

THIS IS THE TIME TO LEAD WITH MENTAL HEALTH *and* EQUITY IN MIND

*A Practical Guide for District and School Leaders,
Policy Makers, and Funders through the Pandemic and Beyond*



ABOUT THE BROOKLINE CENTER

The Brookline Center for Community Mental Health provides outstanding, affordable mental health care and community-based social services that help individuals and families lead healthier, safer, and fuller lives, while building the strongest, healthiest community possible. The Center serves more than 4,000 children, adults, and elders each year, delivering treatment regardless of insurance or ability to pay.

For more information, please visit www.brooklinecenter.org.

ABOUT BRYT

The first known program of its kind in the nation, BRYT (Bridge for Resilient Youth in Transition) provides short-term, transitional supports for students whose learning has been affected by serious mental health and/or other medical challenges. BRYT began in a single Brookline, Massachusetts high school and is now available to more than 160,000 students in 145 schools across Massachusetts and beyond. The Brookline Center's BRYT team is leading a movement to bring BRYT programs to schools and students nationwide.

For more information, please visit www.brytprogram.org.

ABOUT THE RUDERMAN FAMILY FOUNDATION

The Ruderman Family Foundation is an internationally recognized organization that advocates for the full inclusion of people with disabilities in our society. The Foundation supports effective programs, innovative partnerships and a dynamic approach to philanthropy in advocating for and advancing the inclusion of people with disabilities throughout the U.S. and the world.

The Ruderman Family Foundation believes that inclusion and understanding of all people is essential to a fair and flourishing community and imposes these values within its leadership and funding.

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Cover art by Carson McNamara (carsonmcnamara.com)

THE GLOBAL COVID-19 PANDEMIC HAS DRAMATICALLY SHIFTED THE EXPERIENCE OF SCHOOL FOR STUDENTS, FAMILIES, AND EDUCATORS. TEACHING AND LEARNING HAVE MOVED FROM FULLY IN-PERSON TO FULLY REMOTE, THEN IN MANY CASES TO “HYBRID,” WITH PERIODS OF FULLY REMOTE—DEMANDING NEW SKILLS, NEW WAYS OF THINKING, AND EXTRAORDINARY FLEXIBILITY FROM INSTITUTIONS AND PEOPLE. THESE CHANGES HAVE OCCURRED AS COMMUNITIES HAVE EXPERIENCED ECONOMIC STRESS (AND IN MANY CASES SEVERE RESOURCE SHORTAGES); HIGHLY VISIBLE AND PAINFUL REMINDERS OF OUR COUNTRY’S LONG STRUGGLE WITH RACISM AND WHITE SUPREMACY; AND STAGGERING NUMBERS OF COVID-19-RELATED HOSPITALIZATIONS AND DEATHS.

The pandemic has also surfaced deep inequities, contributing to pre-existing health, educational, and economic disparities between BIPOC (Black, Indigenous, and People of Color) and largely white communities. Yet while awareness of structural, institutional, and personal racism as core drivers of inequity in the U.S. grew over the summer of 2020, and many educators resolved to work to address racism in their practice, transformational work around racism and other inequities in schools has been difficult to sustain.

Day-to-day, mental health—already a growing concern for school prior to the pandemic—has moved to the center of national discourse. And for good reason, as **educators, students, and families are describing unrelenting pressure which their existing coping skills are, increasingly, failing to contain.**¹ The magnitude and unpredictability of the COVID-19 crisis, and the resulting chronic holding of the unknown, have increased stress levels for everyone. When we cannot relieve stress—or, if we encounter more on top of existing strain—we begin to see the initial stages of collapse: shutdown, dissociation, withdrawal.² The implications for this are wide-ranging, both in the short- and the long-term, and

extend into people’s lives in deep and real ways—from their relationships to their medical and psychological well-being. The pandemic has been accurately described as a ***slow-moving trauma***.

Despite the growing recognition of the traumatic nature of the pandemic, it is less common to find evidence of a pivot on the part of districts and schools toward structured and effective mental health supports than of the rapid (if hard-won) pivots in approaches to teaching and learning occasioned by the pandemic. But ***a pivot in favor of school mental health, grounded in a focus on equity within and across school communities, must happen.***

BASED ON BRYT’S EXPERIENCES supporting leaders and educators during the pandemic, this report details why this pivot is critical to the future health and success of all students, educators, and families, and includes practical guidance for school and district leaders about how to conceptualize and do the transformational work needed to promote resiliency and build equitable support systems now.

¹ Miller, Lisa. “The Children of Quarantine.” *The Cut*, New York Magazine, 24 Nov. 2020, www.thecut.com/2020/11/covid-19-pandemic-kids-mental-health.html?mkt_tok=eyJpIjoiTjJScVpEbG1aV0ptTW10ayIsInQiOiIrb2NrMfhScKRFXC9xVktycGEhWHYWTpR1F0a0h4ZjNNM2M3SWs1dVdGOWZaN1pXc2tZV2prbEVzaU94aDNQcms4a3B0bmQzT0xKYVFISVR3eE5WOGhheDQrXC9RYnZnQlREbkFPbFlxZ2tBRVNQZCtVS1BLQkQ1Um1xeGZwOW1rIn0%3D.

