

## Use of the Devereux Early Childhood Assessment (DECA) Program during the COVID-19 Pandemic

The Devereux Center for Resilient Children is committed to supporting early care and education providers in the successful implementation of resilience resources that promote the healthy social and emotional development of children. The following tool is specifically designed to help programs reflect on the nuances associated with implementing the Devereux Early Childhood Assessment (DECA) Program during a national health crisis that is interrupting early care and education services in a variety of ways. We understand that circumstances across this country are fluid and our responses may need to be updated to respond to changes. This series of information and responses to frequently asked questions is not exhaustive and will be continually monitored and modified as needed.

### **Communication Modalities during the COVID-19 Pandemic:**

Communication and learning with staff, families and children requires creativity and compassion in the best of times. In the worst of times, these communications also require exceptional amounts of ingenuity and patience. Options like text, email, telephone, paper-based communication via mail or drop-off, live video conferencing (FaceTime, Zoom, etc.), video conferencing with visual supports (screen sharing, PowerPoint) and pre-recorded videos are being used more than ever before. Each will require thoughtful consideration as it relates to frequency of contact, lengths of content and methods of engagement. Strive to follow the family's lead when choosing communication platforms to support connections and learning from a distance. Here are some general tips for video-based communication and learning through a social and emotional lens (these tips are not designed to teach you the ins and outs of video-based conferencing, but rather how to manage the social and emotional needs of the people involved):

### **General tips for video-based communication and learning through a social and emotional lens**

- Provide technology instructions prior to and at the start of any video conferencing contact. Review how to login, turn on/off cameras, un/mute microphones, manage screen sharing, take turns talking, use of chat functions, etc. This can be done quickly for seasoned users, but can bring great comfort to new users.
- Make confidentiality guidance clear based on your program's standards and ensure that all parties have approved any recording of the session.
- Ensure that access to video conferencing is equitable and inclusive. If live instruction is being provided to multiple children online, it is critical to explore issues related to equity and inclusion to ensure that all children have access to this learning which may require providing necessary technology, recording the live sessions for later viewing, pre-recording a lesson, providing individual meetings to reinforce the lesson, accessing translators or offering supplemental information that utilizes other communication modalities.

- Establish clear start and end times for video conferencing. These experiences can be enjoyable and draining. Knowing the time parameters can help everyone manage their expectations.
- Have a clear objective for video conferencing and make sure it is clearly communicated. When getting to know families, we often prefer a more organic and open-ended approach, but it is wise to also have a plan B with a structured plan and questions that can even be shared ahead of time.
- Practice ahead of time if you are not comfortable with the technology or with the awkward reality of talking to your own face on the screen. While it may feel strange to practice setting up a meeting, talking through the technology instructions and establishing the meeting objectives, you will feel better as you practice!
- Be present. Limit background distractions and try to connect with the camera. This may be a challenge as you are working in your home with people all around. Do your best. Being able to maintain visual engagement while on a webcam meeting will help sustain the connection.
- Use visual aids when appropriate. It can be hard to maintain focus on video conferencing, so having visuals that you physically hold up on webcam (e.g., books or puppets) or that you show via screen share functionality can keep all parties engaged. Even a simple PowerPoint slide containing focus questions can help.
- Acknowledge the feelings (both the family's and your own) related to remote webcam-based contact. Feeling awkward and self-conscious is expected, and it often just feels better when it is acknowledged.
- Allow for longer pauses and silences because video conferencing does not have the same cadence of conversation, and there are moments where it is hard to tell who will be talking next. It may also be helpful to acknowledge that longer pauses/silent moments are a part of this experience and totally okay!
- Consider doing a warm-up or icebreaker question that is similar to the small talk adults often make before a meeting officially begins.
- Decide how notes will be taken ahead of time, as there is a lot to juggle during a video conference. If you are sharing your webcam, showing visuals and trying to maintain camera eye contact, you may forget to write down important information. It may be helpful to tell the person on the other end that you will be taking notes, so when your head is down they know that you are not on your phone or otherwise distracted.
- Use non-verbal communication, chat box function and other technology platform bells and whistles (e.g., hand clapping emoji's, question buttons, etc.) to your advantage especially when multiple people are participating in video conferencing.
- Send a recap or summary of what you covered in the video conference via other communication modalities to ensure that you are accommodating a wide variety of learning styles and memorializing important points.
- Close video conferencing meetings with opportunities for reflection on how the meeting went and what people may need moving forward.

