As we return to school—whether in person, virtually, or a hybrid—we must prioritize the social–emotional needs of our learners and staff. The abrupt ending of school, the loss of jobs, structure, schedules, time with friends, sports, and so on are all part of a collective trauma that has been, and continues to be, experienced in our communities. A traumatic event is commonly understood to be a frightening, dangerous, or violent event that poses a threat to a person's life or bodily integrity. Witnessing a traumatic event that threatens life or physical security of a loved one can also be traumatic. This is particularly important for young children, as their sense of safety depends on the perceived safety of their attachment figures. We also know that the event does not have to be singular or abrupt in nature (e.g., the death of a parent) to cause trauma. Repeated or chronic stress from economic instability, increased family tensions and anxiety, loss of housing or food stability, abuse or neglect, and systemic racism and violence can cause trauma reactions as well. Many students and staff have experienced these risk factors and may be struggling with trauma as the school year begins.

Traumatic experiences can initiate strong emotions and physical reactions that can persist long after the events. Children may feel terror, helplessness, or fear, as well as physiological reactions such as heart pounding, vomiting, or loss of bowel or bladder control. Children who experience an inability to protect themselves or who lacked protection from others to avoid the consequences of the traumatic experience may also feel overwhelmed by the intensity of physical and emotional responses (The National Child Traumatic Stress Network, n.d.). As we enter the 2020–2021 school year, we have students who have collectively experienced COVID-19 and racial trauma.

NEW SET OF WORKING ASSUMPTIONS

- All students and staff have likely experienced some level of trauma as a result of the pervasive and long-lasting effects of COVID-19 pandemic as well as the civil unrest due to systemic racism and oppression.
- The degree/intensity of trauma varies by student and staff member based on their individual experiences during this time, their protective factors, and their risk factors.
- Emotional reactions such as grief, fear, anxiety, depression, anger, and others are normal and should be expected.
- All students and staff have experienced diminished time spent following routines and schedules.
- All students and staff are likely to have some degree of diminished stamina for completing work because of reduced demands during closure.
- Students had inequitable access to virtual learning and adults to support both learning in the home environment and challenging emotions surrounding the stressors of a pandemic and its effects on individuals and family systems.
- Not all homes were safe.

To maximize both effectiveness and efficiency, schools and school psychologists should use multiterrified systems of supports (MTSS) as the framework through which to respond. MTSS allows schools to provide all students universal, stabilizing, and wellness promotion supports through Tier 1. This is critical, because Tier 2 can’t become the new Tier 1. In other words, our goal should not be to match 100% of students with Tier 2 interventions. Rather, the goal is to manage the response to these needs proactively and to give students what they need to thrive through universal instruction (i.e., Tier 1). Therefore, Tier 1 will need to expand its breadth and increase focus on trauma-informed support to address the unique issues that have come to light during the extended school closures. All students will benefit from proactive and universal support related to the COVID-19 pandemic and racial injustice. (See the Ask the Experts webinars and related guidance documents on “School Reentry Considerations: Supporting Student Social
Emotional Learning (SEL) and Mental Behavioral Health (MBH) Amidst COVID-19 and “Providing Effective Social Emotional and Behavioral Supports: Universal Screening and Tier 1 Interventions.”

Parent support at all levels of an MTSS process is critical. School psychologists want to ensure that teachers and other school staff are prepared to handle the anxieties and needs of the students and themselves. Through this work, students will learn a wide variety of skill sets to help with:

- Anxiety or nervousness
- Withdrawal or isolation
- Depressed mood
- Acting out in school
- Impulsive or risky behavior

All of these efforts are designed to support all students at all levels. However, we recognize that for some students, the impact of the trauma related to COVID-19 and the closures will require more support. The challenge for educators and school teams will be accurately identifying students in need of Tier 2 support.

