Returning Students to School after a Global Pandemic

The COVID-19 pandemic presents unprecedented challenges for all, especially for students who have faced such enormous disruption. Many children and youth are likely experiencing worry, anxiety, and fear, including fears inadvertently shared by adults. These adult fears may center on dying, loss of relatives and friends, or instability around finances or housing. When students were dismissed from school campuses for in-person learning in March, they lost the familiar structures and engagement of the school environment. This loss of connection with school and peers due to physical distancing requirements and at-home learning have the potential to negatively impact students.

In addition to these challenges, students may also have fears about returning to school and may experience stress and anxiety, resulting in symptoms of trauma. As schools continue to operate under conditions caused by community spread of COVID-19, staff should remain mindful of the impacts on mental health and wellness and put protocols in place to support students and staff who may also have experienced loss or experience stress or anxiety in the return to school.

Social and Emotional Learning (SEL) Components to Support a Successful Return to School:

- Put safeguards in place to address physical and psychological safety
- Maintain expectations for a safe and supportive environment
- Develop a resource map
- Identify and deliver a continuum of services (MTSS)
- Reconnect with students through supports and routines
- Make space for student discussion regarding experiences
- Plan for on-going supports
- Acknowledge changed circumstances and promote strategies to adapt
- Develop long-term recovery plan
- Provide professional development and emotional care for adults

Best Practices

Schools are encouraged to adopt an approach of universal services for mental health support for all students, which includes the following recommendations:
• Teachers and other school staff should receive training on how to talk with and support students during a pandemic, focusing on principles of psychological first aid.

• Students requiring more in-depth mental health support, including those who are in significant emotional distress, should be referred for additional services. A list of resources is available on the SMCOE web site.

• Adults should provide support to grieving students as well as to those experiencing other losses, including loss due to missed experiences.

• Students who do not return to school should be contacted as soon as possible, as they may be struggling with basic needs or experiencing school avoidance due to anxiety related to the pandemic.

• Adults should be attuned to the broader social and family stressors that may affect a student’s ability to attend school or readiness to learn.

• Adults should be attuned to and plan to support students who may still be having difficulty concentrating or learning new information due to stress associated with the pandemic.

**What to Expect When Returning**

To combat the stress of returning to school, the days immediately following the return to school should be filled with community-building and reconnecting with students and families. School leaders are advised to make mental health needs a priority. In the transition back to campus, academics may be secondary to social emotional needs as students and families settle into the new routines of modified school operations. It is essential to arrange for mental health programming, align a mental health support continuum, and be ready to implement a mental health universal screening. Learn more best practices with universal screeners.

**Well-Being and Mental Health Safety for Students**

**Helping Students to Feel Safe**

Students will arrive to the learning environment with their own lived experiences, thoughts, and emotions. Many will be grieving normalcy. Many students missed out on educational experiences in the spring of 2020 (promotion activities, specific grade level experiences, etc.) and some are returning to different schools with unfamiliar students
and staff. Younger students may be fearful or wary of the necessary procedures put in place for safety. To support student needs for safety and security, it is essential to understand that adult anxiety impacts child anxiety. Managing staff anxiety is crucial to manage student anxiety.

**Strategies for Adults Supporting Students:**

- Acknowledge the situation. Be honest. Reassure students about the safety measures in place to reduce community spread and keep students and teachers healthy.
- Remind youth they can help prevent germs spreading by washing hands and wearing face coverings.
- Explain the changes they will experience at school, such as needing to wear protective gear like face coverings.
- Understand that youth may find it difficult to maintain required physical distancing from friends and teachers. Encourage them to think of other ways to bond and stay connected.
- Acknowledge and validate the emotions. Help students feel at ease by having an open conversation about what is worrying them. Let them know it is natural to feel anxious.
- Build a coping toolbox that includes calming strategies for both mind and body. Learn some examples of calming strategies for students.
- Remind students that we are all in this together and choosing kindness helps themselves and others.

