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Emotional Intelligence Education in Primary Schools: A Strategy for Post-Pandemic Recovery

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ABSTRACT

Purpose

The study investigates the influence of Emotional Intelligence Education (EIE) and Social-Emotional Learning (SEL) Integration on facilitating post-pandemic adjustment among students in elementary schools, including the moderating role of School Healthcare Support Systems (SHSS). Closing an urgent research vacuum in educational recovery, the study emphasizes the dynamic interaction between emotional, social, and institutional support in developing resilience in early learners after the COVID-19 disruptions.

Design/Methodology/Approach

A quantitative design was employed, and a five-point Likert scale structured questionnaire was given to 260 primary school students in Grades 3 to 5. Analysis was conducted on SPSS software using descriptive statistics, Cronbach's alpha reliability test, exploratory factor analysis (EFA), Pearson correlation, and multiple regression. PROCESS Macro plugin was employed to examine the moderation role of SHSS.

Findings

Results of regression analysis indicate that EIE ($\beta = 0.828$) is the most significant impact on post-pandemic adaptation of the students, followed by SEL Integration with post-pandemic adaptation of the students ($\beta = 0.6$). Furthermore, SHSS is an essential moderator ($\beta = 0.350$) in boosting the positive relationship between SEL practice and adaptation of the students, and thus depicting the necessity for institutional healthcare infrastructures for the maximum socioeconomic outcomes from socio-emotional learning.

Originality/Value

Research places EIE and SEL as singular pillars of post-pandemic school recovery in elementary education, extending beyond mere academic remediation to emphasize overall development. Integrating Social Cognitive Theory and Ecological Systems Theory, the research provides a three-dimensional model that supports the interconnection of student competencies,

emotional school practices, and institutional school health supports. This approach contributes to theoretical discourse and offers policymakers, teachers, and school healthcare providers valuable strategies for the resurgence of resilient and adaptive education systems.

Keywords: Emotional Intelligence Education; Social-Emotional Learning; Post-Pandemic Student Adjustment; School Healthcare Support Systems; Educational Resilience

1. Introduction

Post-pandemic pupil adaptation in primary schools entails stubborn education loss, social disruption and rising mental-health threat. In Assam, pupils lost nine months of numbers and eleven of language knowledge, with anxiety elevated on continuing (Guariso & Björkman Nyqvist, 2023). UK interviews show that missing forms of passage worsened sadness, stress and behavior during primary-secondary transition (Bagnall, Skipper, & Fox, 2022). Dutch population data confirm internalizing problems remain above pre-COVID starts in 2023 (Hedy et al., 2023). These collecting findings advise that adjustment is not a simple catch-up task without integrated social emotional courses, sustained internal-health surveillance and just resourcing, recovery efforts may boost inequity and lodge psychosocial damage.

Pandemic-period evidence links emotional capability to adaptation yet reveals effectiveness gaps. Lockdown cut Spanish pupils' EI, hampering recovery (Martín - Requejo & Santiago - Ramajo, 2021). A rural Chinese SEL trial produced limited, short-term mental problem earnings (Li & Hesketh, 2024). Most work ignores definite EIE content, moderating effects of academy - health systems, and long follow-ups. Our study fuses targeted EIE with SEL, models healthcare moderation, and tracks cohorts across an academic year to address these gaps.

Existing exploration has underlined the vital part of emotional intelligence education and the integration of social and emotional learning in helping primary academy students recover after the pandemic. For example, Checa-Domene et al. (2022) set up that educating emotional skills reduced psychological distress and strengthened pupils' engagement as they returned to academy. Likewise, Cefai et al. (2018) stressed the significance of nurturing emotional and social capabilities to support scholars' internal good in broken learning surroundings. However, numerous studies still treat these elements independently, overlooking how they interact and ignoring the influence of school-based healthcare support. This paper proposes a more holistic approach, exploring the combined impact of emotional education and social-emotional knowledge, while recognizing how the presence or absence of school health systems can shape student recovery. In light of the current gaps in scholarly understanding and the pressing demand for holistic recovery frameworks within primary education, this study aims to fill deeper into the dynamic relationship between emotional intelligence education, the integration of social and emotional learning, and the contextual influence of academy-based support systems. To provide a clear direction for this inquiry, the exploration is guided by the following questions:

- i. How does emotional intelligence education influence postpandemic adjustment among primary school students?
- ii. What effect does the integration of social and emotional learning have on students' post-pandemic recovery?
- iii. In what ways does the school healthcare support system shape the relationship between social-emotional learning and student adjustment?

The research objectives are not only timely but also deeply relevant

to the realities faced by schools. Unlike previous studies that frequently examined these areas in isolation or through short-term airman programs, this research embraces a more predicated and systemic perspective. By focusing on how emotional intelligence education and social-emotional education work together, and how their impact is influenced by the support systems available within schools, the study introduces an important-demanded layer of depth. It acknowledges that meaningful recovery is not solely about curriculum content, it also depends on whether seminaries are equipped to support scholars' emotional good on a basis. This nuanced approach aims to generate practical insights for teachers and policymakers who are seeking to rebuild more caring, flexible, and emotionally safe knowledge surroundings.