- When the video conference is over, take at least five minutes to stretch, breathe and reflect on how the session went before moving on to other activities (especially if it's screen based).
- Be kind and gentle with yourself. Moving through the awkward moments of video conferencing can be draining and can trigger self-doubt. The more you prepare and practice, the better this will feel.

## The DECA Program's 5 Steps during the COVID-19 Pandemic

As our team diligently worked on the first phase of this project, we decided that it was best we provided guidance aligned with the five steps of the DECA Program. And as we continued along our path, more and more questions were being sent our way from DECA Program users, just like you. So, in addition to the information we've put together, we have also included responses to most if not all of those frequently asked questions. We strongly encourage you to read through this guidance, save it and share it as you see fit.

### STEP 1 – COLLECT INFORMATION

*Typically, during this step, you collect important information about individual children and current teaching/caregiving practices. You use this information to complete the DECA and identify opportunities to improve teaching practices. In this step, you will get to know each child and family, conduct observations and complete the Reflective Checklist(s).*

#### Observing Children

- The DECA Program recommends four weeks of observation prior to completing a DECA on a child. ***How can observations take place if COVID-19 restrictions prevent staff from sustained interactions with children for 2-3 hours a day, 2-3 days a week?*** In order for a teacher to complete a DECA on a child, the teacher must know the child well enough to answer all of the questions on the tool. Even during this unprecedented time, Devereux's guidance is that a teacher must know the child for a minimum of four weeks, and must spend a minimum of 2-3 hours a day for 2-3 days a week. When possible, consider extending DECA rating deadlines to support teachers in getting to know children. If this is not possible, teachers should not complete a DECA. Please note that Devereux is strongly recommending programs to focus on supporting parents/family members as DECA raters, since children are spending so much time at home.
- ***If COVID-19 restrictions prevent staff from in-person observations, can and should staff complete observations from a distance via video/remote technology to meet the requirements of the four-week observation phase recommended by the DECA Program?*** Devereux recognizes that many programs are using video/remote technology to support children and families. These remote observations can be valuable to support families and children, but are not sufficient for teachers to complete DECA ratings on children. Devereux is strongly recommending that programs emphasize the importance of collecting DECA ratings from families during COVID-19.
- The DECA Program recommends that staff spend time getting to know families and children prior to completing a DECA assessment. ***How will staff get to know families when traditional methods are limited due to COVID-19 restrictions (e.g., home visiting, family interviews, parent/guardian nights and socials)?*** Devereux recognizes that many programs are using video/remote technology to get to know children and families. These remote opportunities to connect can be valuable tools at a time when in-person visits are not possible. Strive to follow the family's lead when choosing communication platforms to

support connections and learning from a distance. Text, email, telephone, paper-based communication via mail or drop-off, live video conferencing (FaceTime, Zoom, etc.), video conferencing with visual supports (screen sharing, PowerPoint), and pre-recorded videos are the most common options. Each will require thoughtful consideration as it relates to frequency of contact, lengths of content and methods of engagement.

### Observing the Environment

- ***If a program typically uses the Devereux Reflective Checklists, how can they be utilized when in-person care and instruction is already overwhelming due to COVID-19 restrictions, changes and demands?*** Devereux recognizes that teachers are overwhelmed. There are so many demands on staff to meet the basic safety needs of children that it may feel impossible to do much more. Please keep in mind that the Devereux Reflective Checklists can be valuable tools to help prioritize those aspects of care that are so critical to children at all times, especially now. Recognizing how busy teachers are, Devereux would encourage teachers to review the Reflective Checklists, and reflect on how the items on the checklist truly represent the foundational elements of quality care that help children to thrive socially, emotionally and in all areas of development. Also, consider prioritizing specific Reflective Checklist categories that will help teachers and administrators stay focused on maintaining caring connections, supporting interactions and partnerships with families. Here are links to the [Infant/Toddler Checklist](#) and to the [Preschool Checklist](#).