Additionally, site- and district-based mental health professionals can provide an additional layer of support for students as well as staff and parents. These may include:

- Conduct virtual outreach
- Schedule virtual office hours
- Create opportunities for school connectedness
- Train school personnel to provide support
- Create and sustain a culture of care
- Make mental health and crisis team members available
- Promote social connection
Recognizing Distress and Trauma

Large scale disasters such as a global pandemic can cause trauma in students, even if they are not directly affected by a COVID-19 death. Well-informed teachers and school personnel can be a source of support for students and for each other. Recognizing signs of grief in students, colleagues, and oneself can help facilitate the healing process after a disaster or traumatic event. Children who have been exposed to a crisis often exhibit behaviors that are similar to children younger than themselves. School counselors, school nurses, school psychologists, and school social workers can help teachers identify risk factors and signs of distress that may indicate the need for mental health services above what is offered at school. As with any counseling services, parents should be notified if additional services are recommended.

**Students may exhibit any of the following behaviors upon the return to school after a disaster or traumatic event:**

**Increase in Fears and Anxiety**
Children may exhibit an increase in fears and worries. They may again become afraid of situations they mastered long ago. Adolescents may experience a more generalized anxiety and not the specific types of fears that are seen in younger children.

**Decreased Academic Performance and Poor Concentration**
Given the increase in anxiety, social isolation, possible loss of life in their community, and the disruption in learning, students may show a decline in school performance or have difficulty mastering new material. Students who were academically on-track prior to the school dismissal may be behind and need extra assistance.

**Increased Aggression and Oppositional Behavior and Decreased Frustration Tolerance**
Children who have been exposed to a crisis can experience difficulty controlling their anger and frustration. Adolescents may also exhibit an increase in oppositional behavior, refusing to “live by the rules and regulations” of school and home and meet their responsibilities. Some adolescents may resort to antisocial behavior, such as stealing, truancy, and increased use of drugs or alcohol.

**Increased Irritability, Emotional Lability, and Depressive Feelings**
Students may exhibit symptoms of depression that include a general sense of sadness,
difficulty falling and remaining asleep or sleeping more than normal, change in eating habits, loss of interest in activities once enjoyed, social withdrawal, mental and physical fatigue, and/or suicidal ideation. In younger children there may be an increase in irritability and moodiness.

**Denial**

In an effort to cope with the psychological and emotional ramifications of a crisis, certain children and adolescents will deny that a crisis has occurred and/or deny the significance of a crisis.

**Examples of Typical Age-Based Behaviors Related to Trauma:**

<table>
<thead>
<tr>
<th>Age</th>
<th>Behavior</th>
</tr>
</thead>
</table>
| **Preschool Children**<br>Ages 1 through 5 | • thumb sucking  
• speech difficulties  
• bed wetting  
• decreases or increases in appetite  
• fear of the dark  
• clinging and whining  
• loss of bladder control  
• separation difficulties |
| **Childhood**<br>Ages 5 through 11 | • sadness & crying  
• school avoidance  
• physical complaints (e.g., headaches)  
• poor concentration  
• irritability  
• fear of personal harm  
• regressive behavior (clinging, whining)  
• nightmares  
• aggressive behavior at home or school  
• bed wetting  
• anxiety & fears  
• confusion  
• eating difficulty  
• withdrawal/social isolation  
• attention-seeking behavior |
<table>
<thead>
<tr>
<th>Age</th>
<th>Behavior</th>
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</thead>
<tbody>
<tr>
<td><strong>Early Adolescence</strong></td>
<td>• sleep disturbance</td>
</tr>
<tr>
<td>Ages 11 through 14</td>
<td>• withdrawal/isolation from peers</td>
</tr>
<tr>
<td></td>
<td>• increase or decrease in appetite</td>
</tr>
<tr>
<td></td>
<td>• loss of interest in activities</td>
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<tr>
<td></td>
<td>• rebelliousness</td>
</tr>
<tr>
<td></td>
<td>• generalized anxiety</td>
</tr>
<tr>
<td></td>
<td>• school difficulty, including fighting</td>
</tr>
<tr>
<td></td>
<td>• fear of personal harm</td>
</tr>
<tr>
<td></td>
<td>• physical ailments (e.g., bowel problems)</td>
</tr>
<tr>
<td></td>
<td>• poor school performance</td>
</tr>
<tr>
<td></td>
<td>• depression</td>
</tr>
<tr>
<td></td>
<td>• concentration difficulties</td>
</tr>
<tr>
<td><strong>Adolescence</strong></td>
<td>• numbing</td>
</tr>
<tr>
<td>Ages 14 through 18</td>
<td>• intrusive recollections</td>
</tr>
<tr>
<td></td>
<td>• sleep disturbance</td>
</tr>
<tr>
<td></td>
<td>• anxiety and feelings of guilt</td>
</tr>
<tr>
<td></td>
<td>• eating disturbance</td>
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<tr>
<td></td>
<td>• poor concentration and distractibility</td>
</tr>
<tr>
<td></td>
<td>• psychosomatic symptoms (e.g., headaches)</td>
</tr>
<tr>
<td></td>
<td>• antisocial behavior (e.g., stealing)</td>
</tr>
<tr>
<td></td>
<td>• apathy</td>
</tr>
<tr>
<td></td>
<td>• aggressive behavior</td>
</tr>
<tr>
<td></td>
<td>• agitation or decrease in energy level</td>
</tr>
<tr>
<td></td>
<td>• poor school performance</td>
</tr>
<tr>
<td></td>
<td>• depression</td>
</tr>
<tr>
<td></td>
<td>• peer problems</td>
</tr>
<tr>
<td></td>
<td>• withdrawal</td>
</tr>
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<td></td>
<td>• increased substance abuse</td>
</tr>
</tbody>
</table>