TIER 2: USING DATA TO MATCH STUDENTS WITH SUPPORTS

School psychologists are ideally suited to deliver Tier 2 support to students presenting with more significant needs. As a starting point, educators should review existing data to identify students who were at risk prior to closure. For example, students who had:

- Previously received support or services at school
- Attendance risks (including tardy occurrences)
- Preexisting conditions
- Behavioral, social, or emotional concerns

Additional information gathered during school closure regarding students who experienced insecurity around food, shelter, and finances should be considered. Particular attention should be afforded to students who lost a loved one because of COVID-19 and those who have experienced racial trauma. Students who identify as LGTBTQ+; as Black, Indigenous, or Persons of Color, or having a disability may also have endured unique challenges during the long-term school closures.

Please note that traditional screening measures that rely on teacher reports will be difficult to use given the current circumstances. Moreover, screening data will not be reliable until after robust Tier 1 intervention has been implemented for all students. Informal measures such as parent surveys and student self-reports should be considered instead. Families and students should have increased and ongoing opportunities to ask for school support.

Ideally, culturally responsive Tier 2 supports would be provided using a standard protocol and targeted skill groups by school-based mental health providers such as school psychologists, school counselors, and school social workers (and interns). The students’ progress will be monitored to determine if they are responding appropriately to the intervention. If based on the data, a student is not responding appropriately to Tier 2 support, then Tier 3 supports are recommended. Conversely, if progress monitoring reveals adequate progress, Tier 2 supports may no longer be needed. The importance of collecting quality progress monitoring data cannot be emphasized enough. Goals and expected outcomes of interventions must be very clear to determine if students are responding to Tier 2 support. Resources will be stretched on return to school, and we need to work as efficiently as possible.

Tier 2 supports include, but are not limited to the following:

- General
  - Check-in/Check-Out
- Trauma
  - Bounceback (K–5) in small group which can be delivered virtually. The authors have offered suggestions.
- Cognitive Behavioral Intervention for Trauma in Schools CBITS (Grades 4–12)
- Anxiety
  - Coping Cat (ages 7 and up)
- Anger
  - Keeping Your Cool (ages 7 and up)

**KEY MESSAGES**

Our goal is to give students what they need to thrive and to be structured, planful, and proactive in response to the school closures. We must take into account the unique experiences of our minoritized students. As engaging in these Tier 2 supports, being mindful and aware of each student’s unique circumstances.

- We understand that staff must be adequately trained and that resources must be made available to staff long-term.
- We are committed to using data for the purpose of providing more intensive supports, based on student needs (progress monitoring data is extremely important).
- We understand that equity can’t be an afterthought, but rather is our primary objective.
- We must not make faulty assumptions about disability status.

**CONCLUSION**

The beginning of the new school year will present challenges on many levels, whether schools are in person or virtual. Meeting students’ social, emotional, and mental health needs will be critical to ensuring their well-being and their ability to focus on and succeed with learning during this unusual time. It is also important to recognize that, despite the title of this document, we are not in a “post COVID” circumstance; we are still in the midst of the pandemic and attending crises. Student and staff needs will continue to shift and evolve, and our systems must be able to be equally dynamic. Multitiered interventions and supports are the most effective way to appropriately serve the most students, while also maximizing use and efficiency of already stretched resources.

**RESOURCES**

- Equity Considerations During and After COVID-19 School Closures https://www.nasponline.org/x55210.xml
- ASCA/NASP Reentry Considerations https://www.nasponline.org/x55419.xml
- Framework for Effective Discipline https://www.nasponline.org/x55390.xml
- Virtual Service Delivery in Response to COVID-19 Disruptions https://www.nasponline.org/x55063.xml
- Cognitive–Behavioral Intervention for Trauma in Schools https://cbitsprogram.org
- The Bounce Back Program https://bouncebackprogram.org


• The Child Traumatic Stress Network [https://www.nctsn.org/what-is-child-trauma/about-child-trauma](https://www.nctsn.org/what-is-child-trauma/about-child-trauma)

**Contributors:** Jason Pederson and Jill Battal

Please cite this document as:
