2020 | BUILDING TRAUMA-INFORMED SCHOOLS TEAM



Coping with Covid-19

A Guide for Arkansas Early Care and Education Program Administrators

Background

In Arkansas, partners at the University of Arkansas for Medical Sciences (UAMS programs Arkansas Building Effective Services for Trauma and Project PLAY) and A-State University Childhood Services (A-State) have integrated best practice guidance into a training, consultation and coaching initiative designed to support early care and education (ECE) professionals on their journey toward building trauma- informed schools/ECE programs. Our goal is to enhance staff capacity to understand the impact of trauma on health and development and build resilience in children through implementation of social and emotional supports in the context of a trauma-informed organizational environment.

We have utilized The NCTSN System Framework for Trauma-Informed Schools¹, which provides guidance on achieving a more trauma-informed environment within a pre-k/k-12 school system. The framework outlines ten core areas of focus for educational system improvements that support a trauma-informed ECE/school system as a whole and ensure adequate supports for children with experiences of trauma. The NCTSN has used this framework to outline a comprehensive, trauma-informed response to the COVID-19 crisis.² Using a similar approach, we developed this document to highlight how Arkansas ECE providers can respond in developmentally appropriate ways to the needs of children ages 0-5 and utilize resources available in Arkansas to support staff, children and families.

NCTSN 10 Core Components

- 1. Identifying students with trauma exposure
- 2. Addressing/treating traumatic stress
- 3. Trauma education and awareness
- 4. Partnerships with students/families
- 5. Trauma-informed learning environments
- 6. Cultural responsiveness
- 7. Emergency/Crisis response
- 8. Support for staff self-care and secondary trauma
- 9. School policies and practices
- 10. Collaboration and community partnership

Our trainings for teachers that focus on building trauma-informed classroom learning environments (Core Component 10) are centered around what we have termed the 4 S's of Trauma-Informed Classrooms: safety, supportive relationships, self-regulation & social-emotional skill-building, and self-care³. You will see these concepts referenced in this document.

Using This Document

In times of crisis, it can be more important than ever to lean on trusted frameworks to help guide a thoughtful response to the crisis. This document is designed to inspire ideas for how early care and education professionals can support young children and families (and themselves/peers) in the aftermath of the covid-19 crisis. We address ideas within each of the **10 Core Components**¹ to ensure comprehensiveness of response. The order in which we address the 10 Core Components has been adjusted to help ECE administrators address 'first things first' in response to the unique challenges created by the Covid-19 virus.

We envision that ECE teams will consider these ideas together and explore further the ideas that resonate with the team as an area of need. We have included a list of resources that may be helpful in exploring some of the ideas further. In this document we provide a limited number of suggestions that we hope serve as a springboard for team discussion and will generate additional ideas. We expect you will find that you are already engaging in many formal or informal activities that fit well within this framework.

We encourage school teams to resist the urge to gloss over the core component associated with supporting staff wellness and addressing stress and secondary trauma. Educators often focus on the children and families they serve at the expense of their own well-being. Sustaining effort through and beyond this crisis will require paying careful attention to the well-being of staff. We thank you for the work that you do and wish you well during and after this time of crisis.



Identifying Students with Trauma Exposure

Identify students (and school personnel) who experienced trauma, adversity, and substantial hardship related to COVID-19 and have traumatic stress symptoms or ongoing emotional distress

- ASK questions and gather information about the impact of COVID-19 in your area:
 - * Number of cases in your area?
 - * Unemployment? Food insecurity?
 - Marital discord? Domestic violence?
 - Students with parents who were/are on the front-line of COVID-19?
 - Increased parental stress? Child abuse?
 - Any child, teaching staff, or school personnel who experienced death or sickness of a loved one?
 - * Any loss of life among the school family?
- **LISTEN** to children for any adverse events impacting their family specifically (including the list above).
- WATCH: Pay closer attention to changes (from pre-COVID) in children
 - * In school attendance
 - * Behavior, attention and mood at school and home
 - Sleeping, eating, toileting/ Loss of previously learned skills
 - Social skills and interactions
- WATCH: Pay closer attention to changes in parents. (mood and demeanor, interactions, etc.).

