Using Responsive and Culturally Sensitive Mental Health Practices to COVID-19 in the Classroom Setting

by Sonya Dinizulu, University of Chicago

Potential Mental Health Effects of COVID-19 Affecting Students

We are treading in uncharted territories. Uncertainty provokes anxiety, fear of the unknown, and stress and social distancing and isolation for weeks has most likely taken a toll on mental health.

The mental effects of COVID-19 itself are not yet known in the U.S. nor are we able to assess the effects of the fear generated by potential contamination. In similar disastrous situations, children who were isolated or quarantined during pandemic diseases were more likely to develop acute stress disorder, adjustment disorder, and grief and about 30 percent met the clinical criteria for post-traumatic stress disorder.[1] Furthermore, separation from parents or parental loss during childhood also has long-term adverse effects on mental health, including a higher risk of developing mood disorders and psychosis.[2] Unfortunately, there is no existing data that gives us a clear picture of how students will be affected long-term by COVID-19.

COVID-19 and Communities of Color

For communities of color (of all socio-economic status), COVID-19 has made the social and structural inequities that exist among students and their families—particularly in the African American, Latinx, and American Indian communities—even more apparent. Students in these communities are more likely to have, and therefore have to worry about, an adult in their lives that is an essential worker and at greater risk for contracting the virus. They may also know that their loved one has a greater risk of serious complications or death due to the fact that Black and Latinx people are at greater risk for comorbidities. Unfortunately, some youth have seen deaths within their family network.

While loss is a powerful stressor, we must also consider how the lived experiences of racism, heightened sense of fear and anxiety growing when trust and safety is significantly compromised by authorities, and coping with microaggressions and discrimination, further exacerbates the isolation and alienation that COVID-19 has imposed upon us. Getting help to cope with these stressors is difficult to access and find. Countless studies show that the utilization of, access to and provision of quality mental health care services is lower in communities of color.[3] The pandemic's impact on racial and structural inequality cannot be ignored. Given these disparities, the educational system must ensure that the staff and teachers prevent further isolation, and re-traumatization of these students in the midst of a pandemic.

Helping Students Cope with Grief

Whether or not students experience death in their own families, it is inevitable that students will learn of deaths in the community, especially in African American and Latinx communities. It is also important to consider that in these particular communities, grief may not always be related to death itself. Students may be grieving loss of quality of life related, such as being homeless, familial employment, food and safety insecurities, and increased exposure to violence. These stressors affect the entire family system, and it is important for educators and staff to learn what kind of loss students are experiencing and be responsive.

Teachers can collaborate with family members to discuss ways to reassure the affected student impacted by grief and/or loss. When satisfying reassurances are not possible, instead focus on the steps that are being taken by the school and the student's family. Keep routines and rituals intact, provide teacher-student, and peer-to-peer social supports, and opportunities to grieve in a safe space at school when needed. Positive experiences, fun, and enjoyment are very important in supporting a student's adjustment to a death in the family or loss, and should be encouraged, letting them know that life will continue and that it is OK to have fun and to laugh and it is OK to feel sad and angry. Shared activities with families, friends, and teachers and staff siblings or even solitary engagement in other pleasant or enjoyable activity can be helpful.

Evidence-Based Practices and Strategies to Cope with COVID-19 in the Classroom
Not everyone who is affected by COVID-19 will respond or cope in the same way. However, evidence based interventions such as Psychological First Aid for Schools, that can be universally implemented in school-based settings to mitigate negative effects and promote resilience. Therefore, a trauma-informed mental health approach is also essential to help school communities feel safe and supported during times of danger and adversity.

Psychological First Aid for Schools (PFA-S) is an evidence-informed intervention model to assist students, families, school personnel, and school partners in the immediate aftermath of an emergency or during sheltering in place.[4] PFA-S provides eight core trauma-informed actions that schools educators and staff can use to model on how to respond to COVID-19. A tool kit is available for free [here](#).

Practical Coping Strategies

Educators can also look to the following to help establish feelings of emotional and physical safety for students.

A. Routines and Rituals: By providing a sense of safety, predictability, and consistency routines and rituals allow for students to have a sense of control in a chaotic world. One of the most important daily rituals in a classroom setting is greeting each student at the door with a welcoming, personalized hello. Teachers and staff are encouraged test many versions of rituals and routines to help mitigate stress and trauma related to COVID-19 and implement their strategies with consistency.

B. Stress Management: Child stress stems from a number of factors and can be best addressed by learning what the problem is, what may be causing it, and then taking steps to help a child feel more relaxed. Teachers and staff may not be able to learn the causes of stress for individual students, but implementing daily and consistent stress management habits can help improve student behaviors. Student may find mindfulness strategies such as grounding techniques, slow and controlled breathing, stretching, listening to music or nature sounds in the classroom rewarding.

C. Psychoeducation: Psychoeducation is an evidence-based therapeutic intervention that provides information and support to better understand and cope with mental health concerns. For schools, psychoeducation about COVID-19 is advised to include:
   1. **Welcome students' questions and don't avoid** questions you can't answer. Given how much uncertainty there is, try to be comfortable saying "I don't know." Tolerating uncertainty is key to reducing anxiety and depression and instrumental in building resilience;
   2. **Set the tone.** Look at these conversations as an opportunity not just to convey the facts but set the emotional tone;
   3. **Be developmentally appropriate.** Don't volunteer too much information, as this may be overwhelming;
   4. **Focus on what you're doing to stay safe.** An important way to reassure students is to emphasize the safety precautions we all can take to stay safe. Promote living by facts and not by fear.
   5. **Keep students updated.** Tell students that you will continue to keep them updated as you learn more;
   6. **Normalize** exposure to COVID-19: "You're not alone/not the only one," "COVID-19 can be scary." Clear communication, accurate information, and planning are ways to reduce anxiety, especially during the transition process back to school.

D. Validate Emotions and Empathize: It is important for students to expand their emotional vocabulary, while learning to *identify*, *express*, and *regulate* their feelings related to COVID-19, and additional stressors. Feeling charts can help students label emotions

and check-in about how they are feeling and remind them to use stress management strategies to regulate the intensity of their emotions. Reminding students that it is okay to not be okay and keeping them in the present moment can help them build stamina to tolerate intense emotions. Telling students "to not worry," or "don't feel that way" is invalidating their lived experience and reduces opportunities to discuss how they truly feel. You should let them explain how they're feeling and express why, and validate those feeling by saying things like, 'I have similar worries. Let us brainstorm ideas on how we can make things better.' All emotions are healthy to experience.

E. Problem Solving: Utilized in many therapies, problem solving skills have been linked to favorable mental health outcomes and may make students less vulnerable to emotional and behavioral problems. These activities promote independent thinking and build confidence. The Problem-Solving Box is a popular classroom activity. Invite students to anonymously write down and submit any problem or issue they might be having at school or at home, ones that they cannot seem to figure out on their own. Once or twice a week, have a student draw one of the items from the box and read it aloud. Then have the class as a group figure out the ideal way the student can address and hopefully solve the issue.[5]

Selected Resources:
- A Kid's Guide to Coronavirus
- Concerns for the Mental Health for Children during the Coronavirus Pandemic
- Psychological First Aid for Schools
- Trauma Informed School Strategies During COVID-19

Sonya M. Dinizulu is a licensed clinical psychologist within the section of Child and Adolescent Psychiatry at the University of Chicago Medicine Comer Children's Hospital. Her research is an extension of her clinical interests, which emphasizes developing and implementing community-based service delivery models to promote mental health and positive youth development for urban children and adolescents exposed to violence.

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