**Grieving and Loss**

1. If your district/school site has been notified of a death that may impact your school community, it is important to do the following:

2. Verify the information (e.g., from family members or local authorities) and determine what information the family would like to have disclosed or what information has already been released publicly from a reliable source.

3. Communicate with the San Mateo County Office of Education (SMCOE) about the death and seek and receive support in implementing the “response plan.”
4. SMCOE can assist in coordinating efforts with other schools or youth-serving programs that may also be impacted by the loss.

Strategies for Supporting Grieving Students:
What to say and what not to say

Listen to what students want to share. It may be difficult, but listening can be a powerful healing force.

- Be present and authentic.
- Keep the focus on the student.
- Ask open-ended questions to help the student discuss their experiences, thoughts, and feelings.
- Show empathy.
- Reflect back what students say and the actions you observe.
- Use compassion and avoid judgement.

Protect students from becoming re-traumatized. Sometimes other students may ridicule or bully students who are highly emotional or cry.

- Have a system in place to refer students who need to speak with a counselor.
- Diffuse any hate speech instantly that may be associated with the disaster or traumatic event.

Connect with students who have suffered a loss, for example:

- Check in with them on a regular basis.
- Let them know that you are available to listen.
- Give them positive feedback about their attendance or classroom work.
- Avoid trying to “cheer up” students or their families. Grief is painful.
- Accept expressions of emotions: sadness, anger, or confusion are common in the grieving process.

Model adult behavior that shows them how responsible adults react to loss and respond to a crisis. Adults may grieve, but they continue to act with consideration and maintain calm routines at school.
- Encourage help-seeking behavior
- Help reduce stigma around accepting mental health and counseling supports

Other Resources
- Supporting Your Child’s Mental Health as They Return to School – UNICEF – appropriate for school staff as well as parents
- Returning to “Normal” After COVID – for parents
- Returning to School After an Emergency or Disaster – by the Centers for Disease Control and Prevention

Mental Health Safety and Well-Being for Staff

Teachers and other school personnel are also impacted by a disaster or traumatic events. It is essential that staff mental health needs are addressed along with those of students. Adult reactions can include confusion, disorganization, and difficulty in decision making. Longer term reactions that are experienced by adults can include:

- denial
- feelings of detachment
- unwanted, intrusive recollections
- depression
- concentration difficulty
- anxiety
- psychosomatic complaints
- hypervigilance
- withdrawal
- eating disturbance
- irritability and low frustration tolerance
- sleep difficulty
- poor work performance
- loss of interest in activities once enjoyed
- emotional and mental fatigue
- emotional lability
- marital discord

Since teachers are likely to be affected by the disaster or traumatic event and could experience grief, it is imperative that they receive the appropriate support and intervention. Without such intervention, they will be limited in their ability to meet the needs of students. It is important that teachers have a forum to discuss their own feelings and reactions to the crisis and receive support. A list of off-site resources should be made available to all staff, as well as on-site counseling from community partners or from the district’s Employee Assistance Program. Below are ways to help staff manage their own feelings of anxiety.
• Manage your own anxiety first.
• Do not be afraid to discuss the situation.
• Help open communication: it is often the best way to allay unpleasant emotions.
• Do not assume how others are feeling or why they are feeling that way. Instead, ask them.
• Take cues from the individual on what to discuss by considering the other person: if a student, consider the age, developmental level, etc. If an adult, let them share first.
• Remember that you have facts to share! Share with students with facts. Remind them that adults – in particular scientists and health care personnel – are working together to keep everyone safe. Discuss what “we” can do to stay safe and germs-free.

