Beyond Covid-19: Supporting Children, Families, & Staff to Reintegrate to the New Normal

“Trauma results from an event or series of events that is experienced by an individual as physically or emotionally harmful or threatening and has lasting adverse effects on the individual’s physical, social, emotional, or spiritual well-being.”

SAMHSA

“Disenfranchised grief”

Any grief that a society or part of it doesn't expect, openly acknowledge, or allow people to express or publicly mourn

• The loss of the “old normal”
• Hard for teachers to feel they can complain about the loss of not seeing the children, when they know people out there are dying
• The lack of recognition leads to a more complicated form of grief

Patricia A. Jennings (2020)
The impact of sheltering in place

Sheltering in place can be stressful and everyone reacts differently

- Anxiety about the situation
- Fear and worry about your own safety and that of your loved ones from whom you may be temporarily separated
- Uncertainty, anger, or frustration about how long you will need to remain sheltered
- Feelings of isolation, loneliness, sadness, or boredom
- Fear over loss of income
- Changes in sleep or eating patterns

COVID-19 and economic inequalities

People living in poverty are most affected due to:

- Longstanding segregation by income and race
- Reduced economic mobility
- The high cost of medical care and insurance
- Higher rates of chronic health conditions that increase vulnerability to COVID-19
- Lack of resources to prepare and protect against the coronavirus

Keeping it together

- Children are watching you and learning from you
- When children see you being your best self they can start to believe that they can be their best selves
- What are you role modeling?
  - Kindness? Patience? Caring?
- What is your body language and facial expression telling the children? Are you smiling?
- Be gentle with yourself and understand the trauma and grief you are experiencing
**Resilience and COVID-19**

- Finding meaning in adversity
- Recognizing strengths you did not know you had
- Reaching friend and loved ones through new means
- Connect with your colleagues - you are not alone
- Turn feelings of isolation into a sense of purpose
- Working together – social distancing

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**Trauma and children**

Trauma is any event or series of events that is perceived or experienced that undermines a child’s sense of physical or emotional safety and has lasting adverse effects on the individual’s physical, social, emotional, or spiritual well-being

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**COVID-19 is a Collective trauma**

- Repeated
- Prolonged
- In a constant state of elevated arousal
- Living day in and day out in a fight-or-flight mode taxes the brain and the body
- Has lasting effects
- Can raise the risk of developing subsequent health problems
Trauma related experiences include

- Domestic Violence
  - Living in an atmosphere pervaded by overwhelming fear and stress
  - Being directly assaulted or threatened
- Incarcerated family member
  - Averaging one in 14 children
  - Almost 3 times as likely for children living in poverty
- Disasters
  - Children process these events with a limited understanding
  - Recovery can take a long time
- Homelessness
  - 5 million children and their families are now homeless in America
- Discrimination
- Revolving foster care
- Bullying
- Repeated medical procedures or life-threatening illness
- The loss of a caregiver through deportation or migration
- Historical Trauma

Disaster’s effect and toxic stress/trauma

Children impacted by disaster may have difficulty with:

- Separation
- Feeling safe
- Self regulation
- Understanding required limits
- Staying focused
- Interacting with their peers
- Age appropriate behavior
- The impact may not appear immediately
- Recovering from a disaster is a long process

The context for each child experiencing this pandemic is different

- Children living in urban vs. rural settings
- Family SES makes a difference
- Parental stress due to change in available income
- Children of essential workers
- Children living in families who were at risk before COVID19
- Single children vs. those with siblings
- Children who have lost a loved one during the pandemic
Children pick up on the concerned messages of adults, hear snippets of disturbing news on media outlets, and may develop fears or anxiety related to the disruption of a normal life which included school and childcare schedules.

Sheltering in place has imposed an unprecedented social experiment on the country’s children that could have lingering effects long after the pandemic has been contained.

Sheltering in place and Domestic Violence

Many children are now locked-down at home experiencing domestic violence either directly or to others without the safety net that they had, their teachers, who they would see every day and could support them and mitigate the impact of their situation.
The cumulative effects of trauma and behavior

• Infants may:
  • be difficult to soothe and comfort - resist being held
  • not be interested in playing

• Toddlers may:
  • have temper tantrums
  • have difficulty separating
  • be withdrawn or aggressive
  • refuse to be comforted

• Preschoolers may:
  • be hypervigilant and aggressive
  • preoccupied with perceived threats
  • be unable to concentrate on anything else
  • have trouble learning, paying attention, processing and retrieving information, and controlling impulses

This is not just a regular transition back to school or childcare

• You have been through a tough time balancing:
  • work and family demands
  • financial concerns
  • worries about illness

• Even very young children sensed the global stress
• Children have had to manage this period of confusing changes
• Now they are encountering yet another big transition—going back to childcare
• Stress adds up and their resilience can be run down over time