2. Literature Review

Student adaptation refers to the psychological, emotional, social, and academic adaptation that learners suffer in response to new or changing surroundings (Baker & Siryk, 1986). It encompasses the capability to manage with academy-related demands, form positive peer connections, and maintain emotional stability. In the environment of the COVID-19 epidemic, this conception has evolved into post-pandemic student adjustment, which highlights scholars' capacity to re-engage with education, reestablish social connections, and manage emotional and mental health challenges following prolonged dislocations in education (Loades et al., 2020).

From a humanistic perspective, post-pandemic pupil adaptation reflects the broader idea of education to support the holistic development of the child. The humanistic model emphasizes the significance of nurturing not only cognitive capacities but also emotional and social growth. Therefore, fostering post-pandemic adaptation is not simply a response to extremity but a moral and experimental imperative that empowers scholars to reach their full eventuality in a redefined knowledge environment.

The significance of post-pandemic student adjustment lies in its central part in rebuilding learning durability, promoting psychological adaptability, and preventing long-term social-emotional difficulties. Emerging exploration reveals that scholars returning to academy after COVID-19 closures displayed increased anxiety, reduced attention spans, and weakened peer connections (Rashid et al., 2022). This adaptation is especially critical in primary education, where early experimental disruptions can have lasting impacts on academic achievement and well-being.

A powerful example comes from Victoria, Australia, where the Melbourne Life Course study followed thousands of children through the height of the COVID-19 crisis. Researchers found that more than 40 percent of primary school students experienced serious emotional difficulties during lockdowns, including prolonged sadness, heightened anxiety, and increased behavioral challenges. Even months after schools reopened, many children continued to struggle with focus, motivation, and social connection. However, the study also revealed a hopeful insight: in schools that embedded emotional development into their daily routines and actively

involved parents in the recovery process, students showed a much faster return to emotional balance and classroom engagement (Goldfeld et al., 2022). This case illustrates how strategic emotional support within the school environment can make a decisive difference in helping young learners rebuild their sense of safety, trust, and belonging.

2.1. Anchoring The Theoretical Framework

2.1.1. Social Cognitive Theory

Social Cognitive Theory provides an effective lens through which the processes of learning, emotional development, and behavioral adaptation in children can be understood (Bandura, 1986). This proposition emphasizes the complementary dealings between particular factors, behavioral patterns, and environmental influences. In the environment of primary education, especially in the consequence of the COVID-19 affection, this frame offers rich illustrative power for how emotional intelligence education and the integration of social and emotional learning foster student recovery and adaptability.

Within this theoretical view, students do not learn emotional regulation and social experience in isolation but through observing the actions and emotional responses of influential role models, particularly instructors (Bandura & Walters, 1963). When teachers demonstrate empathy, emotional self-awareness, and formative managing strategies, pupils internalize these actions, gradually shaping their own capacity for emotional regulation and interpersonal connection. This process, known as vicarious knowledge, becomes especially vital in apost-pandemic environment where students must relearn how to interact, trust, and self-regulate within a structured school setting.

The role of self-effectiveness, a central construct in Social Cognitive Theory, further reinforces this dynamic. When scholars observe successful emotional actions modeled consistently by grown-ups, and admit stimulation through feedback and reflection, their belief in their own capability to manage feelings and navigate social challenges increases (Bandura, 1986). This confidence becomes foundational to their overall adaptation, impacting academic engagement, social commerce, and emotional well-being.

Empirical findings have affirmed these connections. A study conducted in Spanish primary schools demonstrated that educator modeling of emotional strategies significantly enhanced scholars' emotional self- effectiveness, which in turn led to reduced anxiety and increased engagement after academy continuing (Yang, 2021). The proposition therefore, helps to explain how emotionally supportive surroundings based on consistent modeling and reinforcement can contribute meaningfully to the recovery and holistic development of young learners in the post-pandemic period.

This theory rests on the supposition that children acquire emotional and social capabilities through observation and commerce with emotionally competent grown-ups. It presumes that teachers serve as meaningful part models whose actions are constantly reinforced within a supportive academy climate. Furthermore, it assumes that scholars are cognitively able to reflect on these compliances, rephrasing them into particular strategies, and building emotional self- effectiveness over time. It also assumes that students are motivated to develop these capabilities when their environment nurtures and rewards similar growth.

2.1.2. Ecological Systems Theory

Ecological Systems Theory offers a multidimensional framework for understanding child development through the interplay of colorful environmental surroundings (Bronfenbrenner, 1979). This theory

posits that human growth and adaptation happen through relations within and between nested systems, ranging from the immediate influences of home and academy to the broader forces of community, policy, and culture. Applied to the process of post-pandemic student adjustment, this perspective allows for a deep exploration of how emotional intelligence education and social-emotional learning practices are influenced by and embedded within wider institutional and societal dynamics.

