

HEALTHY YOUNG MINDS

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WHAT'S INSIDE

A Message From MHANYS CEO	pg. 1
In The Nick of Time: Mental Health Education in Schools	pg. 1-2
It Takes a Team: The Important Role of School Social Workers...	pg. 2-3
Preparing to Go Back to School	pg. 3-5
Using Healing Circles to Address Social Emotional Well-Being With School...	pg. 5-6
COVID-19, The Return to School and the School Counseling Program	pg. 7-9
Triaging Students' Social and Emotional Needs Upon Return to School	pg. 9-11
Educators Reflect on Last Spring's Remote Learning, Prepare for New...	pg. 11-14
The Resource Center Hosts Online Panel Discussion with Educators	pg. 14-15
Did you know? How Teens Are Coping with the COVID-19 Pandemic	pg. 16



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A Message From MHANYS CEO

As schools ready for the return to the school building during this pandemic many are burdened with feelings of uncertainty, trepidation and even fear. More than ever, teachers and health and mental health professionals must all work together to help assure that students and staff alike are prepared physically and emotionally for the work at hand, even in the midst of a public health crisis. That's why this issue of Healthy Young Minds features advice from a variety of education-related disciplines. MHANYS thanks the New York State School Social Workers' Association, the New York State Association of School Nurses, the New York State School Counselors Association, New York State United Teachers, and the New York Association of School Psychologists for their contributions to this newsletter. The collective wisdom of these organizations is vital for the days to come. We wish all of our schools here in New York a healthy and productive return to school.

– Glenn Liebman, CEO, MHANYS

In The Nick of Time: Mental Health Education in Schools

In 2016 New York became the first state in the nation to require schools to teach students about mental health. A short two years later the law became effective and schools began developing curricula and lesson plans in order to comply. It didn't happen overnight and the process is still evolving according to Amy Molloy, Director of MHANYS School Mental Health Resource and Training Center. But one thing is clear; in the midst of a global pandemic that's challenging the mental well-being of our nation, including, worryingly, children and teens, the passing and implementation of the law came just in the nick of time.

Before the pandemic, New York, like the rest of the nation, was already experiencing a mental health crisis among our youth. According to the Center for Disease Control (CDC) it is estimated that 21% of youth ages 9-17 experience some type of mental health condition across the U.S. Unfortunately only 16% of those with a condition receive any treatment.

The pandemic has only made the problem worse. A recent Gallup poll showed that nearly 30 percent of parents said their children's emotional or mental health was harmed by COVID-19-related restrictions. A second survey from June 5 to June 10, 2020 published in the journal Pediatrics found the following:



- 27 percent of parents reported worsening mental health for themselves;
- 14 percent reported worsening behavioral health for their children;
- 24 percent of parents reported a loss of regular child care.

Compounding the problem, 70-80% of those who were receiving care prior to the pandemic (the 16% previously stated) had received their care in a school setting, which these youth have been deprived of since March, 2020. When the return to school does happen, not only will these students be "behind" in their treatment, there...

...will be even more students in need of care.

The good news in all of this is that schools are now empowered to teach about mental health with resources available to aid them in that role through outlets such as the School Mental Health Resource and Training Center. It's also good news that youth are paying attention. An Allstate Foundation survey of 1,000 teens (13-18 years old) reported that young people are speaking clearly about their needs. According to Allstate Senior Vice President Stacy Sharpe, social and emotional learning needs are a priority right now and she says that "we know skills such as empathy, stress-management and resilience are critical to young peoples' success in life".

More survey work confirms the readiness of youth to learn about mental health. A survey commissioned by the National 4-H Council said that more than 7 in 10 kids between the ages of 13-19 are struggling with their mental health (see "Did You Know" section of this issue of Health Young Minds for further details). Importantly, the survey also revealed an awareness among teens of their needs and a desire for information and opportunities to talk about mental health. Reportedly, 82% of teens in the survey are calling on America to talk more openly and honestly about mental health issues in this country. In addition, 79% of teens surveyed wish there was an inclusive environment or safe space for people in school to talk about mental health.

These responses represent a clarion call to parents and educators to provide life-saving, accurate information about mental health along with judgment free, safe environments to process and discuss their mental health. The relatively new mental health education law provides this opportunity and the forum for such conversations. The COVID-19 experience has elevated mental health in the collective conscious perhaps higher than it's ever been, apart from fleeting attention following tragic events such as mass shootings. This is different. We will be talking about and studying the impact of the pandemic on our nation's mental health for years to come. Let's make sure that youth are part of that discussion.

It Takes a Team: The Important Role of School Social Workers, Especially During COVID-19

NYSSSWA: Margaret Barrett, LCSW-R; Julie Beatrice, LCSW-R; Wendy Castiglia, LMSW; Kelly Hannon, LCSW-R; Dot Kontak, SSWS, LCSW; & Tricia Zupan, LCSW

It's "Back to School"— a time filled with the excitement of new beginnings as schools and teachers gear up for another year to provide structure, routine, and excitement for learning. Last March, COVID-19 suddenly disrupted these constructs and continues to create uncertainty, apprehension and even fear as districts, staff and parents explore what form "Back to School" will really take.

Regardless of what format, schools offer unparalleled access to students to address both academic and mental health needs. The hiring of sufficient numbers of Specialized Instructional Support Personnel (SISP) i.e. school social workers, school psychologists, counselors and nurses to address the wide range of issues presented by students, families and staff especially during this pandemic will be imperative. Each professional serves a distinct and significant role in providing a multi-tiered system of supports. As licensed clinical social workers, School Social Workers are trained mental health professionals skilled at screening, assessing, monitoring and providing direct consultation and...



