# Restarting Schools in Fall 2021: Can We Do It Well?

By Karen Gross\*

## Introduction:

The title to this essay asks a question that truly matters: Can we reopen schools in Fall 2021 in ways that benefit our students and enable their optimal learning and psychosocial development? The simple answer to this complex question is three letters long: YES. But, the vastly harder issue is how to give meaning to the just provided positive answer and therein lies the heart of this essay.

A few initial observations affect this "yes" answer. We all recognize that the Pandemic has had a wide and deep influence on our lives and on our schools and our social service agencies. We have experienced directly or indirectly the illness of deaths of many people, both near and far. We have experienced or witnessed food shortages, job shortages and homelessness. We have experienced social distancing and mask wearing. We have experienced a rise in family dysfunction, including increased drug and alcohol use and abusive behavior. We have experienced schools' closing and reopening, whether to provide online, hybrid or in person learning.

But, there has been more than the Pandemic that has affected our students and our teachers, school counselors and school-based social workers. Over the past 18 months, we have witnessed unspeakable violence. There have been a swath of mass shootings. There have been police killings of members of minority populations. We have seen a raid on our Capital that resulted in injury and death. We have seen a car ram directly into Capital police officers, one of whom died at the scene.

We have also experienced or witnessed racial and ethnic discrimination, including in Pandemic healthcare outcomes and vaccine discrimination. There have experienced or witnessed insulting words and physical assaults on black and brown individuals. There have been sharp divides within the political sphere and repeated media coverage of false claims made by elected officials. We have experienced or witnessed natural disasters of extraordinary proportions, including floods and fires.

And, it is in this context – and context matters – that we will be reopening our public schools in the fall of 2021.

# Trauma's Impact

Pre-Pandemic, many individuals had experienced trauma; indeed, the data show that at approximately 50% of all children and 65—70% of all adults have had at least one traumatic event in their lives. Given the Pandemic and the added difficult and threatening events occurring in that same time frame, we can expect that the vast majority of children and adults have been traumatized over the past 18 months. While Bessel van der Kolk recently observed in an online course at Rutgers Graduate School of Social Work that the Pandemic is not per se traumatic, it remains true that the impact of the Pandemic on families, communities, workplaces and schools oft-times is traumatic and produces trauma symptomology.

We know, too, that trauma affects different people differently. There is acute trauma symptomology – commonly termed the five "f" that are triggered by the autonomic nervous system (fight, flight, freeze, fawn and faint); then, there is deferred trauma symptomology that is triphasic: dysregulation, dissociation and overregulation.

Whether acute or deferred, we know that trauma affects our brains – not only our thoughts and feelings and behavior but the actual neurological structure within our brains and bodies. Trauma shuts off neural pathways. It negatively impacts our memory, our concentration, our capacity to learn, our cognition and our connectedness to others (exacerbated by masks and social distancing).

As described in *Trauma Doesn't Stop at the School Door* (Teachers College Press, 2020), trauma impacts learning and psychosocial skills and trauma experienced by students can be transmitted (almost like a virus) to those who work with students: educators, social workers and healthcare professionals.

It is for these reasons that we need to be deliberate in our thinking about how educational institutions and social service organizations that serve families can best address the reopening of schools in August/September 2021. It is not sufficient to just "reopen," as if schools and social service agencies operate like light switches. We cannot just focus, as we are doing far too often, on physical wellbeing (as important as that is). Instead, we need to plan and prepare for reopening with trauma responsive strategies, trauma responsive pedagogies and trauma responsive environments. We need to open with a focus on mental wellness.

## **Selected Strategies to Consider Implementing**

Start with this reality: there is no single reopening strategy for schools/organizations. Context matters; culture matters; community engagement matters. So, while strategies can be identified, they need to be tailored to particular locations and individuals. We may crave for a one-size-fits-all answer to how to reopen optimally in the Fall of 2021, we have to be

sufficiently nimble and flexible to take suggestions that are trauma responsive and adapt them to particular situations and individuals. And, especially for those in the caregiving or service professions, we need to be mindful of the impact of the trauma they themselves experience; stated most simply, one can't pour from an empty cup and we need to create ways to help those who help others.

What follows are three reopening strategies focused on psychosocial wellness that should be considered, remembering that these are not the only available approaches and other suggestions can be layered on top of these suggestions.