### STEP 2 – ASSESS EACH CHILD

*During this step, staff will complete the Devereux Early Childhood Assessment (DECA). The DECA is also scored during this step.*

- ***Should DECA be done on all children during a time of uncertainty due to COVID-19 restrictions and changes?*** COVID-19 has put tremendous stress on children and families, making it especially important to understand the impact on children's social and emotional health. Devereux recognizes that COVID-19 may make it more difficult for teachers to do DECA ratings if teachers have limited access to children. If this is the case, Devereux recommends that programs look to families as the primary raters and request that families do the ratings on all children enrolled. If children are in programs and teachers meet the minimum requirements for raters, Devereux would also recommend teachers conduct ratings. Devereux recognizes that programs will need to make difficult decisions about how to prioritize staff time. Taking all of this into consideration, Devereux understands the critical need to support all children's social and emotional health and is therefore continuing to recommend that DECAs be done on all children. One of the most important things to remember during these challenging times are that children and families need to be supported in the promotion of healthy attachments, relationships, initiative, and self-regulation using all the resources at our disposal.
- ***Should both families and teachers strive to complete the DECA assessment during a time of uncertainty due to COVID-19 restrictions and changes?*** While it seems that things are changing daily due to COVID-19, the one constant has been the fact that children are home with their families perhaps more than ever before. Based on this situation, Devereux is recommending that programs focus attention on supporting families as the primary DECA raters. Parents/guardians will always be the child's most important teacher and programs can use this time to strengthen families' understanding and skills around promoting their child's protective factors. Teachers who meet the minimum requirements, 2-3 hours a day for 2-3 days a week, may also be able to complete a DECA.

- **Can we modify the scale of our DECA efforts due to COVID-19 restrictions and changes (e.g., only do DECA on targeted children or only get DECA ratings from families, etc.)?** Modifications and flexibility are critical at this time. Devereux recognizes this and honors difficult decisions that programs may need to make around how the DECA Program is implemented. While policies and procedures are constantly changing due to COVID-19, the one constant is that children are home with their families more than ever before. Based on this situation, Devereux is recommending that programs focus attention on supporting families as the primary DECA raters. Devereux recognizes that COVID-19 has impacted some families in more ways than others, but remains committed to a recommendation that all children receive a parent/guardian DECA rating. Teachers who meet the minimum requirements, 2-3 hours a day for 2-3 days a week, may also be able to complete a DECA. Devereux also recognizes that programs may reduce the number of DECA ratings being completed due to changing ratios, limited capacity and/or only choosing to focus on children who are presenting with social and emotional needs, although cautions that all children (especially now) have social and emotional needs.
- **Can we modify the timeline for DECA completion by teachers and/or families due to COVID-19 restrictions and changes?** Yes. While a minimum timeline of four weeks is required for teachers to conduct DECA ratings, some programs may decide to modify when DECA ratings are completed and when families are invited to complete DECA ratings. Flexibility is key and Devereux is recommending that programs stay focused on making sure that the DECA ratings be used in meaningful ways to support children and families, and less focused on meeting specific deadlines that may be unrealistic during a crisis such as COVID.
- **If families/guardians are completing the DECA on their children, how do you plan to get assessments completed and returned in a timely fashion when traditional methods may not be available due to COVID-19 restrictions?** Families can be invited to complete DECA ratings, even if they are not physically coming into the program. Staff members who develop a relationship with the family could call or use remote technology to support a parent/guardian in completing the assessment. For those programs using paper DECA's, staff members can facilitate a DECA rating over the phone by providing clear instructions, and then reading the items to the parent/guardian while checking off the responses they provide. For programs using the e-DECA, staff members can complete parent/guardian ratings by reading the items to them over the phone while entering responses directly into their computer's e-DECA platform for a parent rating. In either case, staff should be prepared to thoughtfully explain the DECA Program and assessment process to families over the phone, prior to executing a phone rating with a parent/guardian. Staff must also be reminded that it is important to not influence the parent/guardian rating. The items should be read in an even, calm tone and explanations of the items or examples should not be offered. In addition, for e-DECA users, an enhancement is currently in development that will send a link to families via text or email for them to complete the rating independently. This enhancement is scheduled to become available in August 2020.
- **What are the best methods to communicate DECA assessment timelines and deadlines?** Programs are already figuring out a wide variety of platforms to stay connected to staff, families and children. To reduce staff anxiety about the ever-changing expectations and deadlines, it is critical to provide consistent communication utilizing the platforms you have established. Flexibility is critical at this time, so timelines and deadlines should be reviewed and discussed to ensure that staff and families understand them and have opportunities to share any concerns.
- **How will programs provide education/information regarding the DECA Program as well as the assessment process and timelines to during this time of social distancing?**

