EDUCATOR’S GUIDE TO SUPPORTING THE SOCIAL AND EMOTIONAL NEEDS OF STUDENTS

COVID-19 INFORMATION AND RESOURCE MATERIALS

Michigan Department of Education and Michigan Department of Health and Human Services
Resource Overview

As an educator, you are one of the most critical sources of connection, education and support for children. During a time of crisis, this valuable relationship may be disrupted, which can lead to families and children becoming more isolated, vulnerable and in need of outside services and support. Your ability to engage children, families and communities through other means, virtual learning and other methods of engagement may serve as the link to children maintaining the connections they so desperately need at this time. Because children are not currently in your classrooms, assessing safety, providing support and ensuring individual children’s needs are met can be very challenging. The issuance of Executive Order 2020-35 makes this obligation even more imperative since children will not be returning to their physical school building this year. This resource is intended to provide information and strategies to support educators and families during this time.

Sincerely,

Michael F. Rice, Ph.D.
State Superintendent, Michigan Department of Education

Robert Gordon
Director, Michigan Department of Health and Human Services

The measure of a country’s greatness is its ability to retain compassion in times of crisis.

Thurgood Marshall
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FOR IMMEDIATE ASSISTANCE

CHILD ABUSE & NEGLECT HOTLINE
1-855-444-3911

DISASTER DISTRESS HELPLINE
1-800-985-5990

MICHIGAN SUICIDE HOTLINE
1-800-273-8255

MICHIGAN DOMESTIC VIOLENCE HOTLINE
1-800-799-7233

MICHIGAN CORONAVIRUS HOTLINE
1-888-535-6136
COVID19@MICHIGAN.GOV

MICHIGAN 2-1-1
A one-stop connection to thousands of local agencies and resources that can help—24 hours a day, 7 days a week.
Call 211 or Text your ZIP Code to 898211

SUBSTANCE ABUSE & MENTAL HEALTH SERVICES ADMINISTRATION HOTLINE
1-800-985-5990 or Text TalkWithUs to 66746
Assessing Coping and Safety

**Discuss Coping During Social Isolation**

Educators who have telephone or virtual contact with families during this time may be able to help identify needs or support the family in finding healthy coping strategies. If you do not feel you have the requisite training to have these conversations, please work with a trained colleague within your school district or ISD.

**With Caregivers**

Use solution-focused questions to help families recognize the steps they have already taken and to think through other ways of caring for themselves and others. For example:

- Maintaining this isolation and dealing with having everyone home is not easy. How have you managed thus far?
- What have you most appreciated about yourself during this time? What have your children most appreciated about you?
- People in a crisis often look to examples in their family and culture for how others have dealt with a crisis. Have people in your family had to face crises before? What did they do?
- What’s one thing you have done with your children, and one thing your children have done, since this crisis started that you are proud of?
- If you could pick one thing that you have started to make things a little better, but perhaps not done as much or as often as you’d like, what would it be? What kind of difference would it make to do more of it?

**The Traumatic Impact of a Crisis:**

Some children may have already experienced trauma in their lives which may make them more vulnerable at this time.

**Western Michigan University’s Children’s Trauma Assessment Center offers the following information and guidance:**

Many children have experienced significant trauma. It is not uncommon for a time of heightened anxiety and fear about the future to trigger traumatic memories, thought distortions and reactive emotions or behaviors in children.

Research indicates that children who have experienced trauma often feel powerless to protect themselves and are unable to believe adults can keep them safe.

Children who have experienced trauma may believe that only “bad” things happen to them. This mentality may create recurring internal negative self-talk, which can quickly lead to intrusive thoughts such as: “I know I am going to get the virus;” “I will infect all of my family.”

Children are not likely to communicate these thoughts as they are difficult to verbalize; instead, behavioral symptoms such as isolation, self-harm, and/or aggression may increase.

Heightened stress, feelings of isolation, fear, and overwhelm are not uncommon for caregivers to experience during a time like this, particularly when compounded with increased emotional or behavioral challenges from children.

It is important in a time of crisis to verbalize genuine feelings, thoughts, and questions as they are normal. Honest dialoguing with family, friends, and others regarding questions and concerns allows for self-reflection that can help manage this crisis while allowing families to continue to care for and support the children in their homes, who will likely need adults to be their “external regulator” now more than ever.