#### Strategy One:

Sadly, we often work in silos. Educators work in silos, within the schools and disciplines. School nurses, school counselors and school social workers often operate in their own sphere, with notable lack of coordination among them. Strategy One is that we need to create trauma responsive teams (TRTs) with members across disciplines to prepare and plan for school reopening and to be present for and available to all individuals (students, educators and parents) when school actually reopens.

TRTs need to be established now, so there is adequate time for the teams to prepare/plan and work together. TRTs can train educators (and staff) within schools and social service agencies to prepare those who work there to be ready for a traumatized population that will be seeking their services. Importantly, we should not limit this training to teachers and school psychologist and social workers. We need coaches and receptionists and food service workers and maintenance worker and bus drivers to receive training.

#### Why?

We need broad based training because students may show trauma symptomology in a myriad of settings, and we cannot say with any degree of certainty that the symptoms will only occur in classrooms. Students can exhibit trauma symptomology on athletic fields and in lunch lines and in school busses and on playgrounds. It is not as if trauma only comes out in the offices of school social workers!

But, training isn't enough, as important as it is. We need for the TRTs to be available when school reopens for appointments and drop ins. A team member should be at the front door for weeks to welcome students into schools or organizations. With so little human contact over the past 18 months, we need to welcome children and adults back sensitively and slowly. People aren't like race horses or race cars where they can go from a full stop to full speed once the gate/door opens. And, we should not even have that expectation.

I recently watch the Kentucky Derby where 19 horses were racing. Bets were placed and there were some horses that were odds on favorites. But, the favorites did not win. A horse with 12-1 odds won and that horse was not the best bred or the most expensive animal racing. Some

have asked: Is credit due to the horse, the trainer or the jockey? I think the answer is they all deserve credit for the success because each is needed on the pathway to a win.

And so it is with students. We need a myriad of individuals and institutions pulling for them to succeed in a world filled with challenges (the equivalent of 19 equine competitors and a large noisy crowd and unexpected noise).

Schools and organizations should designate specific rooms where a TRT member can be situated each day for the first several weeks of school/organizations. Bringing in group of outsiders who are unfamiliar with the particular institutional and community culture – howsoever well they are trained – is not an optimal solution. Students and educators and social workers and clients – whomever a school or organization serves and who work there – need access to a room with trained personnel who can listen well, enable them to get their automonic nervous systems under control and their deferred trauma symptomology named and tamed. Just the regular presence of individuals who can provide help is beneficial, even if someone does not partake of what is offered.

TRTs are a pathway to creating a trauma responsive institutional culture. They message by their very existence and by the supports they provide. One added analogy: When we have an acute trauma (a fire, a flood, a shooting), we often offer survivors immediate support that takes many forms, including psychological first aid. (FYI, one can become a certified psychological first aid provider). Part of the reason this system is in place is that we have experience with acute traumatic events.

Sadly and perhaps because it is less common, we are not as experienced in dealing with chronic, ongoing trauma. The Pandemic fits into this category. So does systemic racial and ethnic discrimination and harassment. We are less effective at strategies to handle these persistent traumas, despite the need for responsiveness. TRTs are one approach for providing a longer lasting approach for dealing with chronic trauma that individuals experience.

#### Strategy Two:

When folks return to a space and place that they formerly occupied, what are their expectations of that space? Will it have changed? Will the space have new features to which one needs to adjust (like desks moved farther apart and partitions)? Will what was on the walls (some created by students) still be there, an issue that has heightened importance perhaps in elementary schools? (For those changing schools, the issues are larger and more complex, and I leave them for another day giving how difficult transitions are for us all.)

Space and place message, as Tony Hiss so aptly observed in his book, *The Experience of Place* (1991). So, we have an opportunity to create and message differently with our space/place, while preserving key items that bring back positive memories. Consider, for example, dedicating a wall (ideally a large blank wall) where students, educators and social workers and clients can post their thoughts/feelings on post-it notes anonymously. Imagine many people

feeling free enough to both identify and share feelings. Call it a form of installation art. Photographs could be taken and then mugs or placemats created to memorialize the moment we are in.

This is important because while we may want trauma to disappear, it does not. Once traumatized, forever traumatized, although the symptomology can be ameliorated through a myriad of existing and being developed approaches. So, recognizing and in essence honoring "trauma" makes it easier to appreciate that not everything can be erased.



There is power for those who post and there is power for those who read what is posted, especially if they read feelings or thoughts that mirror their own. It is beneficial for those who are traumatized to realize that while they may feel alone and feel they are the only one experiencing a particular thought, there are others who share their feelings/thinking.