At the core of this theory is the microsystem, where children experience direct interactions with teachers, peers, and parents. These daily encounters are where emotional education is most immediate and particular. When classrooms are invested with emotionally intelligent instruction and peer collaboration, students experience a sense of safety, addition, and empathy that supports their capability to readjust after extended ages of isolation and disruption (Mahmud, 2022).

Beyond this, the ecosystem reflects the connections between different microsystems, such as the communication between academy and family. Strong collaboration in this layer enhances thickness in emotional messaging and expectations, reinforcing emotional knowledge across settings. The ecosystem introduces external institutions that indirectly affect the child, most specially the school healthcare support system. When seminaries give access to mental health professionals, emotions, or supportive services, they create an environment that facilitates the successful application of emotional learning strategies (Mahmud, 2022).

The broader macrosystem involves cultural attitudes, programs, and societal norms that either encourage or constrain emotional development in seminaries. In many countries, the pandemic urged a reevaluation of internal health and emotional knowledge, impacting public recovery strategies and class reforms. Finally, the chronosystem acknowledges that the COVID-19 affection was a profound temporal disruption. The long-term goods of this disruption are still unfolding and require sustained, multilayered interventions that evolve with scholars over time.

Recent exploration lends strong support to this theoretical approach. A study by Mahmud (2022) set up that the effectiveness of social-emotional scholarship programs significantly increased in seminaries with robust school-based healthcare systems. Similarly, Egan and Pope (2022) argued that policies addressing post-COVID educational recovery must account for interconnected systems of influence, from classroom practices to national mental health responses. These findings emphasize that emotional recovery and adjustment are not isolated processes but rather the result of well-orchestrated systems that work together to nurture the whole child.

Ecological Systems Theory assumes that children develop within a web of connected systems that impact their emotional, social, and academic circles. It presumes that the effectiveness of emotional education depends not only on individual instruction but also on the alignment of probative factors across family, academy, community, and policy situations (Egan & Pope, 2022). This proposition also assumes that changes in one part of the system can ripple across others, and that the pandemic represents a critical life event that reshapes experimental pathways, demanding cross-system collaboration.

2.2. Foundational Pillars of Emotional and Social Adaptation

2.2.1. Emotional Intelligence Education (EIE)

Emotional Intelligence Education (EIE) is conceptualized as a pedagogical approach that totally nurtures students' complement to

recognize, explain, regulate, and express feelings effectively across interpersonal and intrapersonal disciplines (MacCann et al., 2020). Drawing upon the foundational principles of the CASEL frame, EIE emphasizes capabilities similar to self-awareness, emotional regulation, empathy, relationship-building, and ethical decision-making (Durlak et al., 2011). In a post-pandemic educational geography characterized by socioemotional insecurity and disrupted learning circles, EIE has surfaced not simply as a supplemental strategy but as a central pillar in fostering sustainable adaptation and psychosocial recovery among children.

The significance of EIE can be interpreted through both philosophical and profitable lenses. Philosophically, its value aligns with the human capital perspective, wherein emotional ability is not only natural to particular well-being but also necessary in contributing to social cohesion and adaptive functioning (Becker, 1964). In the aftermath of the COVID-19 pandemic, educational systems around the world have grappled with unprecedented emotional turbulence among children. School closures, social isolation, and prolonged uncertainty have impaired children's capacity to engage, trust, and self-regulate. EIE becomes a linchpin in educational recovery, offering pathways for rebuilding emotional security, restoring interpersonal trust, and reengaging learners both socially and academically (Mahmud, 2022). From a profitable viewpoint, robust emotional education programs have demonstrated long-term social returns through better student issues, reduced behavioral disruptions, and decreased societal costs associated with internal health interventions (Taylor et al., 2017).

When EIE is strategically enforced with thickness, pedagogical alignment, and institutional support, it can considerably enhance scholars' emotional self-edge, adaptability, and engagement. Similar improvement plays a crucial part in navigating the cerebral issue of COVID-19. Empirical exploration has shown that learners exposed to emotionally responsive instruction and educator modeling are more equipped to manage anxiety, rebuild peer connections, and restrict themselves into academic routines (Jennings & Greenberg, 2009). Furthermore, emotionally enriched learning surroundings foster the cerebral safety necessary for post-crisis adaptation to take root and flourish (Nkomo et al., 2021). Furthermore, emotional regulation capacities acquired through EIE help students navigate social tensions, manage frustration, and adapt to shifting routines, thereby promoting stable re-adjustment over time.

Nevertheless, scholarly converse remains divided concerning the importance of EIE's effect on post-pandemic student adjustment. Several studies have provided compelling evidence for its transformative impact. Rivers et al. (2012), for instance, reported substantial advancements in both emotional well-being and academic provocation among scholars who shared in comprehensive emotional education programs. Their findings suggest that EIE, when integrated as a core element of educational programming rather than as a supplementary or isolated intervention, can foster substantial earnings in both socio-emotional and cognitive disciplines. These results are especially pronounced in surroundings where EIE is supported by trained preceptors, executive commitment, and alignment with academy-wide values, pointing to its eventuality as a transformative agent in post-pandemic recovery.

