This analytical approach made it possible to identify the key bottlenecks that hinder the operationalization of existing institutional arrangements and limit the provision of effective psychological support to students.

The analysis revealed a profound dissonance between child protection ambitions and implementation effectiveness. The findings are discussed along three main axes: normative inertia, the failure of a centralized operational delivery model, and the identification of strategic levers required for a sustainable and equitable system transformation.

4.1. Normative inertia

The exclusive reliance of student psychological support policies on Law No. 25-95 of 17 November 1995, which reorganizes the education system, is a clear symptom of persistent normative inertia. The notable absence of a specific implementing decree reveals a deficit in institutional prioritization, creating a substantial gap between the stated political ambition namely, free access to education and its concrete regulatory translation. This situation perfectly illustrates the Policy Gap theory, understood as the critical discrepancy between policy formulation and policy implementation (Pressman & Wildavsky, 1973).

This regulatory insufficiency is compounded by budgetary fragility; as psychological support is relegated to the status of a mere “emerging axis” (Result 1.2). Such positioning reflects an unconsolidated priority which, in line with Kingdon’s (1984) work on policy windows, keeps the issue at the level of political intent rather than operational commitment. Moreover, Lee et al. (2020) demonstrate that school-based mental health interventions are not only effective but also feasible in low- and middle-income

countries, despite resource constraints. In light of these findings, this study argues that the scarcity of resources and the lack of strategic consolidation do not stem from technical or financial infeasibility, but rather from a failure to structurally elevate mental health as a political priority.

4.2. Failure of the operational network and social inequity

Our analysis reveals that the current organizational model is undermined by the inherent vulnerability of excessive centralization. Exclusive reliance on the Psychopedagogical Institute (Result 2.1) effectively reduces its role to curative triage. When combined with a severe shortage of specialists (Result 2.2), this structure produces a bottleneck effect that fundamentally contradicts contemporary standards of school health, which emphasize decentralized service delivery and strong preventive components.

This top-down governance model proves incapable of ensuring equitable and timely access to services at the local level. The Psychopedagogical Institute finds itself in a situation consistent with Lipsky’s (1980) theory of street-level bureaucracy, wherein frontline actors are overwhelmed by acute resource constraints, rendering equality of access unattainable and transforming the system into an operational sieve.

The resulting operational deficit does not dissipate; instead, it translates into an institutional risk transfer, which this study considers unacceptable. This transfer manifests through the emergence of an informal boundary-spanning role, whereby psychological responsibility is shifted to untrained teachers (Result 2.3). Teachers are implicitly expected to bridge the gap between educational and psychological institutions without being provided with adequate tools or support. This situation generates a high psychosocial risk, corroborating empirical evidence on occupational burnout (Garcia, 2023). Consequently, the system induces a gradual disqualification of teachers’ core pedagogical role in favor of an unmanaged support functional outcome that constitutes a direct and harmful consequence of the initial normative inertia.

Finally, these dysfunctions entail profound ethical and social implications. Territorial inequality in access to psychological care (Result 2.4) represents a clear violation of principles of social and distributive justice. This finding confirms that overly centralized public policies tend to exacerbate pre-existing disparities. In accordance with Rawls’s (1999) theory of justice, psychological support in this context becomes a geographically contingent privilege rather than a universal right, thereby undermining the equity objectives formally endorsed by national legislation.

4.3. Levers for transformation: towards sustainable Institutionalization

The first strategic necessity lies in restoring a rational hierarchy of resources informed by rigorous cost-benefit analysis. Stakeholders’ calls for a “ring-fenced” budget dedicated to psychosocial support (Result 3.3) are strongly supported by contemporary economic evaluations. Analyses conducted by international organizations such as the WHO (2016) and the OECD (2021) demonstrate that early investment in mental health yields substantial long-term economic returns. These benefits materialize through reductions in costs associated with school failure, juvenile delinquency, and reliance on tertiary healthcare services. Consequently, ensuring the sustainability of financial resources

allocated to psychosocial support is not only a social obligation but also a strategic economic imperative.

The second essential transformation concerns professionalization and the adoption of a Whole School Approach. Teacher training (Result 3.2) and the promotion of school-level autonomy (Result 3.4) are fully aligned with this model, which posits that improvements in student well-being require coordinated engagement from all stakeholders' students, educational staff, parents, and school leadership and the integration of services within the school environment itself. The objective is not to disengage the State, but rather to foster collective competence in prevention and referral, thereby strengthening system resilience in the face of persistent shortages of specialized professionals.

The Whole School Approach also constitutes a concrete application of Bronfenbrenner's Ecological Theory of Human Development (1979). By enhancing the school environment, it directly intervenes at the microsystem level of the child's immediate context. By reinforcing school family collaboration, it strengthens the mesosystem. Finally, by requiring formal institutionalization through legislation and dedicated budgeting, it positively influences the exosystem (institutional structures) and the macrosystem (normative and ideological frameworks), ensuring that the political and socio-economic environment sustainably and equitably supports the holistic development of the child.

Conclusion and Policy Recommendations

The analysis highlights a systemic fragility of psychological support in school settings, primarily driven by a major policy gap. This gap manifests as a discrepancy between the political recognition of student well-being as a component of educational "quality" and the absence of structured normative and budgetary mechanisms to support its effective implementation.

This form of policy inertia leads to the failure of the operational delivery network, characterized by excessive centralization around the Psychological and Psychosocial Intervention Unit (IPP) and an inequitable transfer of responsibility onto unprepared teaching staff. As a result, territorial inequalities in access to psychological care persist, transforming psychological support from a universal right into a geographically contingent privilege.

To overcome this institutional paralysis, a dual strategic approach is required:

- the adoption of a specific implementing decree, accompanied by a dedicated "pillar" budget, in order to structurally institutionalize school-based mental health and psychosocial support;
- the implementation of a Whole School Approach, aimed at strengthening school-level autonomy through the systematic training of educational staff and the integration of prevention and referral mechanisms within schools.

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