Under “normal” circumstances, Devereux asks programs to be thoughtful and even creative in the ways they introduce the DECA Program, assessment, resilience and social and emotional health to families. During these challenging times, resilience-focused work is even more critical. Family education around the DECA Program and assessment should be strength-based and inviting, regardless of the communication platform. Strive to follow the family’s lead when choosing communication platforms to support connections and learning from a distance. Text, email, telephone, paper-based communication via mail or drop-off, live video conferencing (FaceTime, Zoom, etc.), video conferencing with visual supports (screen sharing, PowerPoint), and pre-recorded videos are the most common options. Each will require thoughtful consideration as it relates to frequency of contact, lengths of content and methods of engagement. Flexibility is critical at this time so roles and responsibilities related to the DECA should be reviewed and discussed to ensure that staff and families understand them and have opportunities to share any concerns. Programs should remember that Devereux offers several resources to help introduce the DECA Program to families. These resources include:

- [The For Now and Forever Parent Guides \(Infants/Toddlers, Preschoolers\)](#).
  - [Sample letters](#) that can be mailed or read to a parent/guardian during a telephone call or remote meeting.
  - [A short, four-minute video](#) that introduces the basic definition of resilience and a few simple strategies that helps families understand how protective factors are promoted through ordinary moments of the day. While the video does not talk about the DECA itself, it provides a great introduction for staff to set the stage for the DECA introduction, and the fact that it is a tool they can use to make sure their children learn the skills related to resilience.
- ***If families/guardians are completing the DECA on their children, how do you plan to get assessments completed and returned in a timely fashion when traditional methods may not be available due to COVID-19 restrictions?*** Families can be invited to complete DECA ratings, even if the parent/guardian is not physically coming into the center. Staff members who develop a relationship with the parent/guardian could call or use remote technology to support a parent/guardian in completing the assessment. For those programs using paper DECAs, the staff member could provide clear instructions, and then proceed to read the items over the phone to the parent/guardian while checking off the selected responses. For programs using the e-DECA, staff members could log into the e-DECA, set up the system to reflect that of a parent/guardian rating, ask the questions and select the responses directly on the computer. In either case, staff must be reminded that it is important to not influence the parent/guardian rating. The items should be read in an even, calm tone, and explanations of the items or examples should not be offered. In addition, for e-DECA users, an enhancement is currently in development that will send a link to families via text or email for them to complete the rating independently. This enhancement is scheduled to become available in August 2020.
  - ***What is the guidance on how to answer DECA questions related to child-child interactions in the past four weeks, considering many children have not had many interactions with peers due to COVID-19 restrictions?*** The guidance on how to answer the DECA questions does not change, and means that families and teachers should reflect on the past four weeks and answer the questions based on their observations. It is true that several DECA items ask about interactions with children, and due to social distancing, children may have fewer opportunities to engage in these behaviors. The child’s score on the DECA may be lower than it would have been in more typical times when they had more opportunities to interact with their peers every day. When a child’s score on the DECA is in

an area of need, it brings into our awareness that the child is experiencing a risk factor – in this case a lack of opportunity to play with peers. This information should spur us to action to address this risk. Maybe we arrange more virtual play opportunities or encourage play time with siblings when possible. Even during COVID-19, we need to find ways to support a child’s good relationship skills. In addition, we need to reflect on how we will prioritize “catch up” strategies when things return to the “new normal.”