...clinical intervention to students and staff on site and in real time.

Due to COVID-19, members of the school community may be struggling with the death of a loved one, fears of contracting the disease/infecting others, the after effects of their own infection, financial insecurity, loss of control, social isolation, child abuse, domestic violence, etc. We know that children are even more vulnerable to these kinds of traumatic events and will require differentiated teaching as well as strong support systems.

The coronavirus only exacerbates prior adverse childhood experiences (ACEs) that children were dealing with pre-pandemic. As a result, School Social Workers continue to assist districts in the development of trauma informed schools or other school wide programs to provide safe havens to build positive connections, trusting relationships, and a sense of belonging. School Social Workers provide in-service training on mental health issues and the effects of trauma as well as work closely with teachers regarding restorative behavior management



techniques to address the various ways that children exhibit grief, loss, anxiety and stress. When outside mental health services are needed, School Social Workers connect families with community based mental health providers as well as supply follow up case management to ensure coordination of services.

In addition to being on-site mental health professionals, School Social Workers serve as the vital link between school, home and community working closely with parents to assess problems that may be affecting a child's educational adjustment or even engagement in learning. Whether attending school or participating in virtual learning, families will find different levels of relief as well as additional stressors. Juggling childcare; fearing for a child's physical, social and academic well-being; playing the role of teacher; trying to find work; paying

bills and keeping food on the table; facing potential eviction; coping with domestic violence/abuse; and dealing with the inequities of racism are just some of the concerns that may contribute to how children adjust to learning during this pandemic. School Social Workers work with families to address and/or obtain community resources to help relieve these kinds of family stressors that may be impacting their child's educational functioning. At the community level, School Social Workers also work on interagency teams i.e. food banks, social service agencies, etc. to provide improved and coordinated services to families.

"Back to School" is going to be more challenging than ever before. Adequately staffed SISP teams will be critical to help alleviate the numerous sources of distress impacting children, families and educators. Working closely as a team, each profession provides unique skill sets to address the myriad of barriers to learning in order to reduce stressors and provide an optimal environment for education in whatever form that takes so we can all get through this together.

Preparing to Go Back to School

Lou Ann Gleason, MSN RN, NYSASN President

There is a lot of conversation going on in the media about the uncertainty of going back to school. With all the issues surrounding the COVID-19 Pandemic, the role of the Registered Professional School Nurse is more important than ever. As the President of the New York State Association of School Nurses (NYSASN), I am pleased to let you know that our organization was represented on the New York State Education (NYSED) Task Force Committee as the discussions were held to plan for the safest way to make the transition back to the in-person learning environment. This included advocacy for the presence of a full-time Registered Professional School Nurse in every school building. When schools reopen, it is imperative that school nurses are available and ready to assess students and implement health and wellness plans to address the individual needs of students and keep them healthy, safe, and ready to learn at school. (CONTINUED ONTO NEXT PAGE)

Back to School Resources



As we prepare for that return to our schools and the classroom, there are a few important things that each of us can do to be proactive in protecting ourselves. One of the best things we can do to accomplish this is to practice frequent proper handwashing for at least 20 seconds or the time it takes to sing the tune "Happy Birthday to You" twice ([CDC handwashing poster](#)). Another way to protect yourself is to use good cough and sneeze etiquette by using a tissue, your elbow, or your sleeve, if a tissue is not readily available ([CDC coughs and sneezes poster](#)) ([CDC germs poster](#)).

Some other important reminders are to: avoid touching your eyes, nose, and mouth with your hands, avoid being around people that are sick, wear a face mask when you are out, practice social distancing, and clean and disinfect frequently touched surfaces, such as cell phones, tablets, door knobs and faucet handles ([slow the spread poster](#)).

As we move into cold and flu season, it is also a great idea to get plenty of rest, stay active, drink plenty of water, and eat well balanced meals to stay healthy ([flu information for parents](#)).

A very important factor in being prepared to return to school and trying to keep students healthy is to make certain that students have received the immunizations that are required for attendance. These immunizations are a requirement even if the student is attending virtually ([NYS DOH Immunization Laws and Regulations](#)). A visit to the primary care provider to update those immunizations provides a great opportunity for a well child physical.

When we go out of our homes to the bus stop, ride the bus, and attend school, we will all be required to wear a face mask, just as we have been doing for months now. Students should be informed that their friends will also be wearing masks along with their bus drivers, school staff members, teachers, and their school nurses. This will help alleviate their worry as they begin to see this as a part of their daily routine. There will be a great deal of education offered and signage up on how to properly wear their masks, how to remove their masks, ([CDC mask washing instructions](#)), and how to wash their masks so it can be done in the safest manner possible, and how to maintain our social distance to prevent the further spread of disease ([CDC space between you and others poster](#)).

When our schools return to in-person session, our students and staff members will be asked to answer daily questions before getting on the bus or coming to and entering the school building to help stop the spread of illness and maintain the health and safety of our school communities. Some of the screening questions that we will all have to answer will be to discover if we are experiencing any COVID-19-related signs or symptoms in the last 24 hours. Some of the typical signs and symptoms include: fever (temperature of 100 degrees or above without the use of fever reducing medication), new loss of taste or smell, muscle aches, sore throat, dry cough, being short of breath, having chills, headache, nausea, vomiting, and/or a loss of appetite, if we have been in contact with anyone that was sick or diagnosed with COVID related illness, instructed to quarantine, or had traveled to an area of high incidence of cases ([home screening checklist](#)). (CONTINUED ONTO NEXT PAGE)

If any of the answers to these questions are reported to be yes, the student or staff member should not be at school. They should stay at home and follow up with their primary health care provider. If students or staff members present to the school nurse with COVID-19 signs and symptoms during the school day, they will need to be isolated from the rest of the school community until they can be safely sent home or for follow up care with their primary care provider and testing ([CDC K-12 screening information](#)).