Address your fears

You may notice that you are:
• Feeling jumpy and hypervigilant
• Feeling inexplicably irritable, angry, or numb
• Losing self-confidence and feeling incompetent
• Either avoiding children who’ve experienced trauma or worrying continually about them, even when at home

How will this affect your teaching?
Address parents’ fears

As children begin to return
• Reassure families that you’re committed to keeping their children safe
• Clearly describe the new procedures you’re implementing to protect their children
• Explain the new procedures
• Describe how your staff will enforce proper social distancing, wear PPE and disinfect surfaces frequently
• Reach out frequently to keep parents updated

Listen to the children’s worries

• It’s tempting to quickly reassure a child and move on
• Children feel safe and supported when you listen
• Acknowledge their feelings and concerns
• Help them to think through how to deal with them
• Notice nonverbal messages
• Children may “act out” their worry by:
  • Clinging
  • Becoming withdrawn or more fussy
  • Being more aggressive
  • Using more “baby-like” behaviors

The required modifications

• Staggering re-entry and drop-off and pick-up times
• Parents staying outside for drop-off and pick-up
• Screening children before they enter
• Physical distancing: 3-6 feet between children
• Lots of hand washing (20 seconds)
• Maintaining separate groups
• Providing distance between children during activities
• Limiting group times - restructuring outdoor time
• Seating everyone safely throughout the day
• Constant cleaning of toys and equipment including doorknobs and faucets
Stagger drop-off and pick-up

- Limit the number of children who arrive at once
- You will be better able to meet the children’s needs
  - They will have difficulty separating at the door and adjusting to the new normal
- Arrange drop-off and pick-up times

IN ADDITION
- Meet the child outside the facility at pick-up and drop-off
- Hand hygiene stations should be set up at the entrance
- Families should label and put blankets/clothing, etc. in bags, and leave outside the door

Help parents to create a special good-bye routine

Separation will be difficult, especially if families cannot enter the center or school
- Good-bye routines are comforting to children and help them understand and prepare for what will happen next
- Parents can give your child a kiss on the palm to “hold” all day long
- Sing a special song together before they leave
- A family photo or special object

Childcare groups should include the same children each day

- Children should be in the same room, with the same children and the same educators each day
- Consider creating a separate classroom or group for the children of healthcare workers and other first responders.
- If your program is unable to create a separate classroom, consider serving only the children of healthcare workers and first responders
- Stagger playground/outdoor times
Space arrangements to accommodate increased needs for physical distancing

• Limit the number of children in each activity/center space
• Increase the distance between children during table work, snack and meals
• Plan activities that do not require close physical contact between multiple children
• Minimize time standing in lines
• Separate cots and place children head to toe
• Open windows and allow for fresh air

Program arrangements to accommodate increased needs physical distancing

• Children should only interact with the other children in their own group
• Dedicated staff should work with each group
• Minimize the amount of time children are in close contact with each other
• Eliminate large group activities
• Separate children for table activities
• Limit item sharing
• Limit use of water or sensory tables

Incorporate frequent handwashing into your schedule

Washing, Feeding, or Holding a Child

It is important to comfort crying, sad, and/or anxious infants and toddlers

• Protect yourself
  • wear an over-large button-down, long sleeved shirt
  • long hair up off the collar in a ponytail
  • wash your hands, neck, and anywhere touched by a child’s secretions
  • Change yours and the child’s clothes if secretions are on them and wash their hands again
  • Place contaminated clothes in a plastic bag
• You and the children should have multiple changes of clothes at the center
Diapering
• Wash your and the child’s hands before you begin
• Prepare (includes putting on gloves)
• Clean the child
• Remove trash (soiled diaper and wipes)
• Replace diaper
• Wash child’s hands
• Clean up diapering station
• Wash hands
• After diapering, wash your hands (even if you were wearing gloves) and disinfect the diapering area with a fragrance-free bleach

Wash yours and children’s hands frequently
• Wash hands with soap and water for at least 20 seconds
• Alcohol-based hand sanitizers with at least 60% alcohol can be used if soap and water are not readily available
• Supervise children when they use hand sanitizer to prevent ingestion
• Assist children with handwashing, including infants who cannot wash hands alone
  • After assisting children with handwashing, staff should also wash their hands.
• Place posters describing handwashing steps near sinks

Developmentally appropriate posters in multiple languages are available from CDC

What is the impact on young children?
Think about how they feel when:
• They are told to keep a physical distance from their peers and others
• Teachers cannot hold or hug them
• There are no more group activities
• They can only play with the children in their group
• Not all of their friends have returned
• The adults, and maybe even the children around them, are all wearing face masks
Mitigating the impact of the “new normal”

- Answer questions in age-appropriate terms
- Ask what they know before answering
- Match their level of understanding
- Reassure, without providing complex information that can add to their confusion
- When you respond in reassuring ways, children internalize those positive cues
- Work on normalizing masks and showing children that when you put the mask on, you’re still there underneath