Classroom Conversations: Leading Classroom Discussions about the Pandemic

Classroom teachers may find this especially difficult if they are not trained in crisis response and/or are not familiar with how to address the needs of their students following a crisis. Following are interventions that teachers can provide to address the reactions of their students to a crisis situation:

Teachers should:
• Accurately and honestly explain what has happened to their students.
• Tell students the information in a manner they can understand, taking such variables as age and functioning levels into consideration.
• Consult with school personnel who are trained in crisis response and crisis intervention (e.g., wellness counselor, school psychologist, school social worker, guidance counselor) on how to most effectively address their students’ reactions to the crisis.
• Model appropriate expression of feelings for their students and let them know that they have permission to verbalize what they are experiencing.
• Reinforce that students should not feel they are “abnormal” or that they are
“going crazy.” Explaining to students that they will likely have a “normal reaction to an abnormal situation” can be helpful for them.

- Warn students that they may experience waves of strong emotions and coach them on how to effectively deal with them (e.g., by talking to others, looking to others for support).

- Give the opportunity to discuss their feelings and reactions to the crisis situation. The world as they know it has been threatened, their security undermined. They need to be able to discuss these feelings and know that their fears and reactions are shared by others.

- Listen in a noncritical and nonjudgmental manner, with empathy and support.

- Give students the opportunity to express themselves through other modes of communication (e.g., writing, drawing for younger children), especially those students who are hesitant to verbalize their feelings.

- Develop classroom activities and homework assignments that address students’ feelings regarding the crisis. Assignments that are a catalyst for group discussion are best and may facilitate empowerment at a time when many individuals feel a sense of hopelessness and vulnerability. Please see examples in the next section.

- Be vigilant for students who are experiencing significant difficulty in comparison to peers, and who may require additional and more individualized crisis intervention.

- Make time to explore and learn about students’ experiences, particularly listening to distance learning experiences as it will be an important part of the initial transition back.

- Create community meetings or “morning” meetings.

- Include writing, poetry, music, art, dance, drama – all considered regulating opportunities.
Specific Strategies

Reframing is a useful tool in communicating with students and others in the school community about experiences during the COVID-19 pandemic. Examples include:

<table>
<thead>
<tr>
<th>Defeating Thought</th>
<th>Positive/Empowering Thought</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Distancing</td>
<td>Physical or Spatial Distancing</td>
</tr>
<tr>
<td>Shelter-in-place is miserable</td>
<td>Others have done it, we can too! (Scientists in Antarctica, military personnel on submarines, etc.)</td>
</tr>
<tr>
<td>Self care</td>
<td>Career-sustaining behaviors, life/work balance</td>
</tr>
<tr>
<td>Students are not learning</td>
<td>We are learning, just in different ways</td>
</tr>
<tr>
<td>We need to lower expectations</td>
<td>We need to modify expectations</td>
</tr>
</tbody>
</table>

Social–Emotional Learning
Students’ basic needs must be addressed before they can be expected to excel at school. An example of an SEL application is the Sensory Trail; students can hop, skip, and tap their way through calming techniques in the hallway. By choosing to take time in the hallway, students can release frustration and get to a point where they are able to talk about and identify what is going on emotionally.

Trauma–Informed Practices
All members of a school community should understand how trauma impacts everyone. All teachers should be trained in providing trauma–informed care for students and colleagues. They should longer say “What is wrong with you?” but rather “What has happened to you?”

Resources:

Classroom Activities

- Classroom Activities for Reopening of School
- YouTube narration of The Yucky Bug - www.juliacookonline.com
- 6-minute SEL lessons ($20 for 150 lessons)
Mental Health Resources

- COVID-19 crisis and mental health resources - National Association of School Psychology
- Mental health resources in time of COVID-19

Trauma Resources

- Resources from Trauma Sensitive Schools
- Pandemic Resources from National Child Traumatic Stress Network

SEL Resources

- RULER Approach - Yale Child Study Center
- Early Learning strategies - Sesame Street
- Leveraging the Power of SEL as You Prepare to Reopen and Renew Your School Community
- SMCOE Mental Health Resources