Western Michigan Child Trauma Assessment Center, Contributed by Dr. Jim Henry

**Resources for Teens**

Research suggests that high school students are more dependent on social interaction for well-being than any other age group. Mary Alvord, mental health counselor and psychologist who runs a Maryland-based mental health and psychotherapy practice targeted to young people, said the client emails that overflowed her email in recent days are indicative, she said, of what’s worrying teens nationwide: “How are we going to keep our social connections?” “How are we going to stay in touch?” “How are we going to not miss things?”

**Outlets for Teens:**

- Exercise
- Audible
- Face Time
- Zoom
- Virtual Mentoring
- Google Hangout
- Marco Polo

The Washington Post, March 27, 2020

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**Resources for Educators**

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Families Affected by Substance Use

According to NIDA, the National Institute on Drug Abuse,

“as people across the U.S. and the rest of the world contend with coronavirus disease 2019 (COVID-19), the research community should be alert to the possibility that it could hit some populations with substance use disorders (SUDs) particularly hard. Because it attacks the lungs, the coronavirus that causes COVID-19 could be an especially serious threat to those who smoke tobacco or marijuana or who vape. People with opioid use disorder (OUD) and methamphetamine use disorder may also be vulnerable due to those drugs’ effects on respiratory and pulmonary health.”

For those families that educators recognize as having current or previous struggles with substance use, it may be valuable to review the following resources.


For those that need or would like to request treatment for substance use, refer to the local Prepaid Inpatient Health Plan (PIHP) access line. Although the PIHP offices are closed, the access lines have been redirected to staff for continued screening and referrals. Access lines will have the most up to date treatment options available. The numbers can be found here, https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2941_48787-151431--00.html.

Groups that Occur By Phone:
http://aaphonemeetings.org/
http://www.nabyphone.com/

Groups that Occur Virtually:
http://aa-intergroup.org/
https://www.intherooms.com/home/
https://www.myrecovery.com/

Source: NIDA

Families with Mental Health Needs

Today, more students, families, and school staff than ever before are experiencing increased levels of stress, anxiety, and isolation, and will need mental health support. Families experiencing mental health needs during times of lower stress may be at even more risk during this time. Limited access to services, disruptions in income and children remaining home for extended periods of time may exacerbate existing conditions.

The resources below may assist families and others to understand and support:

https://mhanational.org/living-mental-illness-during-covid-19-outbreak-preparing-your-wellness
https://trailstowellness.org/materials/resources/covid-19-resources#trails-statewide-resources-covid-19-resources

Source: Mental Health America & CDC

Resources for Educators
Domestic Violence

**Practice tip:** If you notice decreased contact from a survivor, do not assume that it is by their own choice, or a natural result of the crisis. It may be due to the chaos of the new situation or the active interference of the perpetrator. If you have a concern about the perpetrator’s pattern of behavior, it is helpful to know about services available to the family in that area.

**Practice tip:** Take extra care when speaking to a survivor by phone, text or video chat. Assume that their calls and communications are being monitored by a perpetrator living in the home until you have partnered with the survivor to determine her freedom to talk openly.

**Practice tip:** Understanding the perpetrator’s pattern of behavior as the family’s situation changes is beneficial. Questions about what the survivor is most worried about related to the changes in the family’s situation may be helpful.

**Practice tip:** Safety planning with adult and child survivors is essential. In many areas, women’s sector and domestic abuse workers are ramping up their ability to work virtually with clients. Learn about the remote resources being developed in your area.

Source: Safe and Together Institute

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**LINKS TO OTHER RESOURCES:**

National Child Traumatic Stress Network has created the *Parent/Caregiver Guide to Helping Families Cope with the Coronavirus Disease 2019 (COVID-19):*


Child Trends has recently released *Resources for Supporting Children’s Emotional Well-being during the COVID-19 Pandemic:


The Children’s Bureau offers a variety of COVID-19 resources:


Zero to Thrive offers Mental Health and Coping Resources:

https://zerotothrive.org/covid-19/

Helping kids deal with stress/anxiety:

https://childmind.org/article/talking-to-kids-about-the-coronavirus/?fbclid=IwAR08r6X_G0MblYoy2HhVFmks8B3Gd2uBcUvEljGufXnQ_Y3AB1HNhOJ9M#XmuSn3X-SKY.facebook

National Alliance on Mental Illness (NAMI) Resource Guide:


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**Resources for Educators**
No matter how prepared you are, an outbreak can be stressful.