Resources:

Consider using tools such as The Family Map Inventories, designed to help ECE providers identify family strengths and risks at home in a respectful way and build relationships between ECE professionals and families.

www.TheFamilyMap.org

These resources provide helpful information about symptoms of trauma exposure in children 0-5: <u>https://www.nctsn.org/what-is-child-trauma/trauma-types/early-childhood-trauma/effects</u> https://www.nctsn.org/sites/default/files/resources//psychological and behavioral impact of trauma preschool.pdf





Staff Self-Care and Reduce Stress of Teaching Staff

- **FOCUS** on supporting the self-care of teaching staff as a way to support the adults who care for the students at school (see resource section for ideas for self-care activities).
- CONSIDER organizational wellness strategies that can minimize or alleviate stress in practical ways such as
 - Increasing access to 'floater' staff during times of stress
 - * Ensuring that school personnel get regular breaks and quiet spaces are available
 - * Providing regular opportunities for supportive supervision
 - * Celebrating birthdays, and special occasions
 - * Communicating clearly about steps being taken to ensure the physical health and safety of staff in an ongoing way; provide forum to address staff concerns
- ENCOURAGE staff to maintain balance (e.g. turning email off after-hours) and provide opportunities for social connection/supports (e.g. finding virtual ways to connect with colleagues/families).
- **INCREASE** visibility and accessibility of wellness plans, self-care strategies, and other support resources (e.g., employee wellness/assistance programs) that are available.

Resources:

These documents highlight signs of secondary traumatic stress and include tips for educators on self-care and stress reduction when working with children and staff impacted by trauma.

https://www.nctsn.org/sites/default/files/resources//self_care_for_educators.pdf https://www.nctsn.org/sites/default/files/resources/fact-sheet/taking_care_of_yourself.pdf

https://integration.samhsa.gov/pbhci-learning-community/Compassion_Fatigue_Office_Hours.pdf



Trauma Education and Awareness

- BE AWARE: The COVID-19 pandemic is a potentially traumatic experience for children, families, and school personnel. Many (if not all) individuals have experienced loss of important routines and enjoyable activities, limited physical contact with friends and loved ones, and other stressful changes, while others may be dealing with severe economic strain or grief related to the loss of a loved one.
- **CONSIDER** providing professional development around the impact of trauma and ACEs including signs and symptoms of distress.
- CONNECT information from past professional development on social-emotional supports to the current situation to help teachers remember ways to enhance a sense of emotional safety and build self-regulation and social-emotional skills that can help children in coping with COVID-19.

Resources:

This document provides educators with basic facts about childhood trauma and information about working with traumatized children in educational settings.

https://www.nctsn.org/sites/default/files/resources//child_trauma_toolkit_educators.pdf

These brief online trainings are available to AR ECE providers at no cost. They help teachers recognize the impact of trauma on young children and learn strategies to support children in the classroom.

https://naptimeacademy.com/ (click on course catalog and look for Childhood Trauma parts 1 and 2)

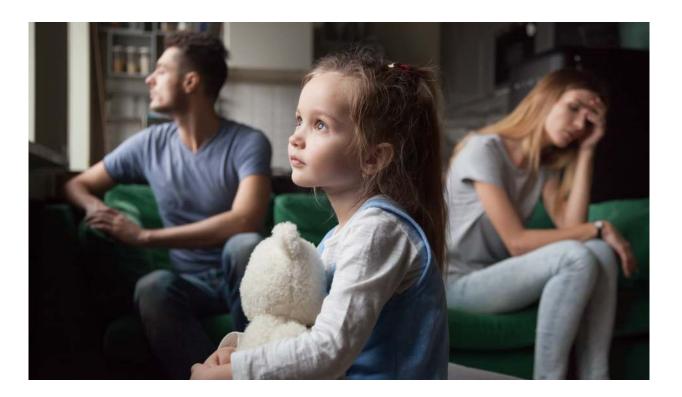


Partnerships with Students and Families

- EDUCATE parents on:
 - * Stress, trauma, and adversity
 - * Signs and symptoms of distress in young children
 - * Ways to help their children cope/ways to cope with parenting stress
 - Importance of limiting the children's access to TV, internet, and social media that highlight disturbing and confusing aspects of COVID-19
- COMMUNICATE with parents in an ongoing way about COVID-19 related ECE opening/ closing procedures and the approach program is using to keep children safe. Share specific information about how teachers are talking to students about COVID-19 and helping them cope. This could help with school personnel and parents being on the same page and maintaining consistency of messages across settings.
- **ENGAGE** parents in conversations about how they have been impacted and how the school can assist with them and the larger school family.

Resources:

This document is designed to help parents identify ways to support children during this crisis. <u>https://www.nctsn.org/sites/default/files/resources/fact-sheet/supportingchildren-covid-factsheet.pdf</u> This resource is designed to help parents understand childhood traumatic stress. https://www.nctsn.org/sites/default/files/resources//understanding child traumatic stress guide for parents.pdf



Trauma-Informed Learning Environment

 BE AWARE that the COVID-19 pandemic was/is stressful (and potentially traumatic) for many (if not all) children and families. A number of children could display the following upon return to school: sleep problems, difficulties with listening and focus, regression in previously achieved abilities, emotional and behavioral difficulties, short fuse, increased agitation and irritation, increased fussiness and crying, increased withdrawal behaviors and re-enacting traumatic events through play.

