

Interventions for School Counselors Encountering COVID-19 Impacts

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Abstract

As the impacts of the COVID-19 pandemic on children and adolescents become apparent, school counselors and educators must work together to identify students who may be suffering. As a student advocate and leader within their schools, school counselors are in an optimal position to offer interventions and strategies that may be helpful to students, parents, administrators and teachers. Collaboration and coordination between schools and communities is also necessary for school counselors to be successful in helping students develop resiliency surrounding the impacts of COVID-19.

Keywords: adolescents, technology addiction, COVID-19, pandemic, screen time

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In December, 2019, a group of respiratory illnesses were diagnosed in China, known today as Coronavirus disease (COVID-19) (World Health Organization (WHO), 2021). In January, 2020, the World Health Organization announced the new virus as an international public health emergency and cases of the virus began to appear in the United States (Eidi & Delam, 2020). Recommendations for preventing the spread of the disease included quarantining, social distancing, and wearing masks. Additionally, travel bans, restrictions on public gatherings, and closure of public schools began (Parmet & Sinha, 2020). The closure of K-12 schools affected approximately 124,000 schools and 55.1 million students nationwide (Esposito & Principi, 2020). With the closure of public schools, student access to free and reduced lunch services, special education services and behavioral health services were limited. In addition, for many students, prolonged school closures led to social isolation, lengthened screen time, anxiety, frustration, boredom, depression, weight gain and disrupted sleep cycles (Wang, et al., 2020).

Professional school counselors are trained in assessing behavioral health issues in children and adolescents (American School Counselor Association (ASCA), 2019). Students presenting with symptoms of depression and anxiety are not new to school counselors. However, the COVID -19 pandemic has brought forth different and somewhat new behavioral health issues among children and adolescents, such as increased social isolation and intensive use of the internet (Deslandes & Countinho, 2020). A survey in 2019 reported that children ages 8 to 12 average 5 hours a day and teens spend 7.5 hours a day viewing screens outside of homework and time spent in schools (Wiederhod, 2020). As of May 21, 2020, estimated screen time which includes

digital tablets, smartphones, desktop computers and television has increased for 12- to 18-year-olds by 50-60% (Wartella, 2020). Given the amount of time youth are spending with technology, it is understandable that parents and school counselors may have concerns of possible technology addiction and its impact on mental and physical health.

The Diagnostic and Statistical Manual Disorders 5th ed (DSM-5) (APA, 2013), does not include technology addiction, however, internet gaming disorder is included as a topic for further study. Although technology addiction is behavioral, many of the symptoms of addiction are similar, such as: having a preoccupation with technology, feeling anxious when not engaged with technology, loss of interest in previously enjoyed activities, and not being truthful about the amount of time spent engaged with technology (Siegle, 2017). Some students deprived of technology for a 24 hour time period reported signs of mental and physical distress such as panic, confusion, isolation and physical distress (International Center for Media and the Public Agenda, n.d.).

Adolescents are a vulnerable group, and the difficult transitions which transpired through the COVID-19 pandemic may have caused multiple disruptions in their lives. Students were exposed to sudden school closures, unexpected bereavements, chronic and acute stressors, anxiety, familial stress, and home quarantine (Guessom, et al, 2020).

ASCA provides guidelines for professional school counselors which outline various approaches for working with students experiencing both physical and mental health issues (ASCA, 2019). More specifically, the ASCA National Model (ASCA, 2019) provides a framework for school counseling programs. The ASCA National Model is comprised of four components: (a) define, (b) manage, (c) deliver, and (d) assess

(ASCA, 2019). Approximately 80% of the school counselor's time, according to the model, should be spent on direct and indirect services to students. Direct and indirect services are elements of the *deliver* component within the model. According to ASCA, direct services include counseling, advisement, instruction, and appraisal, and involve "the school counselor and students working together toward a specific goal" (ASCA, 2019, p. 78). Indirect services, delivered through strategies such as referrals, consultation, and collaboration, are a means to "support student success and to promote equity and access for all students" (ASCA, 2019, p.81).