Follow these recommendations to promote your family’s well-being during COVID-19:

**STAY CONNECTED**

Keep up to date on the status of the outbreak and further recommendations by following credible public health sources such as the Centers for Disease Control and Prevention [https://www.cdc.gov/](https://www.cdc.gov/) and Michigan Department of Health & Human Services: [https://www.michigan.gov/coronavirus](https://www.michigan.gov/coronavirus)

Limit your family’s exposure to news surrounding the outbreak and beware of news sources that promote fear and panic.

Utilize available resources to stay connected with your community; phone calls, texts, emails, video calls, social media, and written letters are all great ways to stay in touch. Many schools have additional resources to keep kids engaged with learning and connected with teachers and classmates.

Don’t forget to engage with your own household! Check in with your children often to make sure they are coping with the sudden lifestyle change, emphasize that you’re excited to have extra time to spend with them, and look at this as an opportunity to bond together!

**MAINTAIN PROPER HYGIENE**

Find creative ways to encourage proper hygiene with your children; choose a fun song to sing while washing hands or set up a chart to track & reward consistent hygiene.

Take this opportunity to teach your children new household chores; provide praise while reinforcing a sense of accomplishment and importance of a clean environment.

**STICK TO A SCHEDULE**

Remember- this is temporary, and it’s essential to maintain consistent exercise, meals, and bedtimes. Set an example for your children by following the routine yourself.

Take advantage of the many distance learning opportunities offered by your school or other educational institutions.

Source: The National Child Traumatic Stress Network

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**NORMAL REACTIONS TO A CRISIS**

Everyone reacts differently to stressful situations such as an infectious disease outbreak that requires social distancing, quarantine, or isolation. It’s important to recognize these reactions and realize they are normal. You may feel:

**ANXIETY, FEAR**

Over your health status or the health of others.

Due to time taken off from work, loss of income, job security.

Because of the obstacles to securing essential items.

Concern over the responsibility of effectively caring for your children and others in your care.

**ANGER, FRUSTRATION**

Because of the uncertainty of how long you will be in this situation.

Over the challenges of being stuck at home, with no time to yourself, potentially while trying to work remotely.

Due to boredom or inability to participate in work or regular activities.

If you think you were exposed to the disease because of others’ negligence.

Over insufficient healthcare resources to handle the crisis.

**HELPLESS**

Due to a lack of control over the situation.

**LONELINESS**

Due to feeling cut off from the world, your community, and loved ones.

**DEPRESSED**

Symptoms of depression include: feelings of hopelessness, changes in appetite, sleeping too little or too much.

**TEMTATION**

A desire to use alcohol or drugs to cope.

The urge to take your anger, frustration, anxiety, or sadness out on others.

Source: The National Child Traumatic Stress Network
Housing Resources

The Governor’s Executive Order 2020-19 provides protection from eviction during this time, stating:

Due to the protection that a residential home provides from the COVID-19 pandemic, and the need to contain self-quarantined and self-isolated individuals within a residential home, no person shall remove or exclude from leased residential premises or residential premises held under a forfeited executory contract a tenant, a vendee of a forfeited executory contract, or a person holding under a tenant or vendee, except when the tenant, vendee, or person holding under them poses a substantial risk to another person or an imminent and severe risk to property. This order should be broadly construed to effectuate that purpose. This section is currently in effect.

https://www.michigan.gov/whitmer/0,9309,7-387-90499_90705-522509--,00.html

During the COVID-19 outbreak, Michigan State Housing Development Authority (MSHDA) will not be terminating any vouchers due to failure to pay on repayment agreements.

Housing Assessment and Resource Agency (HARA) Contact List:
https://www.michigan.gov/mshda

Source: MSHDA, United Way and Michigan.gov

Resources for Families

United Way hosts a hotline to help people access necessary resources during times of crisis.

United Way Hotline: 2-1-1  Open 24 hours a day

Call 211 or Text your ZIP Code to 898211
RESOURCES TO SHARE WITH FAMILIES

Maintaining Routines

Maintaining the routines you had in place prior to the outbreak is very important. Children and families benefit from knowing what to expect.