- ***What do you say if a parent/guardian asks you, “How am I supposed to answer these questions because my child has not been interacting with peers?”*** Devereux suggests that staff acknowledge the parent’s question and that the world has changed drastically. Remind the parent/guardian that the instructions remain the same, which are to reflect back on the past four weeks, and respond based on observations and experiences. It is okay to share that the disruptions caused by COVID-19 may be reflected by answers to certain questions on the DECA. Explain that this is actually important information to gather and that when discussion about the results takes place, an emphasis on understanding the child’s results and the impact of social distancing will be discussed.
- ***What is the guidance on how to help DECA raters who may struggle to interpret the response choices of Never, Rarely, Occasionally, Frequently, and Very Frequently during this time of social distancing?*** The response to this question does not change and remains as follows: During the national standardization process, raters were not given guidance about the meaning of these terms. As such, we do not suggest that guidance or interpretation of these terms be provided to raters. Rather, we suggest that you say, “You should trust your own interpretation of these terms. What is important is that you use that interpretation consistently whenever rating a child.” A tip that staff can offer is to suggest putting the choices *in front of* the question, which can often help raters make the best selection. For example, “Joshua RARELY asks to try new things vs. Joshua FREQUENTLY asks to try new things.”
- ***What are additional COVID-19 considerations when families are the primary DECA raters (and not teachers) due to stay-at-home measures?*** If you are looking for a silver lining in all of the stressors that COVID-19 is creating, one might be that it challenges programs more than ever before to find creative ways to collaborate with families. Devereux is highly recommending that programs use this time to look at families as the primary DECA raters for a child, and to use that process to support families in understanding how critical their child’s protective factors are for a lifetime of success and happiness. In order for this to be successful, programs need to ensure that families have proper background information before asking them to complete a DECA. Programs should remember that Devereux offers several resources to help introduce the DECA Program to families. These resources include:

  - The *For Now and Forever Parent Guides*.
  - Sample letters that can be mailed or read to a parent/guardian during a telephone call or remote meeting.
  - A short, four-minute video that introduces the basic definition of resilience and a few simple strategies that helps families understand how protective factors are promoted through ordinary moments of the day. While the video does not talk about the DECA itself, it provides a great introduction for staff to set the stage for the DECA introduction, and the fact that it is a tool they can use to make sure their children learn the skills related to resilience.

### STEP 3 – SUMMARIZE RESULTS

*During this step, you score the DECA or review e-DECA reports, review or complete the Classroom/Group profile, prepare for group planning and prepare for individual child planning.*

- ***How will families receive DECA results in meaningful ways that encourages discussion and collaboration, when traditional methods are limited due to COVID-19 restrictions (e.g., home visits, face-to-face team meetings, etc.)?*** Devereux has always emphasized the fact that rating children with the DECA only has value to the extent that the results are used to support the development of children’s protective factors. It is therefore essential that DECA results be shared in meaningful ways that encourage discussion and collaboration. Before staff reach out to families to share DECA results by phone, remote technology or even a conversation in a parking lot at pick up time, it is critical that they can respond positively to the following questions: (1) I am comfortable talking about resilience and protective factors and understand the terms; (2) I understand importance of sharing a child’s strengths and will emphasize what the child is doing well before discussing one or two goals/areas of need; (3) I am committed to having a conversation that is supportive and recognize that I will need to be open-minded, flexible and sensitive to the unique questions and comments families may make. For programs using the e-DECA, the Strategy Report can be a valuable tool to share the results as well as a few simple strategies that families can start to use right away. For paper DECA users, this sample form is another tool that Devereux offers to support these important conversations.
- ***How will staff and families discuss and explore the impact of COVID-19 on DECA results and children’s overall social and emotional well-being?*** The beauty of the DECA is that it helps families and teachers understand a child’s social and emotional strengths and needs. COVID-19 is impacting children and families differently, and the ratings from the DECA can provide valuable information about how COVID-19 is impacting children. Devereux recommends that staff remember these key points when discussing the impact of COVID-19 on DECA results with families:

  - It is understandable that children’s DECA results would be effected by COVID-19, since for many children it has resulted in disrupted routines, anxious and worried caregivers, lack of opportunities for play and socialization, increased screen time. And tragically for some children, this experience has compounded pre-existing risk factors and toxic stress (e.g., food insecurity, violence in the home, addiction, inadequate health and social services, etc.).
  - Emphasize to families how the DECA results can remind us of the most important things we can do to support children right now, which include making sure children feel safe, keeping children on a routine, and seeking support when necessary for resources that keep children and families safe.
  - Discuss how behaviors from children are always an effort to communicate a feeling or a need. Focus on how increasing a child’s attachments, relationships, initiative and self-regulation will decrease behavior concerns.
  - Remind families that children are often reacting to the behavior that they see in the adults around them. It is essential that families find ways to take care of their own mental health since their children’s mental health is connected to theirs.



- **What are the benefits of creating a DECA group or classroom profile when DECA results: (a) Are from family ratings only? OR (b) Are from teacher ratings that are inconsistent at best?** For programs using the e-DECA, creating a classroom profile takes very little time and could provide valuable information. A profile that shows the results of family ratings could potentially show trends in what families are seeing. For programs that are offering a variety of family outreach and support, this information might be used to make decisions about topics to prioritize for communications that get provided to families. With respect to teacher ratings, if a teacher is able to complete DECAs on all (or almost all) children, this information may also show trends that can help teachers focus on strategies that could benefit the greatest number of children in the group.
- **How can a DECA group or classroom profile be used for in-person care and instruction when the DECA results are heavily influenced by experiences related to COVID-19 restrictions?** The classroom profile is a tool – it helps us understand the current needs of the group as a whole. This information is as valuable during COVID-19 as it was before and will be when the pandemic is over. Teachers need tools that are practical and that guide us to solutions to support children’s social and emotional skill development. The fact that children’s behaviors are heavily influenced by COVID-19 is not surprising. Teachers should not assume that the social and emotional strategies that worked last year are the same ones that will work today. We should use data, like the classroom profile, to help guide us in our planning efforts and ensuring that our efforts are properly matched to the needs of the group.

#### STEP 4 – PLAN AND IMPLEMENT STRATEGIES

*During this step, you will use the information you have collected along with your DECA results to create plans for the group and the individual child.*

##### Group/Universal Planning

In the DECA Program, universal planning involves making social and emotional quality enhancements that benefit ALL children. This is done by using the DECA Reflective Checklist, the Classroom/Group Profile, the Group Action Planning Form and the DECA Program Strategies Guide. Programs that have other quality improvement measures in place may choose NOT to use the DECA Program’s approach to Group/Universal Planning, while others may use portions of it. Answer the questions below if your program intends to use the DECA Reflective Checklist and Group/Universal Strategies.

##### Individual and Targeted Planning

In the DECA Program, individual and targeted planning both use a similar “Strengths, Goals, Strategies” approach. Individual planning refers to the process of developing individualized plans to strengthen protective factors in ALL children (even if the child’s DECA does not indicate an area of need). Individualizing to promote social and emotional growth is ideal and beneficial for all children, but not always realistic given time and resource limitations. Targeted planning refers to the process of developing targeted plans to strengthen protective factors, and reduce behavior concerns for children with identified needs or concerns. A “Strengths, Goals, Strategies” planning approach can be used for both individual and targeted plans with an increase in the frequency, intensity and duration of the strategy/intervention used for targeted plans.