These diverging perspectives emphasize a theoretical and empirical pressure that justifies further inquiry. The present study responds to this discourse by proposing the following hypothesis:

H1: Emotional Intelligence Education appreciatively influences Post-Pandemic Student Adjustment in Primary Schools.

2.2.2. Social Emotional Learning Integration

Social Emotional Learning Integration refers to the purposeful and sustained infusion of core emotional and interpersonal capabilities such as self awareness, emotional regulation, empathy, collaborative communication, and responsible decision making into the curricular, pedagogical, and relational practices of the school context (Durlak et al., 2011). Rather than treating social and emotional development as a supplemental ideal, SEL Integration positions it at the heart of educational practice, rooted within daily instruction, classroom culture, and seminary wide programs. This approach is embedded in holistic educational philosophy, which supports nurturing the whole child by integrating cognitive, emotional, and social range of development. From an economic perspective, SEL Integration enhances the long term effectiveness of educational systems by reducing correctional incidents, improving classroom climate, and fostering student engagement, thereby adding the return on investment in natural capital (Taylor et al., 2017).

In consequence of the COVID-19 affection, where many students endured emotional disruption, academic regression, and social disconnection, the integration of social emotional learning emerged as a foundation of recovery strategies. By embedding emotionally responsive practices into everyday instruction, SEL Integration helps rebuild psychological safety, strengthens peer connections, and supports adaptability among young learners (Mahmud, 2022). A comprehensive meta-analysis by Durlak et al. (2011) involving over 270,000 pupils demonstrated that academy grounded SEL programs significantly improved social behavior, emotional regulation, academic achievement, and reduced cerebral distress. These effects were most profound when SEL was enforced by classroom teachers and integrated constantly within academic content. The results support experimental psychology frameworks that emphasize the significance of repeated, contextually meaningful emotional learning in promoting adaptive functioning and sustained adaptation.

Despite promising evidence, academic discourse continues to debate the strength and thickness of SEL Integration's impact. Some experimenters affirm its transformative eventuality, arguing that robust SEL practices lead to meaningful and enduring issues in both academic and emotional disciplines (Taylor et al., 2017). In contrast, through a meta-analysis of primary seminaries in South Korea reported that SEL programs demonstrated only moderate efficiency when implementation demanded structural balance, instructor readiness, or artistic alignment. Predicated on these theoretical perceptivity and empirical findings, the following thesis is proposed:

H2: The continuous and comprehensive integration of socialemotional learning practices into the primary education system significantly enhances students' ability to recover and adapt appreciatively in the post-pandemic educational landscape.

2.2.3. School Healthcare Support System

The construct of school healthcare refers to systematic access to physical and mental health services provided within educational settings. These services range from preventive screenings and wellness education to counseling and crisis management. When organized into a cohesive infrastructure, supported by explicit policies, trained professionals such as school nurses and psychologists, coordinated referral systems, and ongoing wellness initiatives. It becomes what is here defined as a School Healthcare Support System (Anderson et al., 2020). Drawing on the socioecological model of human development, this system situates student wellbeing within a multi-layered context. It reflects the belief that healthy learning environments depend not only on academic instruction but also on institutional capacity for emotional

and physical care. From a philosophical perspective rooted in communitarian ethics and humanistic care theory, schools emerge not just as knowledge creators but as communities responsible for holistic child development. Economically, evidence suggests that embedding health supports in primary education contributes to reduced chronic absenteeism, enhanced concentration, fewer disciplinary incidents, and long term savings in healthcare expenditures (U.S. Department of Education, 2021). These benefits are particularly salient in post-pandemic settings, where students have experienced elevated levels of anxiety, fragmented routines, and diminished peer cohesion.

In this framework, the School Healthcare Support System serves as a moderator to the effects of Social Emotional Learning integration on Post-Pandemic Student Adjustment. Social Emotional Learning instruction equips students with awareness of emotions, relationship skills, empathy, and regulation strategies. Yet without accessible and responsive health supports, these competencies may be insufficient to address deeper or emergent psychological needs. Anderson et al. (2020) emphasize that during the COVID-19 crisis, adolescents benefited most from mental health services when school-based health centers collaborated closely with educators to provide screening and support tied to classroom interventions. Similarly, Mitchell et al. (2023) found that schools which transitioned core services online or through telehealth maintained essential support for youth at risk during closures, thereby sustaining SEL gains. Yet their analysis also noted that connectivity issues and limited telehealth infrastructure reduced effectiveness for many students, creating inequities in recovery.

