Socioemotional Considerations
Before and After Return to School

* Max. Banilivy, Ph.D.
* Director of Clinical Training and Education
* WellLife Network
Basic SD Considerations:

* 1: What was your school culture prior to the pandemic, particularly with regard to SEL and the implementation of the new Mental health Law-Curriculum?

* 2: Where do you stand with regard to School/Community/Family Partnership?
Basic SD Considerations:

3: What is your relationship with the PTA and PTOs?

4: Do you have a back to school multidisciplinary team consisting of a nurse, teacher, PPS Staff, administrator, parent, etc?

5: Do you have a sense of how your staff and families are doing?

6: Have you considered developing a survey that goes to all the families?
Basic SD Considerations:

* 7: Establish your own ACTION PLAN
* 8: Establishing the new normal by specific goals and objectives
* 9: Focus on what went right and not just what went wrong
* 10: Negativity and panic is more salient and can overshadow what is ok
Basic SD Considerations:

- Crises of any kind can increase mental health and addiction problems
- The statistics are noteworthy and should be reviewed
Basic SD Considerations:

* A poll by the Kaiser Family Foundation (see KFF Health Tracking Poll in April 2020) details estimates of the impact of COVID-19 on American lives
45% of those surveyed stated that their Mental Health was adversely affected by:

- There was an increase of 34% in use of anxiety medication.
- 18.6 increase in antidepressant medication.
- And an almost 15% in the use of sleep medication.
Companies/organizations providing virtual mental health services saw an increase of 50-65% during the months of Feb and March, 2020.
Which raises some important questions:

* What was your SD’s capacity/staffing for behavioral health support prior to the pandemic?
* Was IEP based counselling significantly taxing PPS staff availability?
* Were you short staffed to begin with in terms of PPS Staff?
What do you estimate, knowing your particular community, your need to be for Socioemotional Counselling and Behavioral Health Services as a result of the pandemic?
There is a growing evidence that the use of other drugs has also increased significantly for both youth and adults, particularly for those current pandemic creating even more vulnerability in this population needing Face to Face support. All the changes and stressors have increased risk for more use as well as relapse.
There has been an overall 55% increase in the use of online alcohol sales, however, in March the number was up to 300%.
What is the consequence of shocking and profound change in the lives of the families that we serve and work with? In particular will there be a difference in learning and acquisition of new skills academically as well as social and emotional adjustment of students coming back to school?
Uncertainty, unpreparedness, constant bombardment with BAD news has rocked the foundation of safety and security for your staff as well as the families in your respective communities.
* Will you know which staff have been more significantly impacted?

* How would you take the temperature of your staff as to whom may or may not be ready to resume on-site work?
There are clear differences in responses based on a number of factors including pre-existing conditions, genetics and RESILIENCE, just to mention a few.
Being sensitive to the shock reaction by some is important. Moreover, lack of preparedness, collective sense of helplessness, lack of control and induced hopelessness has created a fertile ground for despondency.
The pandemic may cause long standing and chronic consequences on an unprecedented scale impacting millions with the need for additional socio-emotional support and behavioral health services.
More severe reactions such as suicidal thinking/behavior and exacerbation of other self destructive behaviors may be evident on part of many youth returning to school. Almost 85% increase in gun sales in March raises a red flag in terms of gun related suicides.
With an already identified shortage in community based services, how will the school districts respond to the anticipated increased need for Behavioral Health Services?
The two year project with LI school districts:

* Identified additional resources
* Develop consultation model
* Partnership with Developmental and integrated pediatric practices
* The School Mental Health Model
* Developing a consortium with shared resources
What can be done on part to SDs post pandemic with the possibility of resurgence.

What kind of preparedness is possible with the uncertainty about the future and possible fiscal short falls for at least some of the SDs
A survey of Long Island and NYC families about going back to school yielded the following results for your review:

* 52% will send their children with social distancing
* Only 19% will send with no restrictions
* 16% will not send their children to school
* 25% will not get a vaccine once available
* 45% will not get a vaccine

* NYS is conducting a large scale survey at this point
Another survey conducted by staff with children, revealed the following concerns:

1: safety and security
2: uncertainty about the future and worries about when children go to school
The survey reveals:

* 3: Whether there will be adequate support for the socio-emotional needs of their children, lost time and how will be the adjustment back

* Interestingly enough there was less emphasis on the overall topic of academics

* Families are going to come back with very different needs
Schools as community centers will continue to be tasked with a wide range of items.

1. Developing more and stronger partnerships.
2. Families will be looking for facts, clear goals and objectives. They will ask for their worries to be addressed before they send their children back to school.
∗ As academic settings, the focus will be on testing and academic readiness and instructional concerns and issues.