This was also the recommendation from the NYSED in their reopening guidance plan ([NYS SED Reopening Guidance](#)). School nurses will be using guidance from the CDC, NYSDOH, NYSED, and working closely with their local health departments for direction and contact tracing.

Our school communities are continuing to prepare for the unexpected. School nurses are in a position in the school community to make a difference. We deal with the threat of communicable diseases on a daily basis and are on the front lines, poised and ready to take action as we share our knowledge about communicable disease prevention, case-finding, and treatment to help alleviate some of the fear in the community.

Using Healing Circles to Address Social Emotional Well-Being With School Communities

Jolene DiBrango, NYSUT Executive Vice President

COVID-19, the closing of schools and the “pause” of the state in March and April of 2020 and subsequent social unrest has had a profound effect on the lives of New Yorkers. No one can predict all the challenges we will face as the state reopens and students and staff return to school for the 2020–21 school year, whether in-person, virtually or some combination. It is important to acknowledge the trauma students and staff have faced and the need to intentionally address the social emotional well-being of the members of the school community.

The State Education Department (SED) in its reopening guidance recognized this need when it stated: “Along with physical health and well-being, schools and districts must also prioritize social emotional well-being — not at the expense of academics, but in order to create the mental, social, and emotional space for academic learning to occur.” According to SED, a reopening plan should outline how the district will support student and staff emotional well-being; it is, in fact, the first priority mentioned in the guidance.

One of the greatest challenges educators will face under each of the three instructional models— in-person, remote or a combination of the two — will be ensuring the social and emotional well-being of the entire school community after this period of crisis. The pandemic exposed a deep educational inequality and the murders of George Floyd, Breonna Taylor and others exposed deep social injustice. Economic uncertainty and COVID-19 had a disproportionate impact on the most vulnerable. The pandemic highlighted the lack of health care and mental health services.

In the June 2020 issue of *Healthy Young Minds*, (a publication of MHANYS’ School Mental Health Resource and Training Center), Jen Marr wrote about comfort as a skill. She writes, “Let’s change our perspective on human care and rise to the opportunity we have been given to mend our hurting world.”

One activity that could be adopted to address the social and emotional health and the intentional practice of the skill of comfort for our students, faculty and families is through Healing Circles. Healing Circles are relevant and beneficial for all age groups; the language may vary to be developmentally appropriate. Attending to the social and emotional (SEL) needs of adults is equally important as attending to the SEL needs of students. In fact, the SED reopening guidance listed the following as a requirement in reopening plans: “Address professional development opportunities for faculty and staff on how to talk with and support students during and after...”

...the ongoing COVID-19 public health emergency, as well as provide supports for developing coping and resilience skills for students, faculty, and staff.” Healing Circles could be used either in-person or virtually in classes, staff meetings, departmental meetings, or other times school community groups meet.

Healing Circles (also sometimes referred to as Talking Circles), a restorative practice, create a safe space to acknowledge the consequences of COVID-19, school closures and remote learning on the school community. At its core, restorative practices are about relationships, accountability and problem-solving. Restorative practices have roots in indigenous cultures and Talking Circles were a way of governance for many cultures and still are today. In the field of restorative practices, the circle process has emerged as a powerful tool for healing and building community. The circle can create that space for listening deeply and taking care of one another that is so desperately needed in schools and the community. There are many types of Restorative Circles that are used to address different issues.

The circle is a structured dialog process that allows every participant an opportunity to speak and that encourages attentive listening and truth-telling. The circle nurtures connections and empathy, while honoring the uniqueness of each participant. The circle can hold pain, joy, despair, hope, anger, fear and love. In the circle, each person can speak his/her truth but cannot assume the truth for anyone else. The circle welcomes difficult emotions and difficult realities while maintaining a sense of positive possibilities.

Everyone’s experience during the pandemic has been different — life-changing for many and momentous for all. Healing Circles are built on a foundation of kindness and respect. Circle participants listen with compassion and understanding and hold all stories shared in the circle in confidence. All participants speak with intention and have an equal voice. Healing circles provide a forum for expressing emotions and concerns and to access the healing effects of connecting with others to deal with the impact on their lives. This is also a way to teach and learn the skill of comfort that Jen Marr wrote of as well as implicitly building social and emotional skills. Healing Circles help us identify feelings as we share our stories, and we learn to respond with empathy and compassion as we collaboratively problem solve.

Healing Circles incorporate the practice of mindfulness/meditation. The regular use of mindfulness practices can be utilized outside of the circle process to enhance the mental, physical and emotional well-being of all participants. Mindfulness practices encourage participants to be present and attentive and provide a calming focus.

Healing Circles can be used to provide an opportunity to reflect on what has happened and the effect on our social and emotional health, to recognize the importance of relationships for emotional well-being and to build resilient communities. Healing Circles can contribute to a healthy, positive school community for all.

If you would like to learn more about Healing Circles, NYSUT’s Education and Learning Trust will be offering professional learning on this topic this fall. Visit <https://elt.nysut.org/> for additional information.