Foxx et al. (2016) define crisis counseling as "an immediate, time-limited treatment process" (p. 241). The impacts of COVID-19 may, in some cases, constitute a crisis to children and adolescents (Guessoum et al., 2020). According to ASCA (2019), counseling can be utilized in response to a crisis both during and after times of extreme problems, danger, or distress that require a timely response. In addition to offering direct services to students who may be suffering from the impacts of COVID-19, school counselors also offer indirect services to students, parents and teachers which include consultation, collaboration, and referrals (ASCA, 2019). Consultation is multifaceted and includes gathering pertinent and timely information and providing strategies to teachers, parents, and other educators. Collaboration involves working with stakeholders to advocate for equity and access as well as support student achievement. One aspect of collaboration includes providing parent workshops, which may include informational sessions about issues related to student development or other commonly faced student issues. Finally, school counselors, when needed, may refer students and parents to

school or community resources, including community agencies that treat mental health issues (e.g., suicidal ideation, depression, or violence; ASCA, 2019).

Crisis response involves interventions and follow-up to help students navigate critical or emergency situations to prevent the situation from becoming more acute. The following steps are recommended to quickly and appropriately address a student in crisis: (a) assess student functioning and potential need for an immediate referral; (b) use basic counseling skills to help the student cope, accept, and find out the causes of distress; (c) use basic counseling skills to co-create an immediate or planned resolution of the problem; (d) determine whether an appointment, referral, or termination is most appropriate (Foxy et al., 2017).

Protective Factors for Children and Adolescents

COVID-19 has changed the manner in which professional school counselors offer services to students, parents, and the community; because of this, school counselors may find themselves focused on basic protective factors for students. The following protective factors have been found to promote student well-being, prevent feelings of isolation or depression, and build feelings of connectedness.

Positive Peer Relationships

Positive peer relationships provide social and emotional support and are known to protect against the risk of depression and anxiety (LaGreca & Harrison, 2005; Roach, 2018). Madson, et al. (2020) found that, during the pandemic, adolescents were most concerned about quarantine and restrictions placed on them which limited peer interactions and caused feelings of depression and poor life satisfaction. Similar survey results indicated that adolescents had an overall concern about COVID-19, but

particularly worried about schooling and peer relationships (Ellis et al., 2020).

Adolescents seek emotional and relational connections online, yet many are finding electronic relationships unfulfilling and find themselves feeling more anxious and depressed as screen time increases (Boers, et al., 2019).

Peer relationships are of particular importance in the lives of adolescents, especially those teens who may feel vulnerable (Sanders, et al. 2017). Pea et al. (2012) found that face to face communication was more strongly associated with positive well-being as compared to online media communications. Nesi et al. (2017) developed a framework for social media and the transformation of peer relationships stating “experiences are transformed in five key ways: changes in the frequency or immediacy of experiences, amplification of processes through increased intensity and scale, alterations in the qualitative nature of experiences, opportunities for compensatory behaviors, and the creation of entirely novel behaviors.” (p. 272). Relational interactions via technology contribute to both a connectedness and disconnectedness for adolescents (Weinstein, 2018). Therefore, positive peer relationships in adolescence clearly promote positive mental health (Roach, 2018), and face to face adolescent peer communications have been strongly associated with positive social well-being (Pea, et al., 2012)

Feelings of connectedness

Another protective factor associated with an adolescents’ ability to successfully navigate a wide array of life stressors is having a feeling of connectedness (Bernat & Resnick, 2009). Children and adolescents pose a greater risk of vulnerability and psychological stressors due to the pandemic because of their immature cognitive and