Draw on the S's of Trauma-Informed Care:

• SAFETY Strategies:

- **Prepare** to answer curious questions in developmentally appropriate ways. Answer questions simply and honestly; let students know that they are not alone; focus on ways adults are helping keep them safe.
- **Reinforce** themes of safety. Students might need reminders that major disasters and pandemics are rare and to focus on times in which they have felt safe.
- **Be careful** of conversations that students may hear between adults about COVID and related topics that might provoke anxiety or confusion.
- Help children who have been home re-adapt to the classroom routine through visual schedules and support through transitions. Remember predictability enhances feelings of safety.

• SELF-REGULATION & SOCIAL-EMOTIONAL SKILL-BUILDING:

- Build in ways that children and school personnel can receive increased emotional support throughout the school day. (calming spaces, teacher check-ins and connection time with children, access to mental health consultation and coaching partners for teachers, etc.)
- Teach social-emotional skills including expressing needs and ways to ask for help, expressing a range of emotions, solving problems, managing conflict and having empathy for others.



 Engage in enhanced teaching and modeling of emotion regulation strategies. This might include more intentionally building socialemotional lessons into curriculum/schedule, naming and validating feelings, and teaching and modeling strategies so they can see and hear how to cope with big feelings. (e.g. learning 'I can handle it').

Trauma-Informed Learning Environment (cont.)

• SUPPORTIVE RELATIONSHIPS:

- Ensure regular time to connect individually with students through conversations, joining play or other intentional connection activities (special greetings, hugs etc.).
- Find ways for students to feel helpful to their friends, school family, and community (e.g. by assigning classroom jobs or noticing helpful behaviors).
- Encourage students to connect with each other; concepts of school family and supportive relationships could be highlighted in more systematic ways; use classroom activities designed to "help" or "wish friends well" who experienced substantial loss during the pandemic (if indicated); increase team building activities among teaching staff.
- Be patient with students who are clingier to their parents and to teachers with whom they had/ have connections (ex.: teachers and co-teachers from previous academic year); Create opportunities for re-connecting with former teachers/friends and support transition to new classroom.

Resources:

Websites such as these can help teachers remember and review social-emotional support strategies they may have received training in such as The Pyramid Model for Promoting Social Emotional Competence in Infants and Young Children or Conscious Discipline.

https://www.pyramidmodel.org/

https://consciousdiscipline.com/ (see also free covid-19 resources section)

This document summarizes Arkansas' Child Development and Early Learning Standards, including information about socialemotional learning.

https://www.arheadstart.org/Ark_Early_Learning_Standards%20(19)%20(1).pdf



Cultural Responsiveness

- EXPLORE disparities and inequities across demographic groups (racial/ethnic, immigrant status, SES) that were highlighted and magnified during COVID. Be mindful that in AR, there are disproportionate death rates among African-American families and our immigrant families face barriers to accessing needed services; statements such as "We understand that we were/are all in the same storm, but not the same boat" can reflect an awareness of and attunement to disparities.
- FOCUS on concepts of equity (giving children what they need to succeed) rather than treating everyone the same, knowing that not all children/families are starting from the same place.
- **CONSIDER** and explore with staff how culture impacts beliefs and attitudes towards emotional expression, grief, loss, coping styles and other topics related to recovery.
- ENGAGE parents in conversations about culture and belief systems in their family and ways they are coping during this pandemic.

Resources:

This podcast explores ways in which the coronavirus pandemic is particularly affecting people of color in the U.S., and what that can mean for early childhood development.

https://developingchild.harvard.edu/resources/the-brain-architects-podcast-covid-19-special-edition-creating-communities-ofopportunity/

These resources highlight ways to learn about differences across cultures in dealing with grief and loss and how we can support families.

https://grievingstudents.org/module-section/cultural-sensitivity/



Emergency Management and Crisis Response

- CONSIDER what makes the COVID crisis different from other types of crises. Many people (including those who support children's recovery from this pandemic such as teachers and other school personnel) also experienced the same potentially traumatic event. The following questions could help in reflecting on the degree to which the pandemic is still impacting the school family.
 - * What is the length of time between the immediate and residual effects of COVID-19 and the start of school?
 - * Are aspects of the pandemic still actually occurring?
- **COMMUNICATE:** Enhance feelings of safety by making sure that the teaching model (e.g., in-person, virtual, hybrid model), sanitation practices, and other safety precautions (ex., mask-wearing) are clearly communicated to the entire school community. Consider how increased sanitation practices and safety precautions could lead to an emotional response (fear, anxiety, irritability) for children, school personnel, and parents. For children, it will be important to give children a simple and honest understanding of the new practices in a way that will minimize fear and anxiety. Consider using social stories to teach about new routines.
- **COMMUNICATE:** As a leader, it will be important to expect and communicate themes of SAFETY, HOPE and RECOVERY to assist with keeping the school family focused on healthy and productive ways of thinking.
- **PREPARE** for the possibility of an increase in more serious behavior concerns and have a plan in place for handling classroom behavioral crises calmly and safety.

