

## Return to School 2020-21

### Recommendations and Best Practices for School Safety

The return to in-person instruction in K-12 schools will be unlike any other start to a school year in modern history and will likely require some adjustments to school safety. To provide a safe environment for learning and working, it is important to have a keen awareness of the factors that have and will continue to affect the school community and ensure school safety practices and procedures are part of a system of care and support for all stakeholders.

Since March, many people have experienced one or more traumatic events that may affect how they think, understand, respond, behave, and/or interact with others.<sup>i</sup> “Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being.”<sup>ii</sup> While not a comprehensive list, some of the events and circumstances experienced by members of the school community that may have caused trauma include:

#### COVID-19

- Family and/or friends tested positive.
- The individual has tested positive.
- Death of family and/or friends.
- Fear of contracting the disease.
- Fear of spreading the disease.
- Large numbers of the community were ill and/or died.
- The individual is immunocompromised.
- Family and/or friends are immunocompromised.

#### Home life

- Disruption of previously regular routine.
- Isolation from friends and/or family.
- Experienced and/or witnessed:
  - Domestic violence.
  - Sexual abuse.
  - Emotional abuse.
  - Other physical violence or abuse.
- Inadequate food/nutrition.
- Loss, or potential loss, of stable housing.

#### Police violence, use of force, or discrimination; and/or related protests or civil unrest

- Witnessed or experienced civil unrest following protests.
- Victim of malicious destruction of property to a family owned business due to civil unrest.
- Witnessed police violence, use of force, or discrimination.
- Experienced police violence, use of force, or discrimination firsthand.
- Family member or friend experienced police violence, use of force, or discrimination.

#### Other factors

- Existing mental illness (e.g., depression, anxiety, etc.).
- Inability to maintain adequate mental and/or physical health treatment/care.
- Previous traumas.<sup>iii</sup>

## Traumatic Stress Reactions

Everyone experiences trauma differently and the psychological distress is real, regardless of how it presents. Children through young adults aged 24, are more susceptible than adults to have long-term negative effects resulting from traumatic experiences, due to on-going neurobiological development.<sup>iv</sup>

The following examples are indicators of traumatic stress reactions or other potential mental health crises. These examples are not intended to diagnose any mental health condition but are provided only for use as a reference to help identify individuals who should be connected with appropriate staff and/or mental health professionals, in accordance with the school and/or district's policies.

### Internalizing behaviors

- Depression
- Anxiety
- Suicidal ideation
- Emotion dysregulation
- Trauma-related amnesia
- Negative beliefs
- Persistent negative emotional state
- Distorted blame
- Inability to experience positive emotions
- Lack of interest
- Feeling detached
- Increase in perceived threat, especially under stress

### Externalizing behaviors

- Aggression
- Recklessness/high-risk behaviors
- Hypervigilance
- Exaggerated startle reflex/response
- Difficulty concentrating
- Sleep disturbance

## Recommendations for Best Practices

The following recommendations should be considered when developing practices and procedures best suited for each school and district.

### **Administration**

- Be able to communicate the school and district's COVID-19 mitigation strategies, including communication practices with parents/caregivers and the response plan for COVID-19 infections/outbreak.
- Communicate information regarding COVID-19 to students and families that is consistent with that which is provided by the state of Michigan (e.g., Executive Office of the Governor, Department of Health and Human Services, Michigan Department of Education, Michigan State Police, etc.), even in casual or informal conversations.
- Have a mental health referral plan in place for students, families, and staff.
  - Provide a system for self-referral.
  - Ensure mental health resources are readily available and easily accessible.
- Establish trauma-informed care procedures through school mental health staff, local/community mental health resources, or other mental health organizations.<sup>v</sup>
- Consider potential trauma experiences and home life when implementing disciplinary measures or negative consequences.
  - Establish goals that support learning and the development of new or desired behaviors.