emotional regulation systems (Zhou, 2020). Families, parents, community resources and agencies also serve as protective factors for students who may be struggling with anxiety, depression, isolation, addiction to technology and other COVID-19 related mental and physical health issues. According to Hall-Linde, et al. (2007), family connectedness, school connectedness, and academic success are key considerations in providing protective factors for adolescents. Researchers have established the importance of adolescents' attachment to peers and families, as well as a sense of connectedness to schools, as factors in mental health wellness (Oldfield et al., 2016). Studies have shown that adolescents who felt a sense of social connectedness to family, peers, school, and neighborhood at one point in time subsequently produced a sense of well-being and life satisfaction, confidence, and positive mood over time (Jose et al., 2012). In order to promote a sense of connectedness and to improve the psychological distress experienced by children and adolescents following the COVID-19 pandemic, Zhou (2020) recommends a cooperative approach between school, family, and social systems. Professional school counselors could serve as advocates for the merging of these supportive systems upon the reopening of schools.

Practical Interventions for School Counselors

Positive school experiences and positive mental health for children and adolescents is well researched (Baker, 1999; Samdal et al., 1999; Stiglbauer, et al., 2013). Galassi and Akos (2007) introduced strength-based approaches to school counseling offering methods and practices for professional school counselors to infuse resilience-building into counseling programs. Examples of resilience-building as discussed by Ginsburg and Jablow (2011) include the seven C's: competence,

confidence, connection, character, contribution, coping and control. School based counseling interventions are typically affective based, skill based or knowledge based and are designed to improve the mental health of students. There are a number of established and effective interventions available to professional school counselors (Paulus et al., 2016). Research has shown that cognitive behavioral interventions, preventive, and therapeutic interventions are effective and improve the lives of students (Barry, et al., 2013; Greenberg et al., 2001; Hennessy & Tanner-Smith, 2014; Neil & Christenson, 2009). Encouraging students to develop both short- and long-term goals offers a sense of self control which reduces anxiety and increases confidence (Oliver, et al., 2006; Thakur& Jain 2020). ASCA's (2019) social/emotional development domain defines competencies guiding school counseling programs to help students manage emotions and to learn and apply appropriate interpersonal skills.

Basic invitational and listening skills

Helping students to manage emotions and apply interpersonal skills appropriately requires the ability to communicate effectively. The essence of online communications does not lend itself to the development of basic listening skills, which are paramount in the formation of healthy relationships (Young, 2017). The isolation period at the beginning of the COVID-19 pandemic resulted in a vast increase in child and adolescent social media use (Ellis et al., 2020). While online interactions increased, so did reports of cyberbullying and personal/social issues (Ellis et al., 2020). Teaching children and adolescents basic invitational and listening skills can promote the building of healthy face to face relationships. Young (2017) discusses invitational skills and nonverbal skills which include making eye contact, having an open body position,

allowing silence without interruption, and nonverbal encouragers such as head nods. To further enhance the art of listening, Young (2017) discusses the use of open and closed questions. Teaching basic listening and communication skills align with ASCA's (2019) social/emotional domain and could be incorporated into classroom lessons or small group counseling.

Progressive Muscle Relaxation and Mindfulness Training

As previously stated, COVID-19 has led to an increase in screen times for children and adolescents and increased levels of anxiety and depression causing detrimental effects (Montag, et al., 2019; Wang, et al, 2020). Progressive muscle relaxation has been shown to reduce anxiety and can be implemented in classrooms with the help of teachers (O'Donnell & Dunlap, 2019). Although mindfulness training may not be widely used in school settings, teaching students to be mindful and self-aware can help students increase academic performance, develop social skills, and learn coping mechanisms (Tadlock-Marlo, 2011). Teaching self-awareness strategies enables students to become empowered by taking responsibility for their thoughts, feelings, and actions (Tadlock-Marlo, 2011). Mindfulness is the deliberate awareness of the present moment without judgment (Kabat-Zinn, 2003). Mindfulness training for students fosters self-awareness of cognitions, teaches emotional regulation, and cultivates kindness for self and empathy for others (Black, 2015). Research indicates that children and adolescents ages 6-18 trained in mindfulness have experienced immediate improvement in anxiety and depression symptoms, rumination, externalizing problems and prosocial skills (Black, 2015). Furthermore, teaching students how to be mindful has been shown to be a factor in increasing resilience (Kamath, 2015).