COVID-19, The Return to School and the School Counseling Program

Kelly Whitney-Rivera, NYSSCA Advocacy & Public Policy Chair, Director of Guidance, Valley Stream Central School District, Robert Rotunda, Ed.D., NYSSCA Executive Director

As we enter this unprecedented era of the return to school after months of school closures because of COVID-19, an economic recession, and civic unrest as a result of structural racism, it is important to understand the role the School Counseling Program plays in the reentry plan. Students have been learning in a variety of settings since schools closed in March in New York. Some have had a nearly seamless transfer to online education through virtual synchronous classrooms. Others have had less contact with their classroom teachers and school counselors because of a lack of internet service or devices.

The National Association of School Psychologists (NASP) and the American School Counseling Association (ASCA) state in their [School Reentry Considerations](#) document that “Local education agencies and individual schools planning for students and staff to return following COVID-19 closures must prioritize efforts to address social and emotional learning and mental and behavioral health needs. Equally important is ensuring staff feel their physical and mental health needs are supported. Districts should ensure all policies or recommendations are culturally sensitive and ensure equity and access for all youth.” (2020)

As we prepare for the return to school in a range of ways from full face to face to full virtual settings, we should keep [NYSED’s RECOVERING, REBUILDING, AND RENEWING: THE SPIRIT OF NEW YORK’S SCHOOLS REOPENING GUIDANCE](#) (July 2020) at the forefront of our planning. School counselors and many other stakeholders were involved in participating in the Regional Reopening Task force meetings and planning the Social Emotional Well Being portion of the document which starts on page 64. This document echoes NASP and ASCA in the prioritization of the mental health needs of students by saying:

It is unrealistic to expect that students will return to instruction as they left it months ago. Students have experienced an extremely stressful, and for many, traumatic experience while isolated from school, friends, and community.(pg 64)

While returning to school and supporting student, parent and staff mental health needs will be challenging, there are many resources available to plan and provide services.

- The NYSED Guidance Document suggests starting with a review of the [Comprehensive School Counseling Program Plan \(required by Part 100.2j\)](#). This plan should be reviewed to meet current needs. Engage in resource mapping and build on current strengths to develop your program. Remember that these regulations require that all K-12 students have access to a school counselor.
- NYSED suggests that an advisory council of stakeholders, including school leaders, students, teachers, school counselors, school psychologists, school social workers, parents, and community mental health providers be created to inform the comprehensive school counseling program.
- Schools need to address how these mental health, behavioral, and emotional support services will be delivered and to whom. A screening tool can be developed to identify student needs. Short and long term needs and services need to be planned.
- Provide additional professional development to all staff relating to the need and provision of these services as well as developing resilience and coping skills in students.

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- Use the principles of MTSS to deliver the program. An example of aligned social emotional well-being supports in chart format is included on page 42 of [Social Emotional Learning: Essential for Learning, Essential for Life](#). School counselors, school social workers, school psychologists, school nurses, mental health counselors, and community mental health providers work together to provide Tier 1, Tier 2, Tier 3 services based on student needs.
- Clearly communicate with all stakeholders what services and programs are available and how they are accessed.
- Communicate how these services will be provided in a face to face or virtual setting. It is challenging in many ways to deliver mental health services virtually, but there are many models of this being done successfully around the state.

Some specific examples of programs that have been developed around the state to address reopening needs follow:

- Summer bridge program with 5 student forums and 2 parent forums to address topics such as coping and balancing, how to socialize in the new norm and what school will look like in September.
- Virtual Summer Town Hall Meetings to present coping skills to parents and students.
- Stress reduction for students attending summer school through virtual platforms.
- A weekly newsletter to families with different activities, articles, links, and exercises to help them get through this difficult time.
- Student, parent and staff surveys to see what stakeholders have been feeling the last few months and what they would like to see in September from the PPS staff.
- Staff/Faculty Professional Development on how to talk with and support students during and after the Covid public health emergency and how to build coping and resiliency skills in students as well as other topics.
- Virtual new student orientations including routines and rituals, map of the school building and what school will look like in September. Also, a personal message from every counselor introducing themselves to the students, and putting them at ease.
- A school wide SEL reopening lesson on the first day to welcome everyone back and address some worries and concerns.
- Dedicating the first three weeks to mindfulness in the physical and the remote classrooms.
- Weekly check in's during lunches with the entire PPS Staff so that students can pop in for small group discussion about how their transition back has been.
- Advisory everyday that would include Restorative Circles, Leader in Me, and Mind Up curriculum.
- After a few weeks, set up organized small groups for students who would like continued support in specific areas.

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- [Creation of Calming rooms](#) and virtual offices with resources for students and parents.
- Maintaining virtual student circles facilitated by School Counselors and student leaders.
- Maintaining virtual office hours provided by School Counselors where students can drop in and discuss anything.

The Collaborative for Academic, Social and Emotional Learning (CASEL) has created the SEL Roadmap which is designed to support school leaders and leadership teams in planning for the transition back to schools, in whatever form that takes. The Roadmap is [available HERE](#). It includes critical practices, activities, essential questions, suggestions for preparing and implementing, tools, and information regarding sustainability.

We can see that there is an enormous amount of resources available to design and deliver your programs. It is important for school leaders to create a setting where all of the providers collaborate and coordinate their programs. Use all resources, inside and outside of school to meet the needs of your students, staff, and families.



*Ex. of a Calming Classroom
Courtesy of Lansingburgh Central School District*

Triaging Students' Social and Emotional Needs Upon Return to School

John Kelly, PhD, School Psychologist, NYASAP

If you read any article or hear a news report regarding the impact of the COVID-19 Pandemic, you are likely to encounter ominous statements regarding a “mental health tsunami” or “impending mental health crisis” within the child and youth population. While the concerns are warranted and the impact real, according to the National Association of School Psychologists (NASP, 2020), “it is anticipated that most otherwise healthy students (and staff) will successfully cope with the stress associated with this global pandemic and will need only limited support services.” However, depending upon their COVID-19 experiences, and the interactions between these experiences and their preexisting internal and external vulnerabilities, others will require relatively intense and direct support services. So, how can schools determine appropriate levels or types of social and emotional supports for students returning to school? NASP offers the [COVID-19 School Adjustment Risk Matrix \(C-SARM\)](#) as a way to conceptualize how to make initial support service decisions.

The C-SARM is specific to “the unique set of circumstances generated by COVID-19. It provides a basis for making initial student support service decisions regarding traumatic stress risk based on two variables: (a) pre-COVID-19 school adjustment and (b) the COVID-19 home environment.”

Pre-COVID-19 School Adjustment

A student’s school behavior and experiences before school closures contributes significantly to predicting school adjustment upon a return to school. Factors include:

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- a. Positive - Liked and enjoyed all aspects of school (e.g., academic, extracurricular, social); felt connected to the school, safe, and cared for as part of a community.
- b. Variable - Liked and enjoyed only particular aspects of school, and either felt neutral or had negative experiences with other elements.
- c. Negative - Disliked most or all aspects of school; did not feel connected to the school, safe, or cared for as part of a community.

COVID-19 Home Environment

Social support is a powerful buffer against traumatic stress. Thus, a student’s social support environment during the home experience (e.g., degree to which basic physical, emotional, social, and psychological needs were met; degree of stress and direct impact) can predict school adjustment difficulties. Factors include: maltreatment, violence, substance abuse and mental health problems, and rejection.

- a. Positive - Healthy, safe, nurturing, and adaptive (e.g., most or all needs met, positive experiences with distance learning, no direct financial or health impacts from COVID-19).
- b. Variable - Some support, but some challenges, affected by COVID-19 in some areas (e.g., caregivers losing employment; separation from family members, illness of a loved one).
- c. Negative- Unhealthy, unsafe, dangerous, and maladaptive. Reflects either significant impact from physical, medical, or financial COVID-19 related stress (e.g., death of a loved one, loss of home), or those living in an environment of child maltreatment, violence, substance abuse and mental health problems, and rejection.

The authors of the *C-SARM* indicate that “assessing risk represents a complex process, and should examine a range of individual, historical, and contextual variables or vulnerabilities that impact one’s adjustment to school. The *C-SARM* is a starting point in the assessment of possible COVID-19 related school adjustment difficulties.” Applying a tiered approach to support, students at low risk for problematic school adjustment would be initially offered only Tier 1 interventions; those at moderate risk would be offered both Tier 1 and 2 interventions; and those with high to extreme risk would be considered as appropriate recipients of all levels of support, including Tier 3.

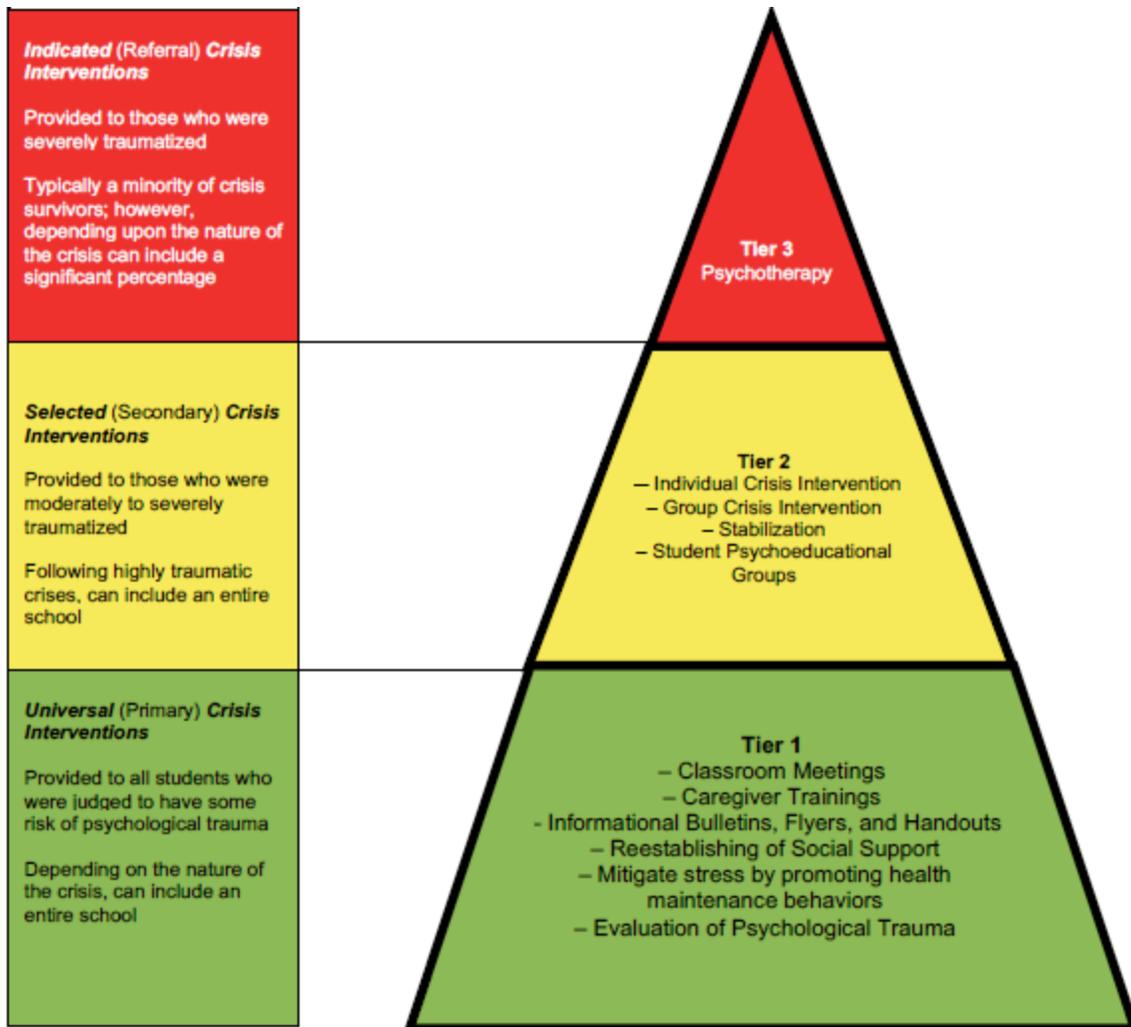
COVID-19 School Adjustment Risk Matrix (C-SARM)