² Bell, Ashlie. “The Neuropsychophysiological Effects of Chronic and Excessive Stress.” *American International Journal of Social Science*, Edited by Kathryn Ross, vol. 3, no. 1, 2014, pp. 206–208., doi:https://www.researchgate.net/profile/Ashlie-Bell/publication/322789990_The_Neuropsychophysiological_Effects_of_Chronic_and_Excessive_Stress/links/5a7015f3aca272e425eb4c0f/The-Neuropsychophysiological-Effects-of-Chronic-and-Excessive-Stress.pdf.

BRYT BEFORE AND DURING THE COVID-19 PANDEMIC

THE BROOKLINE CENTER'S BRYT PROGRAM systematically addresses the needs of students who have fallen behind due to serious mental health challenges, both students returning to school following extended health- or mental health-related absences, as well as children who attend school more regularly but are often unable to function due to a serious mental health challenge. BRYT programs reduce drop-out rates and improve attendance, functioning, and academic performance among a significant student subpopulation.³

THE BROOKLINE CENTER'S BRYT TEAM is comprised of mental health practitioners and educators with extensive experience working in schools and clinical settings, who share a deep commitment to racial equity and to building comprehensive and equitable supports for all students.

From the beginning of the pandemic, we have focused significant efforts on helping existing BRYT programs navigate the shift to remote and hybrid operations through customized technical assistance, cross-school cohort meetings, professional learning opportunities, and on-call consultation.

At the same time, in light of the dramatic disruptions to the landscapes of schooling and school-based mental health work, BRYT's efforts have expanded to include large-scale professional development and customized school and district consultation helping local leaders plan and execute comprehensive student, family, and staff SEL.

We have worked with over 6,000 educators and leaders from 200+ districts/schools since the COVID-19 crisis began. BRYT has also expanded to support parents and caregivers via free and open weekly family support groups, including groups for BIPOC parents/caregivers and Spanish speakers.

BRYT SCOPE OF WORK DURING THE PANDEMIC

- 
- Work with schools/districts to design and implement integrative mental health supports
 - Provide customized PD for schools/districts around integrated and equitable student, family, and staff supports
 - Provide family support groups for ANY caretaker, including BIPOC and Spanish-speaking groups
- Provide family supports for caretakers affiliated with BRYT program
 - Provide PD and continuous improvement opportunities to BRYT programs
- Work with MA schools and beyond to implement tier 3 transition program for students returning from school from extended mental health-related absence

³ White H, LaFleur J, Houle K, Hyry-Dermith P, Blake SM. Evaluation of a school-based transition program designed to facilitate school reentry following a mental health crisis or psychiatric hospitalization. *Psychol Schs*. 2017;00:1–15. <https://doi.org/10.1002/pits.22036>

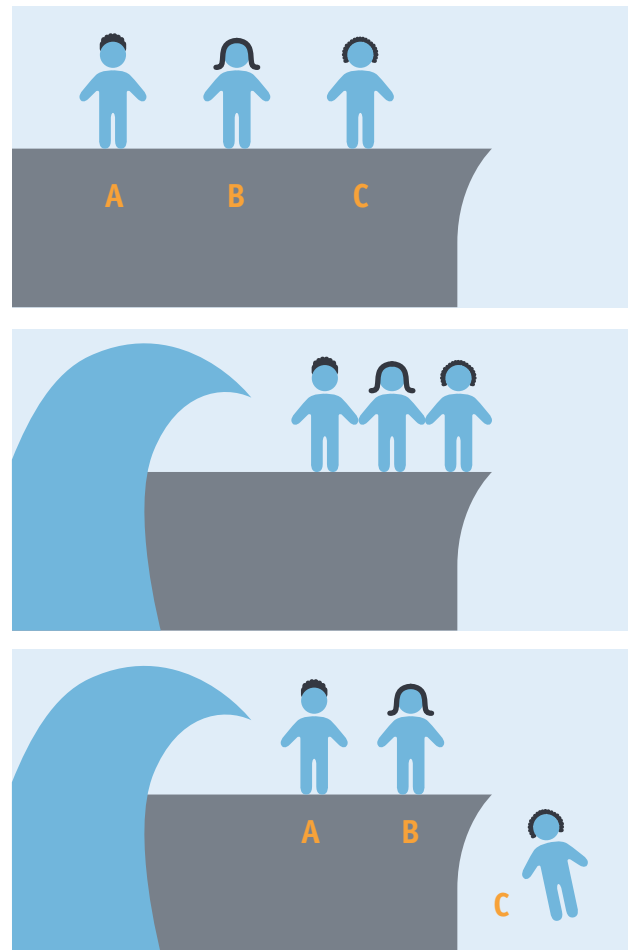
A Slow-Moving Trauma

THE INITIAL SCHOOL CLOSURES in March spawned the first questions about children’s mental states and what was to come. As schools rushed to move their supports online, clinicians in our network reached out to BRYT with concerns about students’ lack of connection over the screen, unwillingness to engage, and heightened anxiety—and this was just for students who were already involved with BRYT programs. What would happen to these students—and to their peers who were not already receiving support?