Consider the following needs when developing or maintaining your routine

Social needs: attention and connection

Physical needs: food, cleanliness, and sleep

Emotional needs: stress release and well-being

Source: Bright Horizons

Routines for Children with Special Needs

These 7 strategies and the associated resources and examples will allow individuals with special needs to better understand COVID-19, cope with the many changes associated with COVID-19, and practice communication, social, and adaptive skills that may reduce some of the trials during this very uncertain time.

Considerations for children with special needs

1. Support Understanding
2. Offer Opportunities for Expression
3. Prioritize Coping and Calming
4. Maintain Routines
5. Build New Routines and adjust as needed
6. Foster Connections from a Distance
7. Be Aware of Changing Behaviors

Source: Assert

Resources for Families
## RESOURCES TO SHARE WITH FAMILIES

<table>
<thead>
<tr>
<th>AGE GROUP</th>
<th>REACTIONS</th>
<th>HOW TO HELP</th>
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<tbody>
<tr>
<td><strong>PRESCHOOL</strong></td>
<td>Fear of being alone, bad dreams</td>
<td>Patience and tolerance</td>
</tr>
<tr>
<td></td>
<td>Speech difficulties</td>
<td>Provide reassurance (verbal and physical)</td>
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<tr>
<td></td>
<td>Loss of bladder/bowel control, constipation, bed-wetting</td>
<td>Encourage expression through play, reenactment, story-telling</td>
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<tr>
<td></td>
<td>Change in appetite</td>
<td>Allow short-term changes in sleep arrangements</td>
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<tr>
<td></td>
<td>Increased temper tantrums, whining, or clinging behaviors</td>
<td>Plan calming, comforting activities before bedtime</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Maintain regular family routines</td>
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<tr>
<td></td>
<td></td>
<td>Avoid media exposure</td>
</tr>
<tr>
<td><strong>SCHOOL-AGED</strong></td>
<td>Irritability, whining, aggressive</td>
<td>Patience, tolerance, and reassurance</td>
</tr>
<tr>
<td>(6-12)</td>
<td>Clinging, nightmares</td>
<td>Play sessions and staying in touch with friends through telephone and internet</td>
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<tr>
<td></td>
<td>Sleep/appetite disturbance</td>
<td>Regular exercise and stretching</td>
</tr>
<tr>
<td></td>
<td>Physical symptoms (headaches, stomachaches)</td>
<td>Engage in educational activities (workbooks, educational games)</td>
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<tr>
<td></td>
<td>Withdrawal from peers, loss of interest</td>
<td>Participate in structured household chores</td>
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<tr>
<td></td>
<td>Competition for parents’ attention</td>
<td>Set gentle but firm limits</td>
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<td></td>
<td>Forgetfulness about chores and new information learned through educational activities</td>
<td>Discuss the current outbreak and encourage questions, include what is being done in the family and community</td>
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<tr>
<td></td>
<td></td>
<td>Encourage expression through play and conversation</td>
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<tr>
<td></td>
<td></td>
<td>Help family create ideas for enhancing health promotion behaviors and maintaining family routines</td>
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<tr>
<td></td>
<td></td>
<td>Limit media exposure, talking about what they have seen/heard including at school</td>
</tr>
<tr>
<td><strong>ADOLESCENT</strong></td>
<td>Physical symptoms (headaches, rashes, etc.)</td>
<td>Address any stigma or discrimination occurring and clarify misinformation</td>
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<tr>
<td>(ages 13-18)</td>
<td>Sleep/appetite disturbance</td>
<td>Patience, tolerance, and reassurance</td>
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<tr>
<td></td>
<td>Agitation or decrease in energy, apathy</td>
<td>Encourage continuation of routines</td>
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<tr>
<td></td>
<td>Ignoring health promotion behaviors</td>
<td>Encourage discussion of outbreak experience with peers, family (but do not force)</td>
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<tr>
<td></td>
<td>Isolating from peers and loved ones</td>
<td>Stay in touch with friends through telephone, Internet, video games</td>
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<tr>
<td></td>
<td>Concerns about stigma and injustices</td>
<td>Participate in family routines, including chores, supporting younger siblings, and planning strategies to enhance health promotion behaviors</td>
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<tr>
<td></td>
<td>Avoiding/cutting school</td>
<td>Limit media exposure, talking about what they have seen/heard including at school</td>
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<tr>
<td></td>
<td></td>
<td>Discuss and address stigma, prejudice and potential injustices occurring during outbreak</td>
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Source: The National Child Traumatic Stress Network