

Reopening Child Care & Early Education Programs during the COVID-19 Pandemic

Infant and Early Childhood Mental Health Focused Best Practice Recommendations

Children 0-6 years old have unique social-emotional needs and are at highest risk for potential developmental impact due to the heightened stress of the pandemic. Parents and caregivers, including childcare providers can directly reduce this negative impact through your nurturing, consistent, sensitive presence.

Expect big behaviors

As children communicate their big feelings of Separation Anxiety, Traumatic Stress, fears related to change in routine and environment, and struggle with developmental regression.



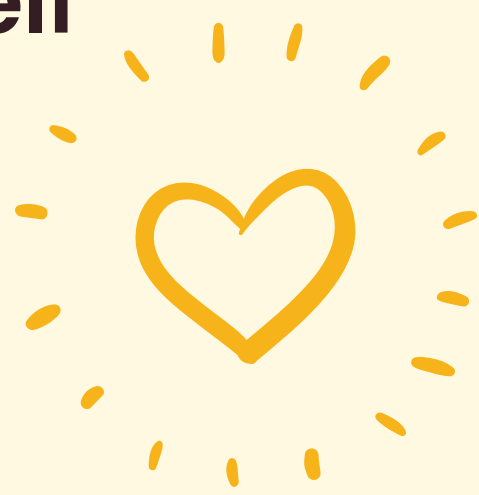
Prepare parents to prepare their children

This is not a typical transition, and parent's worries are valid. Utilize your existing relationships to listen to their concerns, describe what to expect about the new routines and procedures, and ask them what best soothes their children so all the adults providing care are on the same page.



Be gentle with yourself

Remember: you are working through a pandemic and are likely to experience personal and professional stress as well as secondary trauma responses.



You mean more than you know

Being sensitive and calm even in the face of big behaviors has the potential to help children regulate and integrate their experiences so they can grow up to be healthy adults and become more resilient when they're older.



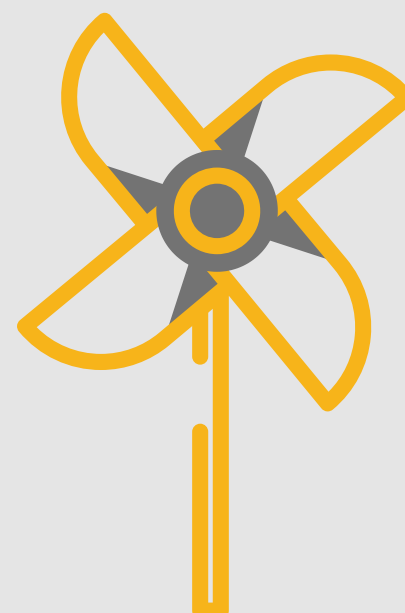
Children are not made to social distance

Social distance guidelines are in direct opposition to children's attachment, social/emotional and developmental needs. The great tension between safety guidelines and children's needs is likely to cause children and adults much stress and anxiety.



Relationships are the agent of change

Receiving a supportive, reflective space to discuss your thoughts and feelings about your work allows you to bring your best self into relationship with the children you care for. When you feel heard and held, they may experience you as someone that will listen to their fears, acknowledge their feelings, and be the secure base that they need to nurture healthy development.



Utilize your resources

You are not alone! We are here for you - we can provide relationally-focused IECMH training, consultation, and support.



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Expect big behaviors



Young children, even those who are verbal, are not able to use language to fully explain how they are feeling. It's even difficult for adults sometimes! Children may "act out" their worry by clinging, becoming withdrawn or more fussy, or by being more aggressive. Another common reaction to ongoing stress is for children to begin using more "baby-like" behaviors. For example, if a child is fully potty trained, they may start to have toileting accidents. They may ask that you feed or dress them even though they can do these things independently. Watching this developmental regression can be so frustrating, but by meeting their need for nurturing with love and patience, you'll find they soon return to their "big kid" behavior. Remember that you and the children you care for are experiencing a big change in day to day life, and more support is needed to really manage it together (1).

Prepare parents to prepare their children

This particular transition of returning to childcare is unique given the recent and ongoing stressors and unknowns. Even very young children sense when there is stress in the environment. Open communication between the important adults in children's lives sets them up for success in both childcare and home environments. Invite parents to share their worries with you, but more importantly, provide ideas about how parents can best support their children during this transition. Suggest reading books or playing about childcare, getting back to regular bedtime and waking routines, and talking their children through the new social distance drop off routines and procedures. Invite parents to think about an item, picture, or letter that they could send to be kept in the child's cubby to revisit when parents are missed, or learn more about what best soothes the child when they are most dysregulated. That familiarity and attention to specific needs will increase the children's sense of safety (1).



Be gentle with yourself



Our feelings and behaviors related to the pandemic are natural responses to the global trauma and loss going on around us. Secondary trauma may arise when you are caring for those that have experienced hardship, suffering, and crisis – which we know young children are particularly impacted by. The following are potential warning signs of secondary trauma exposure response in adults: feeling hopeless or helpless, angry, fearful, guilty, unable to empathize, chronically exhausted, a sense that you can never do enough, an inflated sense of importance related to your work, a sense of persecution, avoidance, increased addictions, hyper vigilance and dissociation. If you notice these feelings, please be gentle with yourself and activate your self-care plan (2).