Bruce D. Perry M.D., Ph.D. was among the first to recognize that we are experiencing a slow-moving, collective trauma that will reverberate for years to come. For children, the social isolation and, in many cases, experiences of deprivation associated with the lack of consistent, caring adults due to illness, burnout, and/or economic instability, can create conditions of toxic stress. This toxic stress leads not just to anxiety and depression but also to cognitive delays, learning problems, as well as higher rates of asthma, diabetes, addiction, and teen pregnancy.⁴

Alice Barber, LMHC-CAT, BRYT’s early childhood mental health specialist, created a visual metaphor for the pandemic as a tsunami: it would take time to build, but would affect all children regardless of their level of well-being prior to COVID-19.

In the drawings, child A is highly resilient in response to stress; child B has “average” resilience; and child C is the most vulnerable. As the illustrations depict, the pandemic would push all children closer to the limits of their resilience. It will push some children past their limits and into a sea of anxiety, depression, and grief that could lead



to suicidal ideation, self-harm, and significant depression⁵ and shape their futures for years to come.⁶ Parents report that their children are manifesting mental health symptoms at significantly higher rates than before the pandemic, including children who did not struggle with mental health challenges in the past.⁷ In order to avoid—or at least mitigate—a generational crisis, ***schools must make it their job to do everything possible to keep every child from falling off this cliff.***

⁴ Miller, L. Children of Quarantine: What does a year of isolation and anxiety do to the developing brain? *The Cut*. November 24, 2020. <https://www.thecut.com/2020/11/covid-19-pandemic-kids-mental-health.html>

⁵ Loades, M. E., Chatburn, E., Higson-Sweeney, N., Reynolds, S., Shafran, R., Bridgen, A., Linney, C., McManus, M. N., Borwick, C., & Crawley, E. (2020). Rapid Systematic Review: The Impact of Social Isolation and Loneliness on the Mental Health of Children and Adolescents in the Context of COVID-19. *Journal of the American Academy of Child and Adolescent Psychiatry*, 59(11), 1218–1239.e3. <https://doi.org/10.1016/j.jaac.2020.05.009>

⁶ While in the second illustration it’s the child who struggled most prior to the pandemic who is pushed over the cliff, many school staff members with whom we’ve spoken have noted instances where students like “Child C” have benefited during the pandemic from the relative predictability of being home every day, while students like “Child A”—those who flourished in the school setting prior to the pandemic—have seriously struggled.

⁷ Miller, L. Children of Quarantine, op cit.

Racial Inequity at the Forefront

THE SPRING 2020 MURDERS of Ahmaud Arbery, Breonna Taylor, and George Floyd spurred nationwide protests and a powerful mandate for sustained action for institutional justice and social change. At the same time, in addition to the explicit violence against Black people, COVID-19 was exposing long-standing underlying inequities in technology, housing, health, food distribution, and more. All of these factors contribute to disproportionate

SCHOOLS have been part of the experience of systemic inequality for BIPOC communities since well before the COVID-19 pandemic, as demonstrated by just a few among many United States statistics available from 2014 and any other year we might choose:

- Black students accounted for 18 percent of the country's pre-K enrollment, but made up 48 percent of preschoolers with multiple out-of-school suspension.
- Black students were expelled at three times the rate of white students.
- Black girls were suspended at higher rates than all other girls and most boys.
- Less than half of American Indian and Native-Alaskan high school students had access to the full range of math and science courses, which consists of Algebra I, Geometry, Algebra II, Calculus, Biology, Chemistry, and Physics.
- Black and Latinx students accounted for 40 percent of enrollment at schools with gifted programs, but only represented 26 percent of students in such programs.
- Black, Latino, and Native American students attended schools with higher concentrations of first-year teachers (3–4 percent) than white students (1 percent).

MOYERS ON DEMOCRACY, 14 Disturbing Stats About Racial Inequality in American Public Schools, 2014

levels of stress in BIPOC communities⁸ and to the negative health/mental health and life outcomes associated with toxic stress. In June 2020, the National Association of Social Workers declared that we were grappling with two different pandemics: COVID-19 and racism.⁹

From the earliest days of the pandemic, educators worked to ameliorate inequities by distributing resources such as food and technology to those connected to the school community.¹⁰ During summer of 2020, school and district leaders were called upon to plan for students' return to school in the fall and to make school as "normal" as possible by focusing on physical safety and instructional models.

This often all-consuming focus on improving instructional technology and delivery and preventing the spread of the virus militated against a focus on racial equity and mental health by educators preparing for school in the fall.

Nevertheless, the disruption to "school as normal" provided, and continues to provide, a critical opportunity for schools, teachers, and communities to re-think school for all kids, and especially for those students for whom school was not going well before COVID-19—including, very significantly, BIPOC students. ***By pushing away from the idea of "going back to normal," schools can open doors toward equity.***

⁸ Evans, Britt. *The Other Pandemic: Unpacking the Mental and Physical Health Consequences of Racism*. Chicago Psychotherapy, LLC, 19 Sept. 2020, www.chicago-psychotherapy.com/cp-blog/tag/Anti-Racism.