A growing body of empirical research highlights the crucial mediating role that school healthcare systems play in enhancing the effectiveness of social-emotional learning within post-pandemic recovery efforts. A meta-analysis by Barry et al. (2013) found that while school-based healthcare undeniably enhances SEL impact, comparable levels of emotional adjustment were sometimes observed in communities with strong family engagement or robust community mental health resources, suggesting that the moderating effect of healthcare infrastructure may be contingent on contextual and cultural variables. Further support for this nuanced perspective comes from an intervention study by Dowling and Barry (2020), which demonstrated that primary schools implementing SEL with strong fidelity particularly when supported by school health professionals experienced improved student wellbeing and reduced absenteeism. In contrast, schools with lower quality implementation and without such support showed only modest improvements.

Highlighting the ethical implications behind these findings, a systems justice framework positions school-based health supports not only as efficient mechanisms but as moral imperatives in public education. Children dealing with trauma and anxiety in the wake of COVID-19 deserve institutional environments that recognize and address their emotional needs. Without such structures, they may be left behind regardless of curricular innovations. Economically, the investment in school healthcare systems aligns with the concept of investing in human capital. It can yield dividends through improved attendance, reduced behavioral referrals, enhanced academic achievement, and lower mental health burdens later in life. Considering both theoretical perspectives and empirical evidence, the following hypothesis is proposed:

H3: The presence of a comprehensive School Healthcare Support System significantly strengthens the positive association between Social Emotional Learning Integration and Post-Pandemic Student Adjustment.

Anchored in solid theoretical underpinnings, this study advances scholarly discourse by introducing the following conceptual framework:

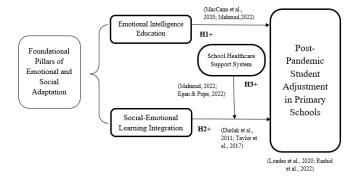


Figure 1. The Paper's Conceptual Framework (Authors, 2025)

3. Methodology

3.1. Research approach and strategy

The present study adopted a quantitative research design in investigating the roles of Emotional Intelligence Education (EIE) and Social-Emotional Learning (SEL) integration in post-pandemic adjustment among primary school children. As Creswell and Creswell (2018) argue, the quantitative design is strongly suited to research seeking to measure variables and establish statistical relationships. The design was deductive in nature, commencing with the formulation of hypotheses from theoretical and empirical literature and then proceeding to test them using structured data collection and statistical analysis. Two hypotheses were specifically tested in the research: that Emotional Intelligence Education has a positive influence on post-pandemic student adjustment in primary schools, and that the continuous and widespread integration of social-emotional learning practices has a significant influence in enhancing the students' adaptive capacity in the post-pandemic school environment. By utilizing this approach, the research sought to yield generalizable findings that inform theoretical understanding and also education recovery practical solutions.

3.2. Sampling technique and procedure

The study sample population was primary school children of Grades 3 to 5, as this age group is developmentally capable of reporting and is also of specific interest to emotional as well as social-emotional interventions. Probability sampling design was employed to maximize representativeness and reduce bias, as recommended by Bryman (2012). Cluster random sampling was also employed at the class level with the classes as natural clusters, from where random selection of students within every chosen cluster was done. Following Krejcie and Morgan's (1970) sample size determination guidelines for social and behavioral research, a minimum of 260 respondents were found to be adequate. Stratification was also applied to control for school type and gender to enhance the validity of the results. Parental informed consent and student assent were applied to enrollment, with confidentiality and voluntary participation ensured throughout the process.

4. Results

4.1. Reliability analysis

Table 1: Reliability analysis of the dependent variable. Source: (The authors, 2025)

Reliability Statistics					
Cronbach's Alpha N of Items					
.779	4				

Item-Total Statistics							
Scale Mean if Item Deleted Scale Variance if Item Deleted Corrected Item-Total Correlation Cronbach's Alpha if Item							
PSA1	6.554	8.612	.665	.672			
PSA2	8.756	5.609	.702	.711			
PSA3	8.993	6.465	.686	.699			
PSA4	8.030	7.407	.664	.674			

With PSA1 to PSA4 representing survey questions 1 through 4 on post-pandemic adjustment among primary school students

As shown in Table 1, each dependent sub-variable reported an adjusted item-total correlation coefficient of at least 0.3. The overall Cronbach's alpha was 0.779, surpassing the generally accepted minimum of 0.7 and remaining higher than any value that would have resulted from deleting individual items. Moreover, every subvariable exhibited a Cronbach's alpha greater than its respective adjusted item-total correlation, even when items were hypothetically excluded. Consequently, all items were retained for further analysis. Comparable patterns of reliability were also identified across the Cronbach's alpha values of the other variables.

4.2. Exploratory factor analysis (EFA)

Table 2: Rotated Component Matrix. Source: (The authors, 2025)

Rotated Component Matrix ^a							
Component wi	Component with loading factors						
1	2	3	4				
PSA1 .605	EIE1 .651	SEL1 .715	HS1 .659				
PSA2 .684	EIE2 .646	SEL2 .619	HS2 .729				
PSA3 .773	EIE3 .782	SEL3 .672	HS3 .623				
PSA4 .660	EIE4 .709	SEL4 .680	HS4 .615				

Extraction Method: Principal Component Analysis.