COVID-19 HOME ENVIRONMENT	PRE-COVID-19 SCHOOL EXPERIENCES			
		POSITIVE	VARIABLE	NEGATIVE
	POSITIVE	Low Risk	Low/Moderate Risk	Moderate/High Risk
	VARIABLE	Low/Moderate Risk	Moderate Risk	High Risk
NEGATIVE	High Risk	High Risk	Extreme Risk	

(NASP, 2020)

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Examples of Tiered Supports



(NASP, 2020)

References

National Association of School Psychologists. (2020). *Returning to School Following COVID-19 Related School Closures: The COVID-19 School Adjustment Risk Matrix (C-SARM)* [handout]. Author.

Educators Reflect on Last Spring's Remote Learning, Prepare for New School Year

The impact of COVID-19 on the mental health and well-being of educators, students and their families, and entire communities, along with issues surrounding racial equity that have been brought center stage in recent months, makes this time unlike any other in our history. The fall will certainly test everyone's resiliency, but also provide teachable moments. More than ever before, teachers and other school personnel will need to consider how best to respond to the social-emotional needs of their students, whether they are teaching in-person, remotely, or in a hybrid setting.

MHANYS School Mental Health Resource and Training Center asked five educators from elementary, middle and high schools in different regions of the state to reflect on their experience last spring, and share their concerns and strategies for the upcoming school year. (CONTINUED ONTO NEXT PAGE)

Mallory O'Reilly
First Grade Teacher
Joseph Henry Elementary School
Saratoga County

Lisa Hartje
First Grade Teacher
Royalton-Hartland School District
Niagara County

Alejandro Forigua-Upegui
8th Grade Spanish Teacher
East Side Middle School
Manhattan

Kelly Hampton
HS Health Teacher - Grade 10-12
Binghamton High School
Broome County

Mary Foisy
Science Teacher, Physics - Grades 10-12
Nyack High School
Rockland County

While there were many challenges last Spring for teachers, students and parents/caregivers, what were some positives that came out of your experience teaching remotely?

Alejandro Forigua-Upegui:

Surprisingly, I was able to have more meaningful connections with students. They craved social interactions and relied a lot on teachers to express how they were dealing with the pandemic and the political climate. It really highlighted the importance of socio-emotional learning like never before. Specifically with the Gender and Sexuality club. The GSA students expressed that they looked forward to every Wednesday for the online meetings. Together we found new ways to celebrate the National Day of Silence, AIDS Walk NY 2020 and Pride month from our homes, including a virtual dance party. It brought us together as a community and it highlighted the importance of our work. More than ever I



realized how important it is to open up spaces for queer kids and their allies. Given that home may not be a safe space for some of them, I was proud and excited to be there for them; as much as they were there for me.

Mallory O'Reilly:

I always pride myself in the relationships that I build with families over the course of the school year. I never realized that the relationships could actually go deeper. This year while teaching remotely, I feel that parents and myself were all trying to figure out this new world of learning together and actually let our guards down more than we may have in the "normal" world. I learned more about students and their families than I ever have. I also had the opportunity to do driveway visits with each child to be able to provide them with a certificate, end of year award and gift that they normally would've received at our awards ceremony. These visits were moments of conversation that I never would have had the opportunity to have with each individual family at the ceremony and were moments that I will treasure forever.

What do you see as your biggest challenge as we head into the next school year?

Kelly Hampton:

I think I have 2 answers - Personally I am concerned about bringing home the virus to my family. I have parents who are 80 years old and one has had heart issues recently. I also have a daughter who is going to be giving birth to her second child in late October. I currently drive her to and from daycare each day - when I return to work - I don't believe I can continue this. This is already causing me a lot of anxiety and stress, I'm losing sleep and...

...not mindfully eating.

As a teacher in the classroom - I worry about changing who I am in the classroom - to be safe. I am a very hands on get to know you, I hug a lot, I have coffee chats- get to know you. I worry that I won't recognize when my students are struggling (hidden under their masks)

Lisa Hartje:

I feel my biggest challenge this year will be ensuring student engagement. I will have on site contact with the students only two days per week. At the primary grade level it will be harder for students to build the trust in and relationship with me that is necessary for optimal learning. On top of that, many of my students do not have reliable access to the required technology for the remote learning that is taking place. Promoting engagement while the student is on a screen is difficult. Promoting engagement while the student is absent almost impossible.