⁹ "Social Work Is Grappling with Two Pandemics: COVID-19 and Racism." *Social Work Blog*, National Association of Social Work, 5 June 2020, www.socialworkblog.org/advocacy/2020/06/two-pandemics/.

¹⁰ Hernandez, Samantha. "When Teachers Brought Free Lunch to Kids amid COVID-19, They Saw Poverty up Close." *USA Today*, Gannett Satellite Information Network, 3 Jan. 2021, www.usatoday.com/story/news/education/2021/01/03/covid-food-delivery-free-school-lunch-teachers/4078529001/.

The Teachers Are Not Alright

SPRING 2020 was a blur of remote interactions and constantly shifting expectations. Educators were panicked and confused as to what their role could and should be, as they shifted to deliver learning remotely with the expectation of immediately mastering and applying these skills; responded to pressure to keep students fully on course for mastering academic standards despite exceptionally challenging learning conditions; negotiated the weight and impact of a deeply divided national political landscape; cared for their own children, families, and communities; and in many cases managed personal emotional and physical health challenges.

The summer—usually a well-deserved break—was characterized by continued uncertainty about the year ahead, exhausting planning processes, and politicized battles about how schools would operate in the fall. Not surprisingly, early in the fall educators began to experience exhaustion and burnout that typically occur in June.

Students aren't served effectively when educators are not well, making it ***essential for district and school leaders to foster a climate in which educators are enabled to take care of themselves and each other.*** Educator wellness has been recognized as critical by virtually everyone associated with schools, but it's one thing to acknowledge a challenge and quite another to effectively address it. It is particularly important to avoid the trap of preaching self-care as a panacea for the extraordinarily difficult circumstances in which educators find themselves, suggesting that their challenges will be resolved by a few minutes of meditation or a daily walk.

“

[F]OR MY FAMILY (AND OTHERS I'VE SPOKEN TO)... THINGS ARE HARDER THAN THEY WERE AT THE BEGINNING. HARDER BECAUSE WE'VE ALL ACCRUED ANXIETY, STRESS, AND SADNESS OVER THIS PERIOD. MY TO-DO LIST IS LONGER AND FURTHER UNTOUCHED; MY GUILT AND ANXIETY FOR THE WAYS MY SON IS NOT BEING ENGAGED ENOUGH IS GREATER; HIS APPARENT SADNESS FOR HIS WHOLE WORLD SHIFTING IS INTENSIFIED AS HE REGULARLY ACTS OUT; AND OUR COLLECTIVE EXHAUSTION GROWS DEEPER.

CHLOE CLOONEY, “The Parents Are Not All Right,”
Medium, April 5, 2020

Neither Are the Parents

STUDENTS' STRESS impacts their families: parents and caregivers most directly bear the brunt of children's anxiety, depression, and grief. Now, parents have also been thrust into the role of front-line educators, while they struggle with the challenges of keeping food on the table and keeping themselves and their own parents healthy and safe. As with virtually all things in our country, these challenges are disproportionately affected by race: Black, Indigenous, and Latinx people are more likely to need to work outside the home¹¹, to be unemployed, to lack health insurance, to experience food and housing insecurity, and to die from COVID-19.¹² To better support children, parents and caregivers must also be supported.

¹¹ McClain, Dani. *I Never Felt Like a 'Single' Parent. Then the Coronavirus Hit.* The Nation, 8 Apr. 2020, www.thenation.com/article/society/coronavirus-family-single-parents/.

¹² “Coronavirus in African Americans and Other People of Color.” *Health*, John Hopkins Medicine, 20 Apr. 2020, www.hopkinsmedicine.org/health/conditions-and-diseases/coronavirus/covid19-racial-disparities.

FIVE PRIORITIES FOR EDUCATIONAL LEADERS THIS SPRING AND BEYOND

COVID-19 HAS PUSHED a series of rapid, unsolicited, and unwanted changes on schools. The ongoing need to manage continuous externally-imposed changes and “hold the unknown,” as well as the exposure of historic and contemporary racial trauma, make schools and districts want to “return to normal.” But a “return to normal” mindset is a mistake from the standpoints of pragmatism, psychology, and social justice. Rather, as we move through the pandemic and beyond, *circumstances demand that district and school leaders redesign schools to more equitably and effectively address the well-being of the school community.*

The range of possible approaches to this work, along with competing demands associated with physical health and perceived academic prerogatives, can be overwhelming. In working with schools, BRYT offers five areas for prioritization, taking into account the specific cultures and communities of schools and districts in the BRYT network.