- **How can staff partner with families to incorporate opportunities to build protective factors (and eliminate barriers to social and emotional connections) for children who**

***are receiving distance/remote care and instruction due to COVID-19 restrictions?***

Programs across the country are developing creative ways to partner with families on all of the important topics that require collaboration. The solutions are tailored to the needs and specific restrictions that are being set at the local level based on how COVID-19 is impacting that community. Devereux recommends that staff embed conversations and activities that build children's protective factors into all of these connections and communications as appropriate. Of course, conversations and activities specifically designed to put a laser focus on resilience are wonderful, but equally valuable is learning how to infuse this information into all of the ways that staff communicate with families. Devereux encourages staff to wear their "social and emotional lenses," which means finding an opportunity in every single interaction to promote healthy relationships, self-regulation and initiative.

- ***How will staff collaborate with families to incorporate opportunities to build protective factors (and eliminate barrier social and emotional connections) for children who are receiving distance/remote care and instruction due to COVID-19 restrictions?*** COVID-19 has taught us that many things that we thought had to be done in person can actually be done quite effectively using remote technology and creativity. If staff can use remote technology to share information about individualized planning, Devereux encourages staff to be well prepared and organized, so that the conversation flows smoothly. Staff must remember to focus on the strengths of the child before introducing goals and strategies. (See suggested basic guidelines for video conferencing.)
- ***How can staff who are providing in-person care and instruction to children incorporate opportunities to build protective factors for children throughout the daily routine, despite COVID-19 restrictions that may create barriers to social and emotional connections between children and adults, as well as children and their peers (e.g., social distancing, reduced group-size, no-contact drop-off, face masks preventing the reading of social cues, constant changes in routines and protocols)?*** One of the most important things to remember about building children's protective factors is that many of the opportunities take place in typical/ordinary situations. Devereux suggests that programs pay particular attention to the supportive interactions that take place between children and adults within the program. Positive relationships are the "active ingredient" in healthy development. Supportive interactions between children and adults occur every day when teachers eagerly greet children as they arrive. COVID-19 restrictions may require the use of a mask and we encourage adults to learn to smile with their eyes and voices. Help children learn how to read the eyes and voices of others by talking about tones of voice and focusing on eyes. This can be done by playing guessing games like, "what are my eyes telling you?" or "what is my voice telling you?" If teachers are seeing families less because of no-contact drop off or other restrictions, strive to follow the family's lead when choosing communication platforms to support connections and learning from a distance. Text, email, telephone, paper-based communication via mail or drop-off, live video conferencing (FaceTime, Zoom, etc.), video conferencing with visual supports (screen sharing, PowerPoint) and pre-recorded videos are the most common options. Each will require thoughtful consideration as it relates to frequency of contact, lengths of content and methods of engagement. Check in with families after some time to see if things are working, or if a new strategy needs to be utilized. Programs should do everything they can to prioritize relationships, remain consistent, and demonstrate care and empathy. As programs prioritize safety, let us help children understand that every "new" and "different" rule has been created to help keep them safe.

## Resources

<https://centerforresilientchildren.org/wp-content/uploads/App-B-Reflective-Checklists-pp-317-323.pdf>

<https://centerforresilientchildren.org/wp-content/uploads/CAREgiving-Checklist.pdf>

[https://challengingbehavior.cbcs.usf.edu/docs/Calm-Down\\_Poster\\_EN.pdf](https://challengingbehavior.cbcs.usf.edu/docs/Calm-Down_Poster_EN.pdf)