Mary Foisy:

The biggest challenge will be time. I will need to redesign all my lessons to be delivered in a variety of ways, to accomplish the same goals for students who are attending remote on some days and live on others, and students who are fully remote. I have to be ready to switch from hybrid learning to fully remote, and I have to figure out how to do labs: Can students use materials from home to conduct labs? Are there virtual labs that will provide the same experience as hands-on labs? Additionally, from my experience this past spring, remote assessments are much more time-consuming to create and to grade, and are difficult to monitor for plagiarism: I will need to work on developing online assessments that are authentic.

What strategies will you use to support the mental health needs of students this fall?

Mallory O'Reilly:

First, it is always important for my students to know that they are safe and cared for when they enter my classroom. Although this is normally demonstrated with hugs, high fives, and smiles I have found some alternative socially distanced signals that will show a sign of love and caring instead. It is also important for them to know that they are not the only ones experiencing so many changes and uncertainties. I will be discussing this by sharing literature that touches upon this topic and allowing them to share their thoughts or feelings about what is going on. My goal would be to be able to have a "support group" so that they feel comfortable talking about the things that may scare them and working together to comfort one another.

Kelly Hampton:

I plan to do 2 check-ins weekly. One while they are in person and one when they are remote. Another is to do planned journaling - addressing stress, anxiety and other MH issues. Practice - stress management techniques.

Lisa Hartje:

I will be focused on building trusting, positive relationships with my students. I am hoping to help them see this as an adventure we are all on together rather than a negative and scary time. I am going to continue to do my best to build relationships with parents as well so the students feel that we are all on the same team and all working towards something valuable....education!

What coping strategies will you use to maintain your own wellness this school year?

(CONTINUED ONTO NEXT PAGE)

Alejandro Forigua-Upegui:

Using last Spring as a learning experience of the do's and don'ts of online learning, I believe will help me stay organized. Especially when it comes to my own schedule. In the Spring I realized I was working 2 or 3 times more than I normally would. Having a good balance between my professional and personal life will definitely help me cope.

Mary Foisy:

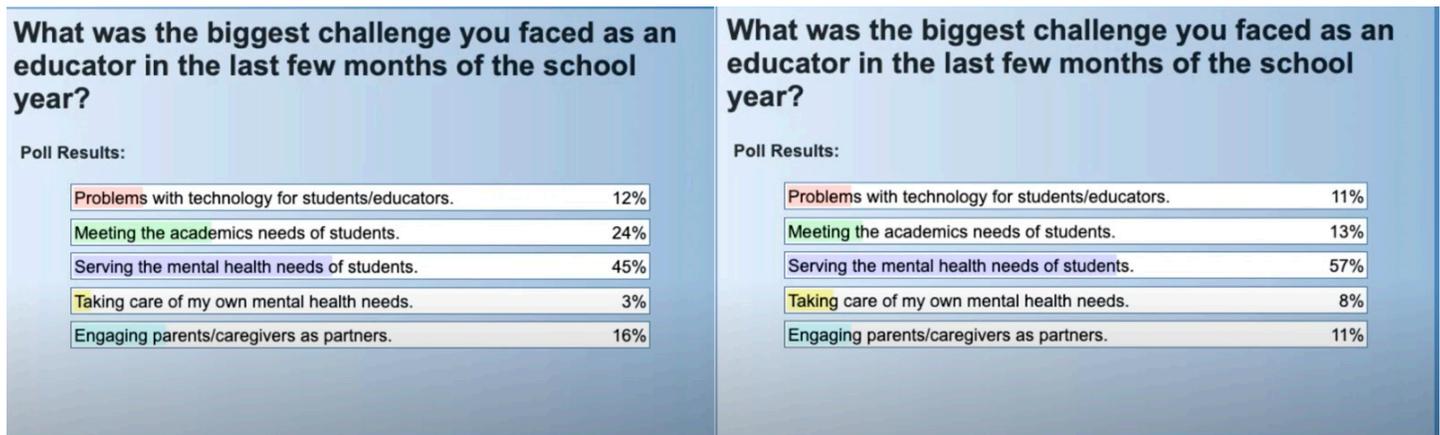
I set personal goals for myself: I enroll in running challenges that encourage a certain amount of running/walking (such as the NY City Subway Challenge). I do yoga. I make it a point to reach out to friends and family regularly. I check in with my parents at least twice a week, and I have a group of college friends who meet through zoom from time-to-time. I meet with teacher colleagues to discuss strategies, frustrations, etc.

The Resource Center Hosts Online Panel Discussion with Educators

On August 4 and 6, 2020, MHANYS' School Mental Health Resource and Training Center held online panel discussions with elementary and secondary school educators across New York State. The live webinars titled "Reflecting, Rethinking, Responding to Support Student Mental Health Needs" had more than 200 participants total and received news coverage from ABC – [Elementary School Panel](#) / [Secondary School Panel](#)

With the COVID-19 pandemic altering the way schools operate, the Resource Center wanted to provide a space for educators to engage in dialogue and have the opportunity to process their experiences at the end of the last school year. Our panelists discussed challenges they faced, unexpected benefits, and their strategies for the upcoming year to support their own wellness, as well as that of their students.

Each panel started off with a poll to the audience:



Elementary Panel

Secondary Panel

Panelists stressed the importance of being responsive to the social-emotional needs of students. They also focused on the importance of staying connected with their students and how it will be a priority for this year. We at MHANYS know how critical positive relationships and socialization is to the mental well-being of youth. Not only does it help students maintain motivation for academics, but also helps them cope with the loneliness and seclusion from their peers during remote learning and physical distancing in the classroom. Some of the educators' personal goals and strategies for this coming year included providing more self-care activities such as mindfulness during their class periods, and finding creative ways to engage students through technology. (CONTINUED ONTO NEXT PAGE)

While acknowledging the difficulty with the sudden transition to remote learning as a result of the pandemic, the educators truly inspired us with their positive attitudes and ability to see the hidden benefits of the current situation. This included more sleep for students and teachers, being able to explore and learn new technology, and having a unique opportunity to learn more about each other's home and family. At one point during the elementary school panel, the term "virtual hugs" was used, highlighting the unification educators sought through the online classroom. Both staff and students were depicted as being able to persevere and make the best of their situation, easing many of the challenges experienced.