1

Think and Plan Comprehensively for the Well-being of the Whole School Community

THE RECOGNITION that students, families, and staff are struggling with anxiety, depression, and grief—and, in many cases, the challenge to meet basic needs—means that if we are to take care of the whole community, we need frameworks and models for doing so. In these frameworks, we must recognize that at different moments, different members of the school community will need supports at different levels of intensity. With this in mind, BRYT developed a version of the widely-used Multi-Tiered Systems of Support (MTSS) framework, providing school leaders and educators with a tool they can use to *envision and compare their own systems with a comprehensive approach to whole-community care during the pandemic.* Using this tool, leaders can:

- **REVIEW** existing assets and think holistically about supports and about the “enabling structures”—teams, tools, processes, and data—needed to take care of everyone in the school community. Identify and work to address gaps in order to create the most comprehensive supports possible.
- **ENSURE** consistent non-academic check-ins with students to assess well-being, and appropriate intervention and/or referral, as quickly as possible, with students who are struggling. There are varying approaches; the key is to maximize communication in order to keep students from falling through the cracks.
- **ESTABLISH** clear division of labor and demarcation of responsibilities for addressing student, family, and staff well-being, avoiding an unstated and non-sustainable assumption that the same staff members are simultaneously responsible for supporting everyone in the school community.
- **PRIORITIZE** care coordination for the highest-need community members, recognizing that higher numbers of students are likely to experience complex physical and mental health and/or resource challenges through the remainder of the pandemic and beyond.

TIER III

INTENSIVE: Core + More + More

Students/families may struggle with:

- Death of family member(s)
- Severe medical challenges
- Severe mental health challenges
- Severe resource shortages

Multi-Tiered (non-academic) Systems of Support (MTSS) Map During the COVID-19 Crisis

TIER II

SUPPLEMENTAL: Core + More

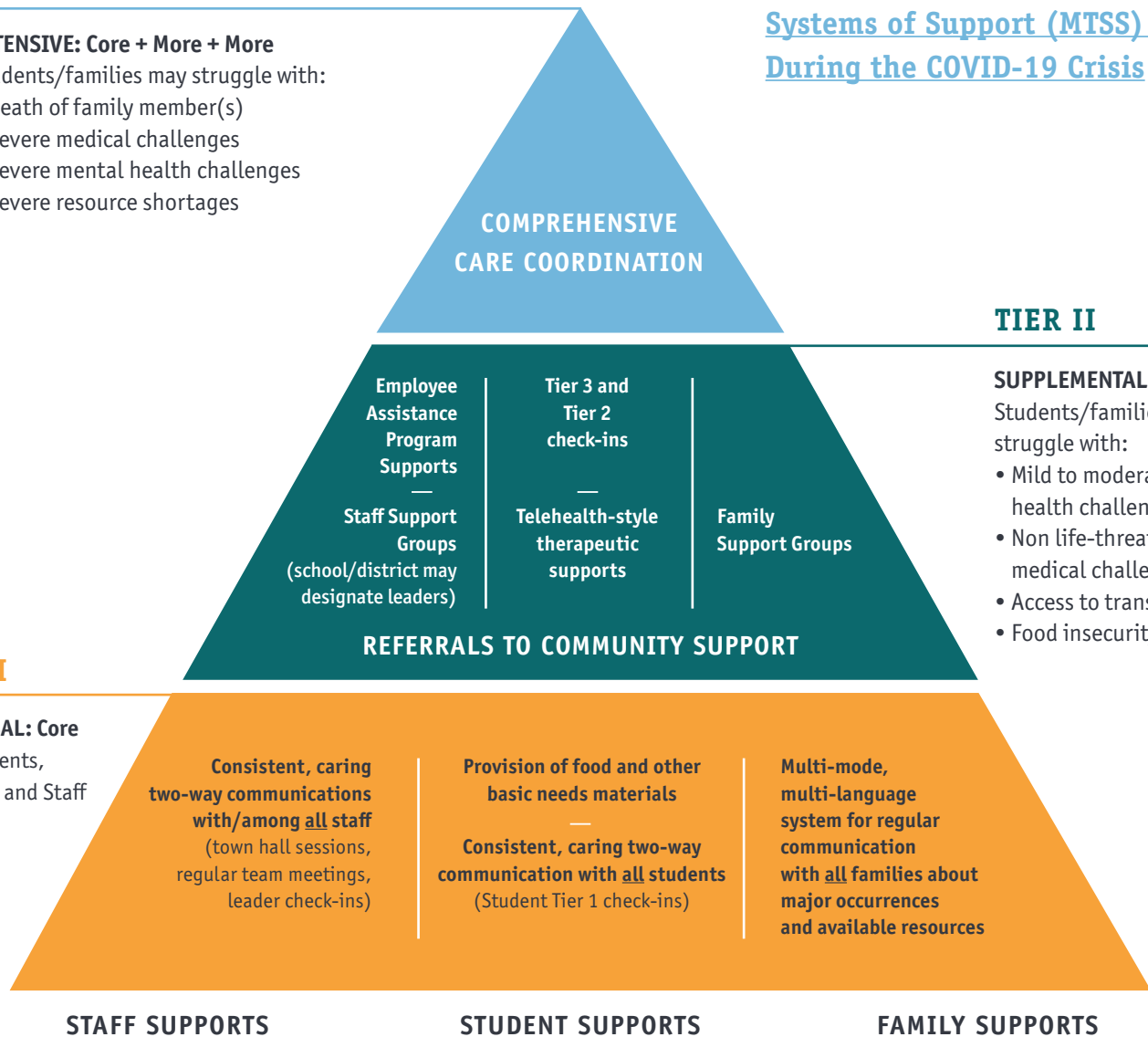
Students/families may struggle with:

- Mild to moderate mental health challenges
- Non life-threatening medical challenges
- Access to transportation
- Food insecurity

TIER I

UNIVERSAL: Core

ALL Students,
Families, and Staff



ENABLING STRUCTURES AND PROCESSES

- ▶ Student Support Team (or similar) to establish protocols, review referrals, and assign responsibilities
- ▶ Assignment of every student to an adult's consistent communication cohort with tools for monitoring
- ▶ Clear referral process of students/families that are struggling or can't be reached
- ▶ Clear assignment of responsibility for Tier 2 & 3 supports
- ▶ Continuous gathering of info on available resources and supports
- ▶ Basic needs provisions systems
- ▶ Employee Assistance Programs

2

Focus on Equity, All the Time

IN LIGHT of the many competing stressors and priorities associated with school operations during the pandemic, it can be easy to adopt a mindset of “deal with the immediate challenges now, and return to equity after the crisis.”

But inequity is, in fact, an immediate challenge, and ***now is the time to make sure that BIPOC students, students from families with low income, and students from other marginalized communities return to schools that are safe for them.*** This involves work that dismantles oppressive systems embedded into school policies and culture. Leaders may:

- **FLIP** the paradigm from planning for the mythical “typical” student to designing from the margins—recognizing that if we organize our schools to promote success for those who have historically had the hardest time attaining it, we are much more likely to achieve success for all.

- **ACTIVATE** or reactivate school- and district-level equity teams, with a specific focus on working toward greater equity during the remainder of the pandemic and beyond.
- **ENGAGE** with students, families, and staff of color, and other marginalized populations, in focus groups or empathy interviews to better understand their experiences with school, both prior to and during the pandemic.
- **INITIATE** professional learning series for leaders and educators balancing exploration and understanding of *personal* racism and unconscious bias with research and reflection to identify *institutional* structures, policies, and practices that maintain inequity. Develop specific action plans for changing these structures, policies, and practices.
- **SET** expectations and support leaders, teachers, and the wider school community to incorporate anti-racism into professional learning and classroom teaching.
- **CREATE** accountability structures through which students, families, and staff most affected by inequity have the opportunity to review and assess the effectiveness of change initiatives, and the power to reset direction when needed.

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... WHAT WE TEND TO DO IN THIS WORLD IS DESIGN FOR THE MIDDLE AND FORGET ABOUT THE MARGINS... IF YOU ACTUALLY PAY ATTENTION TO THE MARGIN AND DESIGN FOR THEM YOU ACTUALLY COVER THE MIDDLE. IT'S LIKE A TENT, RIGHT? IF YOU TAKE A TENT AND YOU STAKE IT FAR OUT AT THE MARGINS, WELL GUESS WHAT, THE MIDDLE IS ALWAYS COVERED. AND THE FURTHER OUT YOU STAKE IT THE STRONGER THE STRUCTURE YOU GET. AND WHY IS THAT? BECAUSE IN OUR SOCIAL SYSTEMS THE PEOPLE AT THE MARGINS ARE ACTUALLY LIVING WITH THE FAILURES OF THE SYSTEMS. AND THEY ARE CREATING ADAPTIVE SOLUTIONS TO THEM. SO WHEN WE DESIGN TO TAKE CARE OF THEM WE BUILD STRONGER SYSTEMS FOR EVERYONE.

CEASAR MCDOWELL

3

Lead Boldly and Intentionally for Transition

DURING SUMMER 2020, BRYT shared with leaders a set of “guiding principles” for planning the return to school, organized in three broad categories—equity, mental health, and design planning. Given the duration of the pandemic and the reality that schools are returning to the classroom at different times, these principles will continue to apply in spring 2021 and beyond.

GUIDING PRINCIPLES



Along with these principles, we have emphasized the importance of leading for transition, grounded in William Bridges’s change leadership framework¹³ where *“transition” is understood as the emotional and psychological processes that people experience in relation to externally imposed change*. Bridges reminds us that leaders often over-focus on the technical aspects of the change (e.g., the specifics of physical distancing and remote learning) and fail to effectively guide their people through the transition process. Leaders who focus on emotional and psychological transition while redesigning schools toward greater well-being should:

- **PUBLICLY** communicate intention to rethink long-standing assumptions about and approaches to schooling, including staff roles, team structures, schedules, and curricula.
- **INTRODUCE** a *design thinking* framework for planning school operations to create, test, evaluate, and redesign solutions to identified problems.