Rotation Method: Varimax with Kaiser Normalization.

a. Rotation converged in 7 iterations.

Where survey items EIE1-EIE4, SEL1-SEL4, and HS1-HS4 correspond to questions 1-4 that assessed the moderator and the two independent variables. As indicated in Table 2, the rotated component matrix successfully organized the 16 sub-variables into four distinct constructs, reflecting the dependent variable, the two independent variables, and the moderator. Each sub-variable showed a factor loading above 0.5, and none were removed during the factor analysis process.

4.3. Multiple linear regression model

Table 3: Coefficients^a. Source: (The authors, 2025)

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		В	Std. Error	Beta		
1	(Constant)	7.208	.968		4.554	.000
	EIE	.835	.816	.828	3.363	.000
	SEL	.627	.532	.600	3.900	.004
	•	a. Der	endent V	ariable: PSA		•

Were,

PSA: mean of PSA1 to PSA4;

EIE: mean of EIE1 to EIE4;

SEL: mean of SEL1 to SEL4

As shown in Table 3, the t-test results yielded significance (Sig.) values of .000 and .004, both of which are below the standard alpha threshold of 0.05. This demonstrates that the independent variables exert a statistically significant influence on the dependent variable. Consequently, both hypotheses are supported.

4.4. Moderator analysis

Table 4: Results analysis of "School healthcare support system".

Source: (The authors, 2025)

Model : PSA X : SEL W : HS Sample Size: 260

: 1

OUTCOME VARIABLE:

PSA

Model Summary

R	R-sq	MSE	F	dl1	dl2	p
.806	.650	.637	6.218	3.000	381.000	.000

Model

· · · · · · · · · · · · · · · · · · ·						
	coeff	se	t	p	LLCI	ULCI
constant	7.442	.813	59.332	.000	7.369	7.258
PSA	.685	.409	4.252	.000	.764	.738
HS	.672	.588	4.356	.000	.765	.699
Int_1	.350	.777	4.953	.000	.701	.687

Where **HS**: mean of HS1 to HS4

As reported in Table 4, the p-value associated with the interaction term (Int_1) is 0.000, which is far below the conventional significance level of 0.05. This result verifies a statistically significant interaction between School healthcare support system and the integration of social and emotional learning in determining post-pandemic adjustment among primary school students. The interaction coefficient of 0.350 indicates that greater School healthcare support system strengthens the positive effect of the integration of social and emotional learning on post-pandemic adjustment among primary school students. Hence, hypothesis H3 is

validated.

5. Discussion

5.1. Summary Results

The findings of linear regression reveal Emotional Intelligence Education has the greatest level of influence (0.828) on the Post-Pandemic Student Adjustment, and Social-Emotional Learning Integration does have a significant influence (0.6) on Post-Pandemic Student Adjustment. Also, the moderating variable of the Relationship between Social-Emotional Learning Integration and Post-Pandemic Student Adjustment is School Healthcare Support System with coefficient of 0.35.

5.2. Theoretical implication

This study concludes that Emotional Intelligence Education (EIE) contributes most to post-pandemic student adjustment, with a regression coefficient of 0.828, thereby confirming the hypothesis that EIE is positively associated with primary students' resilience. This result highly concurs with Rivers et al. (2012) and Jennings and Greenberg (2009), who believed that emotionally sensitive instruction and systematic EIE programs enhance psychological resilience and school engagement. The magnitude of the effect reported here ensures that EIE not only comes as an add-on but should feature as a central component of post-pandemic recovery initiatives. At the same time, findings vary from Martín-Requejo & Santiago-Ramajo (2021), which observed that pandemic-triggered disruptions limited EI development effectiveness, suggesting that contextual unpredictability may reduce program performance. The existing evidence contradicts such a pessimistic outlook, as it indicates that when integrated into classroom practice systematically, EIE has the potential to surmount environmental barriers and realize sustainable adaptation. This work thus aligns with transformational perspectives that consider EIE as a keystone to recovery (Mahmud, 2022) and contradicts claims that its effects are temporary or superficial.

The results confirm that Social-Emotional Learning (SEL) Integration enhances post-pandemic adaptation of students through a regression coefficient of 0.6, supporting the second hypothesis. This concurs with Durlak et al. (2011), whose meta-analysis confirmed long-term academic as well as socio-emotional benefits of SEL when implemented large scale across curriculums. The most recent evidence therefore, concurs in part with Taylor et al. (2017), who underscored the long-term developmental benefits of SEL, yet also modulates their claim by showing that the strength of the effect, though large, is smaller than that of EIE. Most importantly, the findings contradict the more negative assessment asserting that SEL has limited effects where its implementation is irregular or culturally inappropriate. In this study context, SEL Integration proved to be more robust and suggests that structural barriers can be overcome by strong institutional embedding. Hence, the study confirms the transformational potential of SEL Integration but appreciatively acknowledges that its relative effect, as tremendous as it is, could be a secondary consequence of purposefully directed EIE in achieving integrated recovery.