During the panel, the Resource Center provided a list of instructional strategies to help educators create a classroom experience that supports mental health, relationship building and resiliency, and gives ideas specifically for the remote learning environment. For the last 15 minutes of each panel, the audience had the opportunity to participate in a question and answer session.

Both recorded panels and the list of instructional strategies are available on the [Resource Center's Back to School webpage](#) as well as additional resources to support school mental health and wellness for this upcoming year.

Elementary School Panelists

Lisa Howard, *Pre-K Teacher, formerly 4th Grade* at Ben Franklin Elementary School in Binghamton, Broome County.

Kate Bala, *3rd Grade Teacher* at Lowville Academy in Lowville, Lewis County.

Melissa Logatto, *3rd Grade Special Education Teacher/ ICT* at New York City Department of Education, District 6/ P.S. 152M Dyckman Valley in Washington Heights, New York.

Julia Robinson, *Elementary Special Education Teacher at Lyndonville Elementary School* at Lyndonville Central School District in Orleans County.

Secondary School Panelists

Jonathan Montero, *Peer Collaborative Teacher/Literature and Critical Studies Department Leader, and 11th and 12th Grade English Teacher* at Bronx Academy for Software Engineering (BASE) in District 10, Bronx, NY.

Lindsay Armbruster, *Grade 6 and 8 Middle School Health Educator* at O'Rourke Middle School in Burnt Hills-Ballston Lake Central School District in Saratoga and Schenectady County.

Kelly Breward, *High-School Health Educator* at Binghamton High-School in Broome County.

Lori Atkinson, *10th, 11th, and 12th Grade English Educator* at Copenhagen Central School in Lewis County.

#HealthyMinds4HealthyNY

Talk About It Tip

Being present with yourself
can reduce stress



MENTAL HEALTH ASSOCIATION
IN NEW YORK STATE, INC.

Did You Know?

How Teens Are Coping with the COVID-19 Pandemic

- 81% of teens say mental health is a significant issue for young people in the U.S., and 64% of teens believe that the experience of COVID-19 will have a lasting impact on their generation's mental health.
- In this stressful climate, 7 in 10 teens have experienced struggles with mental health.
- 55% of teens say they've experienced anxiety, 45% excessive stress, and 43% depression.
- 61% of teens said that COVID-19 pandemic has increased their feeling of loneliness.
- Teens today report spending 75% of their waking hours on screens during COVID-19.
- 82% of teens are calling on America to talk more openly and honestly about mental health issues in this country.
- 79% of teens surveyed wish there was an inclusive environment or safe space for people in school to talk about mental health.

*Source: National 4-H Council survey: *How Teens Are Coping with the COVID-19 Pandemic*



NY State of Health is currently open for enrollment through September 15 because of hardships faced by New Yorkers due to the Novel Coronavirus. And, many New Yorkers will qualify for Medicaid, Child Health Plus or the Essential Plan due to loss of income/employment or reduced wages. Those qualifying for these programs can enroll year-round.

The best way for consumers to receive assistance at this time is to phone a navigator or other NY State of Health assisters for help. As always, they can call the Customer Service Center at 1-855-355-5777. By visiting their website, www.nystateofhealth.ny.gov individuals can find an enrollment assistor and receive enrollment assistance over the phone. There is also a dedicated page for Coronavirus and COVID-19 information.

The following links will direct consumers to the contact information enrollment assistors and other resources on COVID-19:

[Find a Navigator Here](#)

[Find Other NY State of Health Enrollment Assistors](#)

[Find Coronavirus and COVID-19 Information Here](#)

RESOURCES

Alberti Center for Bullying Abuse Prevention
ed.buffalo.edu/alberti.html

Disability Rights New York
drny.org

JED Foundation
jedfoundation.org

NAMI
nami.org

National Institute of Mental Health
nimh.nih.gov

NY State Coalition for Children's Behavioral Health
cbhny.org

NYS Health Foundation
nyshealthfoundation.org/resources/

NYS PTA
nyspta.org

NYS School Counselors Association
nyssca.org

NYS School Psychologist Association
nyasp.org

NYS School Social Work Association
nyssswa.org

Parent to Parent
parenttoparentnys.org

The National Child Traumatic Stress Network
nctsn.org

The Trevor Project (LGBTQ Suicide Prevention)
thetrevorproject.org

Understood
understood.org

Youth Communication
youthcomm.org

Youth Decide NY (Problem Gambling Prevention)
youthdecideny.org

Youth Mental Health Project
ymhproject.org

Youth.gov
youth.gov/youth-topics/youth-mental-health

YOUTHPOWER!
youthpowerny.org



Office of
Mental Health

CRISIS TEXT LINE |

TEXT "Got5" TO 741741
TO START A CONVERSATION

Free, 24/7, Confidential Crisis Support

WE ARE HERE TO HELP



MHANYS School Mental Health Resource and Training Center is available to provide information and resources to schools and families, including:

- mental health instruction and training
- guidance on community resources
- technical assistance

Contact us directly at schools@mhany.org
or 1-800-766-6177 / 518-434-0439
mentalhealthEDnys.org



MHANYS.org



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Print and post page as a resource reference.