- **INTRODUCE** solutions in cycles of a few weeks at a time, without being afraid to adapt in the next cycle based on learning from the current one.
- **PROVIDE** forums for members of the school community to share ideas and feedback about priorities, goals, and specific solutions toward greater well-being.
- **WHEN NEW APPROACHES** will be tested and/or adopted, announce changes well in advance, acknowledge that change is difficult, and create opportunities for school community members to process the change both before and during implementation.
- **WHILE MODELING** willingness to make adjustments required for early- and mid-course improvements, *hold steady* with significant redesign work despite initial pushback, which is all but certain to occur.

¹³Bridges, William. *Bridges Transition Model*. William Bridges Associates, 12 Mar. 2020, wmbridges.com/about/what-is-transition/.

4

Promote and Practice the BRYT Mantra, Starting with the Adults

INFLUENCED and inspired by Bruce D. Perry’s M.D., Ph.D. work, BRYT developed a set of principles that educators can adopt toward mitigating children’s stress and fostering resilience.

- **PRACTICE AND PROMOTE SELF AND COLLECTIVE CARE**

Early in the pandemic, BRYT realized that we could not effectively help any new school or district support students without first addressing the matter of adult well-being. We also recognized that “self-care” is too often considered an individualistic and privileged activity, and shifted our discourse to focus on self-repair¹⁴ and collective care. As time went on, we heard more stories from educators about being unable to find the time to practice self- and collective care in light of continually increasing workplace and family demands—while simultaneously feeling blamed for not taking care of themselves.

- **Specific steps for school and district leaders may include:**

- Organizing professional learning focused explicitly on self- and collective care, moving beyond oversimplification to integrate specific and pragmatic steps: practicing self-compassion, setting boundaries, assessing one’s own well-being, self-regulating, and finding opportunities for connection and creativity.
- Creating ongoing structures for staff to connect and take care of themselves and each other. For example, all staff of BRYT programs in our network are invited to participate in biweekly job-alike cohort groups of 8-12 members that allow for sharing experiences and ideas, and acknowledging and supporting each other through common struggle.
- Establish, or encourage family participation in, peer support groups for parents/caregivers of school students providing the opportunity for families to acknowledge and support each other through common struggle as they discuss topics and concerns of interest.¹⁵
- Moderate expectations of staff and families alike.

- **FOSTER CONNECTION WITH AND AMONG STUDENTS**

in light of how much the pandemic has disrupted the ordinary in-school relationships that are critical for student well-being and learning. This includes taking the time to intentionally orient students to new experiences and expectations as they begin to come back to school in greater numbers, and engaging in explicitly relational work such as circles, one-on-one and small-group conversations, and community-building activities.

- **ENSURE PREDICTABILITY** given how widespread

uncertainty about just about every aspect of any student’s life has been since winter 2020. This includes establishing reliable rituals and routines, making plans explicit, and following through on all promises and commitments.

- **ENABLE AGENCY** on the part of students given the restrictions they have faced and their experience of an even greater lack of control over their actions than that typically associated with childhood, whether this be multiple options for assignments for the same topic or choice of a game to play with classmates.

- **MODEL MODERATION** by demonstrating flexibility and rethinking expectations (*see right*).

¹⁴ As BRYT Associate Director Courtney Tucker put it, “We would never let our phone batteries die—we always recharge them. We need to take the same approach with ourselves!”

¹⁵ BRYT currently offers five weekly free and open groups for any parent/caregiver of a school student: three in English open to all, one in English specifically for parents/guardians who identify as Black, Indigenous, or People of Color (BIPOC), and one in Spanish.

5

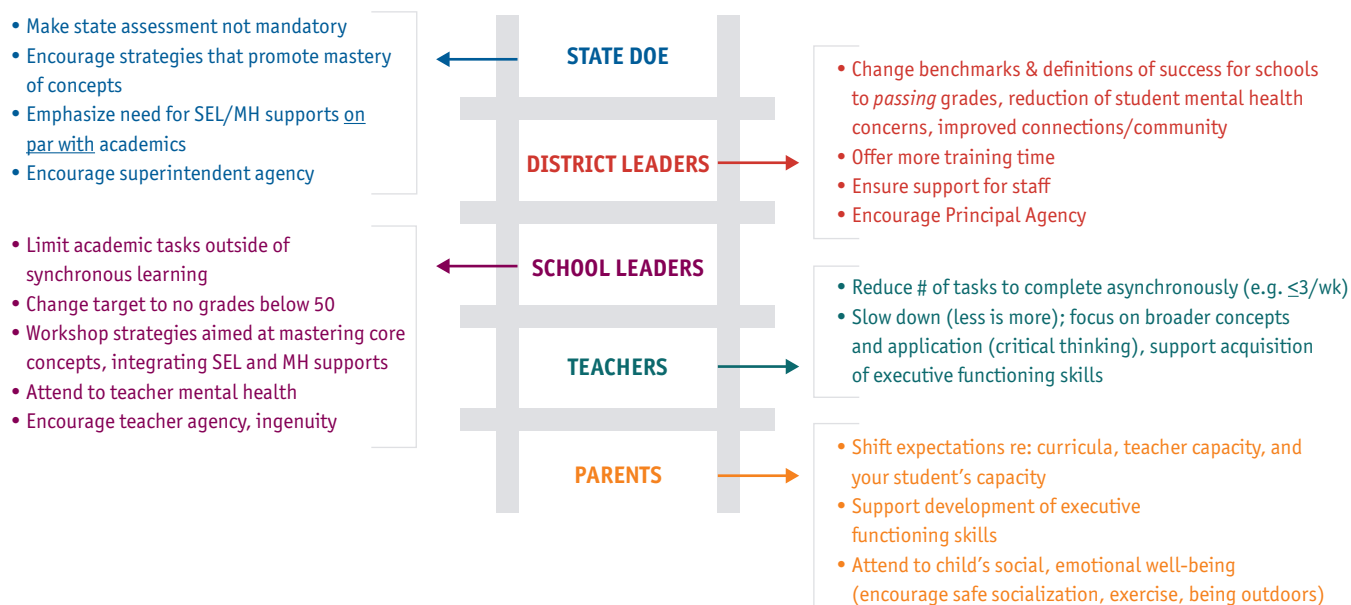
Model and Advocate for Moderation through 2020-21 and Beyond