School Healthcare Support Systems (SHSS) is a moderator in the analysis, and its coefficient is 0.35, as SHSS increases the positive impact of SEL Integration on post-pandemic adaptation. This fact proves the argument of Anderson et al. (2020) and Mitchell et al. (2023), who highlighted that available mental health infrastructure amplifies the effectiveness of classroom-based SEL interventions. The outcomes also lend some support to Barry et al. (2013), who identified the value of healthcare but suggested the possibility of

equal gains coming from strong family or neighborhood support systems. This research refutes the idea of such equality by determining that school-based systems provide a uniquely institutionalized degree of support that cannot easily be replaced by in-group frameworks, especially in the aftermath of an international crisis. Moreover, the results complementedly concur with Dowling and Barry (2020), who argued that fidelity of SEL implementation is higher in collaboration with healthcare professionals. Therefore, this research affirms that SHSS is not an add-on accessory but a deciding moderator, contradicting assumptions downplaying its status in post-pandemic recovery models.

5.3. Practical Implications

The results support that Emotional Intelligence Education (EIE) is having the most impact on post-pandemic student adjustment (β = 0.828). This highlights the importance of incorporating EIE into the main primary school curriculum and not as an afterthought. Interventions may be pragmatic through teacher training programs done in ways with systematic modeling of emotional awareness, empathy, and regulation that can be learned through observation by children. The RULER strategy, evaluated by Rivers et al. (2012), reflected significant improvements in both emotional well-being and classroom engagement, reinforcing the point that evidence-based interventions for EIE can prove life-altering if they are consistently practiced. Similarly, Jennings and Greenberg (2009) underlined that teachers' social-emotional competence is at the same time connected to students' resilience. Policymakers then need to accord highest importance to professional development plans and allot funds to ensure schools adopt workable emotional intelligence curricula. This research is in full accord with such transformative initiatives, particularly where there has been a crisis.

These findings also reveal that students' post-pandemic adjustment is strongly augmented by Social-Emotional Learning (SEL) Integration $(\beta = 0.600)$. Its influence, however, is comparatively lesser than that of EIE, which means that even though SEL is beneficial, its influence depends on the fidelity and consistency of its implementation. The meta-analysis by Durlak et al. (2011) had solid evidence that SEL programs embedded within routine instruction improve emotional regulation, academic performance, and social behavior, especially when embedded into daily instruction. It is hence crucial for schools to embed SEL practices within classroom routines, peer-to-peer relationships, and whole-school initiatives. Moreover, Taylor et al. (2017) indicated that SEL long-term benefits include reduced behavioral disruptions and improved academic engagement. Practical strategies may involve cross-curricular infusion of SEL, where emotional education is infused in subjects such as literature and social studies to allow children to learn empathy and collaboration in contextually meaningful means. This research is partly aligned with the optimistic perspective but also acknowledges that quality of implementation still stands as the most determinative factor in SEL's effectiveness.

And finally, School Healthcare Support Systems (SHSS) moderation effect ($\beta=0.35$) indicates that institutions' health infrastructures have a vital role in enhancing the impacts of SEL on student adjustment. This is in support of Anderson et al. (2020) and Mitchell et al. (2023), who found that SEL is most effective when combined with readily available mental health care. Practical interventions include incorporating school-based health centers, providing counseling staff, and ensuring strong referral links between schools and external health services. Dowling and Barry (2020) further emphasized that schools with integrated health professionals in SEL programs experienced higher student well-being and reduced

absence rates. Such evidence suggests that policymakers should not view SHSS as extra but as a part of recovery plans in education. This study therefore, counters perspectives that equate school-centered healthcare with community options, arguing instead that support that is institution-based is unique in building resilience in children in times of systemic crises.

5.4. Limitation

This study possessed some limitations that must be highlighted. Firstly, the cross-sectional study restricted one's capacity to assess the long-term effects of EIE, SEL Integration, and SHSS on pupil adjustment. Data were also collected from some schools, most likely restricting the generalizability of findings to numerous cultural and policy settings. Third, while self-report questionnaires are effective for large samples, they are susceptible to social desirability bias, particularly from young respondents. These flaws warn against generalizing results.

5.5. Future Directions for Research

Subsequent studies should utilize longitudinal designs in order to determine how EIE and SEL Integration affect adjustment over developmental phases, thus shedding light on whether the realized effects are sustainable over time. Cross-cultural research is also required to investigate differences in implementation and highlight that culture alignment influences program impact. Furthermore, the next phase of research has to examine the extent to which digital materials, such as AI-based emotional simulation or gamified SEL resources, can facilitate engagement and long-term maintenance in post-pandemic recovery (Nkomo et al., 2021). Interestingly, the interplay between SHSS, family engagement, and community networks also needs more attempts to deconstruct in order to determine whether synergistic models might maximize resilience. Interdisciplinary study from education, psychology, and public health disciplines will be called upon to contribute to the broader theoretical and practical knowledge.