Resources:

Social stories have been developed to help children understand new safety practices. This story designed to alleviate anxiety about teachers wearing masks is available free at <u>ProjectPlay.uams.edu</u> (under RESOURCES tab) or:

https://familymedicine.uams.edu/wp-content/uploads/sites/57/2020/05/My-Teacher-Wears-a-Mask.pdf

These resources guide children through safe handwashing procedures.

https://consciousdiscipline.com/resources/handwashing-visual-procedures-english-and-spanish/

Up-to-date COVID-19 related health and safety information for ECE programs can be found on the Arkansas Department of Human Services website here <u>https://humanservices.arkansas.gov/about-dhs/dccece</u>



Prevention and Intervention Related to Traumatic Stress

- UNDERSTAND that children with previous trauma and adverse childhood experiences (ACEs) are at an increased risk for more emotional and behavioral difficulties when they experience additional trauma, such as may have occurred related to COVID-19. Reach out to resources that you already have for emotional and behavioral support.
- PREPARE: Be prepared with updated lists of mental health professionals trained in trauma assessment and treatment for young children and their caregivers as well as providers of services for adults; Prepare to educate parents about trauma-specific services; be on the lookout for need for referrals to address grief and stress reactions.



Resources:

This website describes examples of effective trauma treatments for young children and their families and has links to trained therapists in communities across Arkansas.

https://arbest.uams.edu/abouttrauma/trauma-treatments/

This document includes questions that parents can ask of mental health professional to learn if they are able to provide evidencebased treatment for childhood trauma.

https://familymedicine.uams.edu/wp-content/uploads/sites/57/2020/05/mh-provider-check-list_short.pdf

Teachers or administrators needing assistance with challenging child behavior or concerns for a child's emotional wellness can request support through BehaviorHelp, which coordinates technical assistance and mental health consultation resources. Submit a request at <u>www.behaviorhelponline.org</u>.

School Discipline and Other Policies and Practices

- **CONSIDER** the impact of traumatic life experiences on students' behavior when developing discipline policies. Policies should recognize that there is often a connection between trauma and behavior and so it is likely that behavior concerns will be on the increase.
- **REAFFIRM** the school commitment to viewing behavior concerns as opportunities to teach new skills and identify unmet student needs.
- ENSURE flexibility with the curriculum, "flow of the day," and the rate of learning and educational progress to be sensitive to the students' and teachers' current level of stress.

Resources:

This book is designed to support administrators in creating equitable discipline policies that reduce the impact of implicit bias and support all children's social and emotional development, including children with a history of trauma.

Longstreth, S., & Garrity, S. (2018). Effective discipline policies: How to create a system that supports young children's social– emotional competence. Gryphon House (available through Amazon and other online bookstores)

Cross System Collaboration and Community Partnerships

- PARTNER with community organizations (including faith-based organizations) that are providing ongoing relief for families impacted by COVID-19. Address immediate and practical needs of families by making referrals. Make sure referral list is updated and accessible.
- PARTNER with community mental health agencies regarding the need for potential referrals. Be aware that there are evidence-based treatments even for our youngest children and their caregivers. Make sure established processes are in place in advance for efficient referrals and all school personnel know their role in advocating for family services.

Resources:

This website has links to therapists trained in the treatment of trauma in communities across Arkansas.

https://arbest.uams.edu/abouttrauma/trauma-treatments/

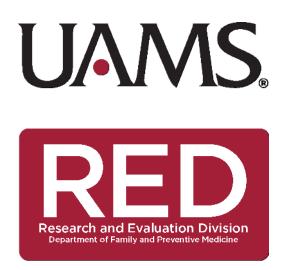
This website provides information about supports available across Arkansas to meet concrete family needs, such as resources for food and housing.

https://www.goodwillar.org/resources





ARBEST Arkansas Building Effective Services for Trauma



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¹ National Child Traumatic Stress Network, Schools Committee. (2017). Creating, supporting, and sustaining trauma-informed schools: A system framework. Los Angeles, CA, and Durham, NC: National Center for Child Traumatic Stress.

²Halladay Goldman, J., Danna, L., Maze, J. W., Pickens, I. B., and Ake III, G. S. (2020). Trauma Informed School Strategies during COVID-19. Los Angeles, CA, and Durham, NC: National Center for Child Traumatic Stress.

³Adapted from principles described in a trauma informed juvenile justice model in Griffin, G., Edward J. G. & Wilkerson, R.G. (2012): Using a Trauma-Informed Approach in Juvenile Justice Institutions, Journal of Child & Adolescent Trauma, 5:3, 271-283.

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