AS WE PREPARED this document in late 2020 and early 2021, we heard frequent reports of overwhelm among students, teachers, parents, and administrators as evidenced by: disengagement and nonattendance; lagging student performance; poor executive functioning skills and emotional coping strategies; and significant evidence of acute stress response. The implications for this overwhelm are wide-ranging, both in the short- and long-term, and extend into people's lives in deep and real ways—from

their relationships to their medical and psychological well-being. To return to Dr. Perry's framing, ***we are seeing the slow-moving trauma intensify in real time.***

EMOTIONAL OVERWHELM is a state of being beset by intense emotion that is difficult to manage. It can affect your ability to think and act rationally. It can also prevent you from performing daily tasks.

MODEL MODERATION AND COMPASSION: WHAT IT LOOKS LIKE



Despite the overwhelm and trauma, teachers are being asked to deliver and students are expected to master the same material and meet the same standards as in prior years. By asking children and adults to perform at the same levels now that they did prior to COVID-19, we are not actually asking them to do the *same*, but rather to do *more*: to learn in new ways, in different environments, with little contact with peers, and with little to no ability to access any of the activities that serve to relieve stress, ground them, connect them, or give them a break.

In this situation, the urgency for **moderation** rises above the other principles in the BRYT mantra. Moderation involves avoiding excess or extremes. And moderation applies to adults at every level of the educational system.

But moderation is surprisingly difficult. It goes against deeply-held cultural norms in our country, which tell us that more is better and that if we just work harder we can keep doing things the way we've always done them. It brings up fears of having our children "fall behind," despite our understanding that the pandemic is affecting all children everywhere and our awareness that many children are falling further behind. Avoiding moderation keeps schools focused on academics, which is comfortable territory. ***Now is the time for moderation in districts and schools.***

COMPREHENSIVE PLANNING, attending to equity, leading for transition, embracing a mantra of stress mitigation, and advocating for moderation are only starting points for addressing the deep challenges districts and schools will continue to face in relation to mental health and systemic inequity in the months and years ahead. Leadership for wellness, equity, and excellence is both an art and a science, requiring patience and a multifaceted, evidence-based approach aligned with each school community's assets and needs. No matter what, continuing to adapt to the pandemic demands increased attention on supporting the mental health of everyone in the school community immediately and moving forward.

Summary of Key Learnings:

- COVID-19 represents a slow-moving collective trauma experience with both immediate and long-term implications for the mental health of students, parents, and school staff.
- Addressing the impacts of COVID-19 demands a comprehensive approach to care for the well-being of the whole school community at different levels (or tiers) of need: universal, supplemental, and intensive.
- The COVID-19 pandemic is inextricably tied to our country's history of systemic racism, and working to address racism **is** working to ameliorate the inequitable impact of the pandemic.
- Internal work and growth, which is typically deeply uncomfortable, is critical to addressing inequities in every institution. No organization can achieve greater equity simply through training and technical work.
- It has been difficult for school and district leaders to keep mental health and equity at the center of their work during the pandemic in light of real and perceived pressures around academics and COVID-19 prevention.
- Even in a pandemic, opportunities for transformation abound if we are willing to take them.
- Effective leadership during the COVID-19 pandemic and beyond depends on supporting people through emotional and psychological transitions—not just managing externally-imposed change.
- We can't help schools work effectively with kids right now if we don't start with the acknowledgement of, and work to address, the needs of the adults.
- Simply prescribing "self-care" is not effective. Adults in school need time and support to engage in meaningful and sustained efforts to stay well.
- Districts and schools must attend to collective care and personal connection among adults, who can then attend to the same needs among students.
- The BRYT Mantra:
 - Foster connection with and among students
 - Ensure predictability to the greatest degree possible
 - Enable agency and decision-making on students' part whenever possible
 - Model moderation in expectations, assignments, and assessments, including in educator workloads
- Moderation is and will remain critical at all levels of the educational system through the remainder of the pandemic in light of increased levels of stress and trauma among students and educators.



Contact

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