∗ However, more than ever before they need to be attentive to the mental health readiness of the students and yes, the families contemplating coming physically back to school
What is being pushed more to the forefront is concerns about safety and security/coping skills and mindfulness. Is/are my children ok to go back to school?

The concept and area of Emotional Intelligence may be relevant as part of the SEL curriculum.
Emotional Intelligence: Basic components

- Teaching self regulation
- Motivation
- Empathy
- Social skills
- Self awareness
Mindfulness and meditation techniques for children will help with being focused and present.

Mindfulness: is the psychological process to purposely bringing one’s attention to certain experiences.

Meditation is a practice where one uses a technique such as mindfulness.
Sudden and frequent changes affect everyone in some way, even if not traumatic.

- Change does not have to be BAD, it depends on one’s experience of it.
- As education the way we knew it was interrupted, what else was compromised
Sudden and frequent changes affect everyone in some way, even if not traumatic.

* Encourage asking questions and anticipate them
* Any change is an opportunity for growth and yes, a lesson plan
* It also allows for integration and reintegration of many SEL Skills
* We all bounce back (RESILIENCE) by asking ourselves and the children how did we adjust and what did we learn from the experience of the pandemic.
Discussion of results of the survey of over 150 families with SED Classified children?

Transition to next Power Point Presentation
Do you have a SEL Guru in your building:

* How is this person available and used by the staff. More than ever before we need to look at how SEL Concepts and principle are integrated in the fabric and culture of your school buildings
This is a good time to ask about your building culture pre-pandemic considering the composition of your respective communities:

* How did you integrate SEL concepts?
* What did you do well with regard to SEL?
* Build on that success
* Involve families and the youth themselves in the process. They have a wealth of information about what worked and what does not seem to work.
Whether or not the pandemic was experienced as being traumatic by all, we need to ask if prior to the recent events our school was a trauma based school.
How we respond of course is a function of many variables including our coping skills as well as what has been taught and modelled for us. This is where looking at the ratios may matter in terms of percentage of students in each of the following categories:

* Tier I,II and III
Whether we choose to use universal measures for trauma like the ACEs or the Achenback Instrument or other universal screenings, we need to think about whether a data driven approach is right for you at this point.

Including the families and youth themselves in the process has become more necessary:
The Achenback instrument has a youth and parent version that can be electronically scored.

There are also many peer support and peer run programs that can be very helpful to your SD.
One such program is Sources of Strength is peer run and resiliency based to empower youth and provide support.

- This program was developed by the University of Rochester and there are local trainers available to provide the training for your school district.
One major area to attend to is suicide prevention, intervention and postvention.

* It is prudent to examine where the skill level of your staff are in this regard:
* There are trainings for teachers, youths, and all other staff.
* There are also online resources.
Some schools may need a paradigm shift, focusing much more on relational practices which is more consistent with a Trauma Informed environment:

- We need:
  - Skills
  - Support
  - Connections
A paradigm shift

- Connections involving a caring and compassionate person and community can result in building resilience

- Ask yourself, is our school community compassionate to all and if not, what do we need to put in place in anticipation of more sensitivity and more support
SEL Skills involve among others:

* Self reflection and engaging in conversations
* Identifying and understanding experiences and related emotions.
* What kids may need are questions/statements as follows:
  * How are you feeling today?
  * We missed you.
  * We have your back and will work together.
Some things to consider
Identify responses to stress
Being present- Mindfulness
Rearranging life and expectation to rearrange
Check in
Use circle time
Focus on authentic/caring connection
Moving forward:

- Provide opportunity to share as well as space to process
- Remember we have lived experience now
- Focus on what the behavior of the children means
- Review how everyone has coped
- Remember traumatic experiences can facilitate growth and resiliency
Moving forward:

* Assume everyone is grieving for different reasons. Some because they lost a loved one.
* Grieving may become or is already complicated for some.
* Prepare for grief (The Dougy Center)
For administrators:

* What are expectations of your staff. Some may be experiencing PTSD. How would this affect their readiness to help the students with similar challenges
Small actions well coordinated with the other team members including the families.

Teach how to listen:

1: Just to listen

2: Listen to give support, ideas and suggestion

IT IS OK NOT TO BE OK
BUT IT IS NOT OK TO NOT HAVE SUPPORT
Guidelines from SAMHSA (Substance Abuse and Mental Health Services Administration) on Trauma. Attend to the following:

* 1: Safety
* 2: Have trusted individuals
* 3: Collaboration
* 4: Peer support, empowerment and culture
Please visit the following Websites:

* National Education Association
* Trauma Informed Podcast Resource
* NCTSN (National Child Traumatic Stress Network) Website
* **School Mental Health Resource and Training Center
* WellLife Network Educational series
Socioemotional Considerations
Before and After Return to School

* Thank you.

* Q & A