6. Conclusion

The present study examined the role of Emotional Intelligence Education (EIE), Social-Emotional Learning (SEL) Integration, and School Healthcare Support Systems (SHSS) in defining the postpandemic adjustment of primary school students. The empirical results ensured that EIE was the most influential, citing its potential to restore emotional control, develop resilience, and revitalize interest in learning environments devastated. SEL integration was also a significant predictor, which in turn validated the argument that integrating socio-emotional skills into daily pedagogy in the classroom enhances students' adaptive functioning. Central to this was the interactional effect of SHSS, which established the imperative for health infrastructures in institutions to maximize SEL advantages and recommended recovery as being facilitated not only in the guise of curriculum reform but also through inherent systemic health provisions. Theoretically, the results confirm Social Cognitive Theory and Ecological Systems Theory, showing how individual emotional abilities, environmental factors, and resource infrastructures interact during the adaptation process. Practically, the study emphasizes schools' immediate need to give great importance to EIE and SEL during recovery planning while simultaneously enhancing healthcare infrastructures for sustainability. Despite its contextual limitations, the study contributes to the ongoing debates through the conceptualization of evidence supporting emotional and social education at the center of resilience in education. In conclusion, holistic interventions that merge EIE, SEL, and SHSS are needed for safeguarding the psychological well-being of students, healing education institutions' reputation, and guaranteeing long-run human capital development in the post-pandemic era.

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Appendix:

Table 6. Survey Design

No.	Variables	Coded Sub- variables	Content
1.	Post- Pandemic Student Adjustme nt (PPSA)	PPSA1	Scholars returning to academy after COVID-19 closures displayed increased anxiety, reduced attention spans, and weakened peer connections. (Rashid et al., 2022)
		PPSA2	Post-pandemic pupil adaptation highlights scholars' capacity to re-engage with education, reestablish social connections, and manage emotional and mental health challenges. (Loades et al., 2020)

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		PPSA3	More than 40 percent of primary school students experienced serious emotional difficulties during lockdowns, including prolonged sadness, heightened anxiety, and increased behavioral challenges. (Goldfeld et al., 2022)
		PPSA4	Post-pandemic pupil adaptation reflects the broader idea of education to support the holistic development of the child. (Baker & Siryk, 1986)
2.	Emotional Intelligenc e Education (EIE)	EIE1	EIE emphasizes capabilities similar to self-awareness, emotional regulation, empathy, relationship-building, and ethical decision-making. (Durlak et al., 2011)
		EIE2	Learners exposed to emotionally responsive instruction and educator modeling are more equipped to manage anxiety, rebuild peer connections, and restrict themselves into academic routines. (Jennings & Greenberg, 2009)
		EIE3	EIE, when integrated as a core element of educational programming, can foster substantial earnings in both socio-emotional and cognitive disciplines. (Rivers et al., 2012)
		EIE4	EIE becomes a linchpin in educational recovery, offering pathways for rebuilding emotional security, restoring interpersonal trust, and reengaging learners both socially and academically. (Mahmud, 2022)
3.	Social- Emotional Learning Integratio n (SELI)	SELII	SEL Integration positions it at the heart of educational practice, rooted within daily instruction, classroom culture, and seminary-wide programs. (Durlak et al., 2011)
		SEL12	Academy grounded SEL programs significantly improved social behavior, emotional regulation, academic achievement, and reduced cerebral distress. (Durlak et al., 2011)

		SELI3	Robust SEL practices lead to meaningful and enduring issues in both academic and emotional disciplines. (Taylor et al., 2017)
		SELI4	The integration of social- emotional learning helps rebuild psychological safety, strengthens peer connections, and supports adaptability among young learners. (Mahmud, 2022)
4.	School Healthcar e Support System (SHSS)	SHSS1	School healthcare refers to systematic access to physical and mental health services provided within educational settings. (Anderson et al., 2020)
		SHSS2	Adolescents benefited most from mental health services when school-based health centers collaborated closely with educators to provide screening and support tied to classroom interventions. (Anderson et al., 2020)
		SHSS3	Schools which transitioned core services online or through telehealth maintained essential support for youth at risk during closures, thereby sustaining SEL gains. (Mitchell et al., 2023)
		SHSS4	Primary schools implementing SEL with strong fidelity particularly when supported by school health professionals experienced improved student wellbeing and reduced absenteeism. (Dowling & Barry, 2020)

BACKGROUND INFORMATION							
1	Which grade are you currently studying in?	Grade 3	Grade 4	Grade 5			
2	What is your gender?	Male	Female	Prefer not to say			
3	What type of school do you attend?	Public School		Private School			
4	Has your parent or guardian permitted you to participate in this survey?	Yes		No			

Survey link:

https://docs.google.com/forms/d/e/1FAIpQLScSkMG9y6AXlfyVB if4ZwaHCqFVPLJ3uASjf1AIySEq0sdcQ/viewform?usp=header