Professional school counselors can help alleviate some of the mental and physical health issues associated with COVID-19 by offering students interventions such as progressive muscle relaxation and mindfulness training which are designed to build resilience (Thakur & Jain, 2020).

Encourage prosocial behaviors such as intentional acts of kindness

Prosocial behaviors can be defined as positive actions benefitting others that are “prompted by empathy, moral values, and a sense of personal responsibility rather than a desire for personal gain” (Kidron & Fleischman, 2006, p. 90). According to Schacter and Margolini (2019), prosocial behaviors serve to counteract depression and contribute to overall improvement in the mental health of students. In addition to depression, both

bullying and disruptive behaviors in schools have been counteracted by prosocial behaviors (Binfet & Passmore, 2019; Raskaukas, et al., 2010). Researcher shows that students who participated in prosocial behaviors, such as practicing acts of kindness, had an overall improvement in well-being and peer acceptance (Caprara, et.al, 2015; Layous, et al., 2012). Therefore, it is suggested that professional school counselors utilize interventions which encourage students to engage in acts of kindness to support students affected by COVID-19.

Binfet (2015) has developed a framework for students practicing intentional acts of kindness. The framework includes steps of creating a kindness bank (who are going to be the recipients of the act), planning acts of kindness, devising a verification process (so that students are not planning to engage in any acts which could endanger themselves or others), establishing a timeline of events to occur, and reflecting upon completion of the intentional acts. This particular framework aligns with ASCA’s (2019)

social/emotional domain and could be altered to serve the needs of a specific classroom or group. School counselors can utilize this framework in classroom lessons or small group counseling. As with any successful intervention the support of teachers and administrators is paramount (ASCA, 2019).

Promote an Increase in Physical Activity

The physical health and wellness of children and adolescents is another factor which was impacted by COVID-19 (Espino & Principi, 2020). Studies have shown a negative impact on physical health related to being sedentary and increased screen time usage (Bailey et al., 2018; Biddle & Asare, 2011). Additionally, positive linkage has been found between increased physical activity and improvement in mental health (Biddle & Asare, 2011).

Engaging in physical activities helps activate the dopamine system and reduce cortisol secretion which may be extremely helpful in promoting a positive sense of well-being (Krab & Lightfoot, 2010). Ren et al. (2021) found that adolescents who spent more time on physical activities and maintaining daily living routines showed fewer depressive symptoms in post quarantine studies. Further, adolescents who participate in exercising in natural environments can reduce psychological stress and improve cognition (Wade et al., 2020). School-based physical activity interventions have been shown to have positive effects for students aged 6-18 and it is recommended that schools make physical activity a priority just as they do other healthy behaviors (Dobbins, et al., 2013). Professional school counselors could encourage faculty and staff to help motivate students to increase their levels of physical activity during the school day and beyond regular school hours.

Limitations

The interventions listed above are offered to provide school counselors with ideas to address the impacts of COVID-19. However, as with all interventions, school counselors must modify each to meet their schools' and students' specific needs. School counselors must also adhere to state and district policies when developing their unique interventions. For example, it is possible that mindfulness training may not be accepted in specific districts. These interventions are not designed to be the sole guideline for school counselors to follow, but to act as a tool for school counselors developing their school plans to address the impacts of COVID-19. Additionally, assessment procedures and interventions may need to be modified based on student culture or developmental level.

Conclusion

The COVID 19 pandemic has resulted in residual impacts for our children and adolescents. For many students, prolonged school closures have led to social isolation, lengthened screen time, anxiety, frustration, boredom, depression, weight gain, and disrupted sleep cycles (Wang, et al. 2020). School counselors must work with teachers and administrators to identify students who may be suffering from the impacts of COVID 19; additionally, parents, students and community members may serve to help identify suffering students. School counselors are in an optimal position to offer interventions and strategies that may be helpful to students, parents, administrators, and teachers.

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