Children are not made to social distance

The social distancing guidelines are recommended for the health and safety of all of us. Unfortunately, due to young children's social emotional and attachment needs around physical touch, facial expression, close proximity, and hands-on care, the guidelines are in direct opposition to what is recommended for healthy development. Best practice is to weigh the risks and benefits in both directions and to continue to receive support in navigating the tension between what children need and what is recommended to keep us all safe.



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You mean more than you know



As a consistent, emotionally available, primary adult caregiver, you have a significant impact on the lifelong wellbeing of infants and young children. Due to the amazing developmental leaps and bounds that children make from 0-6 years, the early experiences they have are foundational to who they will become. When children are impacted by stress and trauma, their development is at risk. However, when they have the buffering relational protection of caring adults who are there for them when they need them the most, they are less impacted by the toxicity of stress. It can be so hard to be the bigger, stronger, wiser, and kinder adult in relationship with a child who is struggling with big feelings and big behaviors. But this is what they need from us, now more than ever.

Imagine that each time you comfort instead of punish or dismiss, you are planting a seed that has potential to blossom into social emotional health and resilience farther down the road. We may never get to really see what that seed grows into, but right now we know just being together with children in their pain is enough.

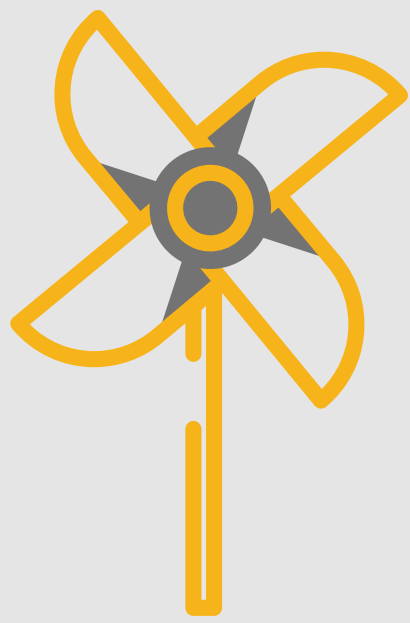
Relationships are the agent of change

Robert Weigand (2007) shares about his experience with Reflective Supervision in child care:

"The most important change was my increasing ability to be psychologically present "in the moment" with a child. I became better able to focus more exclusively and clearly on what he was doing, feeling, intending, and thinking. Being present in this way, whether it is with a toddler as he explores a novel toy or with a child during episodes of purposeful noncompliance, is an essential teaching and caregiving function.

The occasions when I can support such engagement and exploration without intruding are when I am best able to support a child's development. This is not simply a matter of accurately observing what a child is doing and correctly guessing what he might be thinking. It involves momentarily letting go of one's need to manage, control, or even teach. The capacity to appropriately let go of my needs and worries to simply be with the moment became more reliable.

Being present and available to a child in this way entails being simultaneously more present to myself—that is, being similarly aware of my own feelings, thoughts, intentions, and needs. In emotionally charged interactions with young children, caregivers must regulate and soothe both the child and themselves. It is inappropriate to expect a toddler to share responsibility for regulating the interaction. There is, then, no one else. For this to go well, the caregiver must be fully aware of both child and self and be sufficiently present to care for both (3)".



Utilize your resources

You are not alone! There is a whole community holding you in mind, and hoping to share how much we care about the unique experience you are having right now. There are so many resources being provided, it can be really overwhelming. Sometimes it's helpful to talk things through with someone else instead of sifting through all the new tools in your inbox.

The Child Care Council, Inc. <http://www.childcarecouncil.com/> is always available to offer access to Council staff to discuss any concerns or issues you may have around returning to the workplace following COVID-19. They have also created these helpful resources with you in mind—scroll over to the Tip Sheets for some self-care and mindfulness activities as well as COVID-19 related return tools for parents and children (<https://childcarecouncilinc.padlet.org/minsalaco/hlnd4fmjukjO636m>)

The Mary Ellen Institute (<https://www.spcc-roch.org/spcc-trainings/>) at SPCC provides Infant/Early Childhood Mental Health training, and Reflective Supervision/Consultation groups in the community and specifically to childcare staff and directors.

(1) Parlakian, R. (2020, April 28). What comes next: Back to child care following shelter-in-place. Zerotothree.org. <https://www.zerotothree.org/resources/3413-what-comes-next-back-to-child-care-following-shelter-in-place>
(2) Lipsky, L.V.D & Burk, C. (2009) Trauma stewardship: an everyday guide to caring for self while caring for others. San Francisco, CA: Berrett-Koehler Publishers.
(3) Weigand, R. F. (2007). Reflective supervision in child care: The discoveries of an accidental tourist. Zero to Three, 17, 17-22.