<https://biasbehavioral.com/wearing-a-mask-tip-sheet/>

- ***How will staff incorporate opportunities to build protective factors (and eliminate barrier social and emotional connections) for children who are receiving distance/remote care and instruction due to COVID-19 restrictions?*** For programs who are utilizing distance/remote learning, we acknowledge how challenging this can be. It is possible, however, to create opportunities to build children’s protective factors. Beginning with an adult who will use energy and excitement to engage young learners, programs can carry out activities such as circle time, story reading, music and movement experiences and even creative activities. Consider books that have protective factor themes. Teachers can do music and movement experiences that also have themes related to protective factors and resilience. Teachers can also do activities with children. Try to select activities that require simple materials that families may have at home. Consider putting together “Learn at Home Packets” that contain the materials needed to do activities, then carry out the experiences together during remote instruction. Supporting little learners from a distance will not be easy, but with a little creativity and eager willingness, it can be done! But remember, adjusting to distance learning can be exhausting for teachers, children and families. Be kind to yourself and do your best. Encourage families to do their best and let them know you are their partner in this effort.
- ***What are some additional COVID-19 considerations for supporting children who have experienced trauma and/or who are exhibiting behaviors that are challenging to adults?*** Each day, far too many children across the country experience trauma and toxic stress. For many, the day-to-day experiences with COVID-19 have created an additional atmosphere of challenge and despair. Managing disruptive behavior can be challenging at any time. Many of the changes to our daily lives that came with COVID-19, such as shifts in routine, changes in academic instruction and separation from friends and loved ones, have been particularly impactful for children. For many, these changes have contributed to increased stress, which may present in children as defiance, tantrums, difficulty with transitions, irritability, withdrawal and clinging to caregivers (to name a few). As you work to support children, remember that feelings are at the root of all behavior. Before responding to any behavior, ask yourself, “What is this child trying to tell me? How are they feeling?” Do your best to remain positive and respond to feelings first. Ensure that children maintain good nutrition, hydration, physical activity and rest. Be a good role model and take good care of your well-being as it will impact your interactions with children and families. Please visit these links for helpful resources:
  - <https://dcrc.adobeconnect.com/ee57xrgfaxzy/event/registration.html>
  - [https://challengingbehavior.cbcs.usf.edu/docs/Calm-Down\\_Poster\\_EN.pdf](https://challengingbehavior.cbcs.usf.edu/docs/Calm-Down_Poster_EN.pdf)
  - [https://challengingbehavior.cbcs.usf.edu/docs/Calm-Down-Area\\_Tipsheet.pdf](https://challengingbehavior.cbcs.usf.edu/docs/Calm-Down-Area_Tipsheet.pdf)
  - [www.moreFLIPIT.org](http://www.moreFLIPIT.org)

## STEP 5 – REVIEW PROGRESS AND ADJUST

*During this step, you will monitor the effectiveness of group and individual child plans and adjust plans as needed.*

- ***How can we all making meaning of DECA pre/post results when the circumstances between administrations are dramatically different due to COVID-19 restrictions (e.g., the pre-DECA was completed when children were having no social interactions and the post-DECA was completed while children were back in programs under social distancing guidelines)?*** It is unclear at this time what the impact of COVID-19 will be for programs using the DECA. With so much uncertainty, it is so difficult to make long-term plans. Devereux is recommending that programs stay focused on the present and make sure that staff have what they need to use DECA results to support teachers and families during this most challenging time. As programs see how the year plays out, each will need to make their own determinations about mid- and post-DECAs. Some programs may determine that the pre-post data is meaningful and can help them support individual children as well as demonstrate progress and evaluate outcomes. Any pre-post data should be analyzed within the context of the times, and highlight how COVID-19 impacted their practices. Some programs may decide that doing a pre-post analysis isn't a priority this year due to the extenuating circumstances. Programs will need to make this decision on a case-by-case basis, taking their unique circumstances into consideration.
- ***What if DECA pre/post results show declining protective factor scores (and/or increased in behavior concerns), and how does the experience of COVID-19 restrictions factor into our understanding of these results?*** Any pre-post data should be analyzed within the context of the times, and highlight how COVID-19 impacted their practices. For some children, the impact of COVID-19 may compromise their protective factors and result in declining scores. Devereux has always prioritized the use of DECA data as a tool to support children. Declining scores should spur us into action. Programs need to share this data with policymakers and other stakeholders so that the negative impacts of COVID-19 on children are highlighted and understood. At the same time, the data should be used to continue to educate families about the critical role that they play in building their children's protective factors. Programs must keep a laser focus on supporting families during this time and remind families of the most basic practices they can control that will support their children's protective factors, including maintaining routines, being present for their children, honoring their children's feelings and taking care of themselves.