In addition to commenting on a wall, consider institutions that lift up floor tiling and replace it with writing boards with buckets of chalk nearby. As individuals walk through the halls, they can write under their feet what they are thinking and feeling. And, as with the wall posting suggested above, feelings may change depending on the time of day, where on is in the building and the experiences of one's day. At the end of each day, these chalkings can be washed off and the next day, members of the community and write again as they proceed through their day.

Like the wall postings, these floor chalkings can be photographed and shared. One could even create a book of the first 30 floor images created and accompany them with poems or essays written by members of the community. The point of all of this is that we do vastly better acknowledging trauma; we do vastly better when we see that it does not disappear; we do vastly better when we see that we are not alone; we do vastly better when we realize that our feelings can and do change over time.

For a sample of a similar approach, writing about traumatic experiences as a community, see the book, *Eight Blocks Away*, released by New York Law School following 9/11 and reissued on the 10<sup>th</sup> anniversary of that tragic event. It allowed all members of the community to share their thoughts, whether they were there on site that day as eye witnesses to the events or from afar, watching on television or listing on the radio. The book is available free of charge and can serve as a prototype for how to think about memorializing traumatic events: https://digitalcommons.nyls.edu/tribeca\_square\_press/3/.

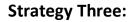
There is one other huge benefit to wall postings and floor writing: if and when new trauma occurs (which it will, given all that is happening in our world), that new trauma often retriggers earlier trauma. So, if there are opportunities to address retriggered trauma, that will help with its amelioration.

Think about it this way. We all carry invisible backpack filled with trauma and the size of our backpacks differs from person to person. When trauma is retriggered, our backpack grows heavier with the new trauma and the arousal of the pre-existing trauma. But, if we know we and others have these invisible backpacks, we will do better at managing the trauma symptomology that is expressed.

# TRAUMA IS AN INVISIBLE BACKPACK WATCH FOR RE-TRIGGERING: IT MATTERS







Embedded in the previous two strategies and unearthed here, we need to create connections across individuals within institutions that are reopening. We need to help students connect to each other. We need to find ways for adults (whether they are educators or school counselors or social workers) to connect with those whom they are teaching or counseling. The recently developing data on Positive Childhood Experiences (PCEs) and Positive Adult Experiences (PAEs), including the work of Dr. Christina Bethell on the impact of PCEs on adult mental wellness, support the critical role connection and reciprocity play for those who have been traumatized.

We know that our brains are wired for connectivity. We know too that trauma literally truncates connectivity, including through the shutdown of neural pathways. We also know that masks and social distancing exacerbate this sense of disconnection. Online learning has, for many, also contributed to the lack of a sense of connectivity.

There are many pathways for creating connectivity and we need to be mindful that it is not instantaneous. As I often say: Think Rome; it wasn't built in a day. Neither is connectivity and reciprocity. There needs to be trust established and in a world filled with trauma, that isn't immediate.

Indeed, initially, reciprocity and connection between educators/social workers and students/clients may at first be "one way," with the professional reaching out and getting little or nothing in return. But, over time, students/clients can come to trust and connect with another – a non-family member. This non-family member has to genuinely and authentically believe in the student/client, and that belief is what allows connection to be created.

To this end, I am reminded of dialogue in the magical book by Charlie Mackesy titled **The Boy**, **The Mole, The Fox and the Horse**. The boy say to the horse, "Sometimes I think you believe in me more than I do." And the horse responds, "You'll catch up."

There is an additional way to create connection between individuals: linking together physical objects. Picture giving everyone a box of colorful paperclips. Each person can create a chain of paperclips (ideally three or six feet long); there is power in just physically connecting one paperclip to another. Then, students/adults can fidget with the links they have created. And, students can link to each other or they can link to adults; they can create extended chains. This is messaging connection kinesthetically. And, the paperclips can lead to other discussions surrounding color. For example, one can ask students/clients: What color of paperclip do you feel like? In short, one box of paperclips goes a long way.

# **Conclusions:**

The suggested three strategies (in all their dimensions) can improve the reopening of schools and other settings provided services if they are implemented. To repeat, these are not the only available strategies. But, as a collective, they alert us to the importance of preparing and planning for reopening. It is not too late to start now. Indeed, we need start now – for the benefit of students and clients and all the professionals with whom they work.

While the suggested strategies have some costs attached to them, here is a critical point: these are doable strategies. The hard part isn't doing the strategies. The hard part is convincing people that they are worth implementing them. I hope this article helps in that effort.

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