The importance of SEL

Early childhood trauma affects a child’s ability to:
- Recognize their own feelings
- Understand the feelings of others
- Identify social cues
- Accurately perceive the social environment

Children with increased Cortisol find it hard to:
- Control their impulses, emotions, and behavior
- Communicate their needs and desires in words
- Understand others’ feelings
- Form satisfying relationships

“Everyone is applauding everyone but our children! These little heroes have stayed indoors more than they’ve ever known in their lives. Their whole worlds have literally been turned upside down. All these rules they’ve never known. Loss of friends, family, daily activities, outings. A life they couldn’t have imagined. Adults talking about others becoming unwell, news reporting death after death. Our poor children’s minds must be racing. Every day they get up and carry on despite all that’s going on and all they’ve done is paint pictures and put stuff in their windows for the “heroes” out in the world. So here’s to our little heroes: today, tomorrow, forever.” - Facebook
Focus on building the children’s resilience

- Your relationship (attachment)
- Create a positive social climate
- Teach social emotional skills
- Provide opportunities for success
- Provide choices

Children need to feel safe

- Predictability
- Consistency
- Routines
- Rituals
- PLAY
- Encourage mindfulness

What you can do

- Avoid surprises
- Create a caring classroom community
- Focus on their social skills and self-regulation
- Provide multiple opportunities for play
- Read books about being afraid
- Focus on individual strengths and interests to build their mastery and self-efficacy
- Creative opportunities are important
- Make sure the environment is not over-stimulating
- Offer choices
- Have a quiet space where children can go
Keeping it together

• Children are watching you and learning from you
• When children see you being your best self they can start to believe that they can be their best selves
• What are you role modeling?
  • Kindness? Patience? Caring?
• What is your body language and facial expression telling the children? Are you smiling?
• Be gentle with yourself and understand the trauma and grief you are experiencing

Children who have experienced trauma

• May be easily triggered or “set off”
• May struggle with self-regulation
• May lack impulse control or the ability to think through consequences before acting
• May become easily overwhelmed - give up on even small tasks that present a challenge
• May behave in ways that appear unpredictable, oppositional, volatile, and extreme
• May react defensively and aggressively in response to perceived blame or attack
• May at times be over-controlled, rigid, and unusually compliant with adults
• May seem “spacey”, detached, distant, or out of touch with reality
• Are more likely to engage in high-risk behaviors

What behaviors can you expect?

• Separation anxiety
• Withdrawal
• Over excited
• Clingy
• Tantrums
• Frustration
• Crying
• Toileting issues
• Baby talk
A paradigm shift

Hard as it may be:

• Look beyond the behavior

• Respond to the child and his/her behavior with empathy and flexibility

• Instead of denying feelings, encourage the child to identify and tap into them

• Instead of asking yourself, “What’s wrong with this child?” start asking “What’s happened to this child?”

Challenging behavior often begins with Anxiety

The importance of how you respond

• Show that you care (unconditionally)
• Separate the child from the behavior
• Recognize and eliminate stress the child’s triggers
• Listen
• Don’t take things personally
• Focus on the positive
• Respect personal space
• Take care of yourself
Open Communication Strategies

• Connect
  • A smile or nod
  • Door Openers
    • Are you okay?
    • Would you like some help?
  • Open ended questions
    • Who, what where, when, how?

• Listen

• Comfort
  • Respond to the need within
  • Acknowledge, encourage

• Confirm
  • Use validation statements
  • Reframe

• Calibrate

Non verbal communication

• Allow your facial expression and stance to match what you are saying.
• Match their general stance.
• The quality of your voice should match the child’s voice.
  • Tone
  • Cadence
  • Speed
  • Volume

Use goal-oriented language

• Be positive
  • Tell children what to do, not what not to do.
  • Eliminate “No,” “Don’t,” “Stop” and “Why?”
  • Start with the child’s name
  • Be aware of what you say (content)
  • Be aware of how you say it (non-verbal cues)
• Recognize close approximations
• Ignore some behaviors
• Give children attention when they are engaging in appropriate behaviors
When a child is out of control

• The child no longer views the world from a rational perspective

• He/she is locked into a specific set of experiences connected to his/her life story that may, or may not be accurate

• Responds with pre-set feelings and “scripted” behavior

Circles of Comfort

The importance of non-verbal communication

• A gentle and positive tone of voice
• A calm facial expression
• A comfortable distance from the child
• A relaxed posture (arms at your sides, hands not on your hips!)

Always trying to understand what the child is feeling underneath his/her behavior
Resources

- [Re-opening guidelines available at](https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html#SocialDistancing)

Challenging Behavior in Young Children: Understanding, Preventing, and Responding Effectively
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THANK YOU and STAY SAFE