## Staff

- Establish systems of support for all employees.
  - Consider establishing peer support groups and providing mental health professionals and/or guidance from those professionals to facilitate key discussions.
  - Understand that staff must be supported in their own readjustment process before they can provide a safe and supportive environment for students.
- Encourage teachers to focus on social and emotional learning during the first weeks of school.
  - Providing students with a safe and supportive classroom environment permits the most effective learning.
  - Establishing a safe and supportive environment will also promote positive behaviors and reinforce appropriate social skills that may have been underutilized while out of school.
  - Embed social and emotional skill building throughout the learning experience.

## Security / Law Enforcement Personnel

- Integrate school security personnel and/or school resource officers (SROs) into general school activities and settings (where their primary role is not enforcement) as a means to establish and build trust with staff, students, and families.
- Establish clear guidelines with school security personnel and/or SROs regarding enforcement of COVID-19 related practices (e.g., social distancing, use of masks).
- Understand that uniformed personnel such as SROs, security, and nurses could be especially triggering to staff and students depending on trauma experiences.
  - Consider alternatives (e.g., polo shirt, t-shirt) to traditional law enforcement uniforms (e.g., class A or class B uniforms) for SROs and security personnel.
  - Recognize that the very appearance of uniformed personnel can have unintended effects on a myriad of stakeholders.
- Avoid having SROs respond to non-criminal incidents such as school rule violations or solely to enforce disciplinary measures (e.g., student refusing to go to the office, escort student to in-school suspension).<sup>vi</sup>

The Michigan State Police, Office of School Safety can be reached via email at [MSP-SchoolSafety@michigan.gov](mailto:MSP-SchoolSafety@michigan.gov).

<sup>i</sup> *Trauma-informed care in behavioral health services* (2014). Rockville: Substance Abuse and Mental Health Services Administration. Retrieved from [https://www.ncbi.nlm.nih.gov/books/NBK207201/pdf/Bookshelf\\_NBK207201.pdf](https://www.ncbi.nlm.nih.gov/books/NBK207201/pdf/Bookshelf_NBK207201.pdf).

<sup>ii</sup> SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach (2014). Rockville: Substance Abuse and Mental Health Services Administration. Retrieved from [https://ncsacw.samhsa.gov/userfiles/files/SAMHSA\\_Trauma.pdf](https://ncsacw.samhsa.gov/userfiles/files/SAMHSA_Trauma.pdf).

<sup>iii</sup> Cohen, J. A., Jaycox, L. H., Walker, D. W., Mannarino, A. P., Langley, A. K., & Duclou, J. L. (2009). *Treating traumatized children after hurricane katrina: Project fleur-de lis*. *Clinical Child and Family Psychology Review*, 12(1), 55-64. doi: <https://doi.org/10.1007/s10567-009-0039-2>.

<sup>iv</sup> Vaughn-Coaxum, R., Wang, Y., Kiely, J., Weisz, J. R., & Dunn, E. C. (2018). *Associations between trauma type, timing, and accumulation on current coping behaviors in adolescents: Results from a large, population-based sample*. *Journal of Youth and Adolescence*, 47(4), 842-858. doi: <https://doi.org/10.1007/s10964-017-0693-5>.

<sup>v</sup> *Creating, supporting, and sustaining trauma-informed schools: A system framework* (2017). Los Angeles, CA, and Durham, NC: National Center for Child Traumatic Stress. National Child Traumatic Stress Network, Schools Committee. Retrieved from [https://www.nctsn.org/sites/default/files/resources/creating\\_supporting\\_sustaining\\_trauma\\_informed\\_schools\\_a\\_systems\\_framework.pdf](https://www.nctsn.org/sites/default/files/resources/creating_supporting_sustaining_trauma_informed_schools_a_systems_framework.pdf).

<sup>vi</sup> Morris, Monique W., Epstein, Rebecca, Yusuf, Aishatu (2017). *Be her resource: A toolkit about school resource officers and girls of color*. Center on Poverty and Inequality, Georgetown Law. Washington D.C. Retrieved from [https://www.law.georgetown.edu/poverty-inequality-center/wp-content/uploads/sites/14/2018/05/17\\_SRO-final\\_Acc.pdf](https://www.law.georgetown.edu/poverty-inequality-center/wp-content/uploads/sites/14/2018/05/17_SRO-final_Acc.pdf).