



# Clearinghouse on Supervised Visitation E-Press



June 2020



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### Upcoming Phone Conferences:

June 17, 2020 @ 12pm/11CT

July 15, 2020 @ 12pm/11CT

August 19, 2020 @ 12pm/11CT



## New Supervised Visitation Database Question!

Please note that a new **mandatory** question has been added to Florida's Supervised Visitation Database. This question:

### Do you have a child support case with the Florida Child Support Program?

is being included to help determine how many supervised visitation clients also have Florida Child Support Program agreements. Please choose either YES / NO / Don't Know to answer the question. It is not mandatory that clients answer YES, only that they do answer the question.

The new question will appear on the Client Information page for a Visitor and Custodian as seen in the picture below.

#### Client Update for Case '2004-1-JonesMarion'

[<< Back to Clients Listing](#)   [<< Back to Cases Listing](#)

Client Type:  \*  
Last Name:  \* First Name:  \* MI:   
Date of Birth (YYYY-MM-DD):  \*  
SSN Last 4:   
Gender:

#### Race/ethnicity of this Client

(Check all that apply)

- ☐ American Indian or Alaska Native  
☐ Black/African American  
☒ White  
☐ Hispanic  
☐ Other Races - If you are A and V funded, you can not choose this category.  
☐ Asian  
☐ Pacific Islander  
☐ Two or More Races

#### Relationship to Child(ren)

If relationship is different for different children, please indicate separately for each child.

Last	MI	Date of Birth	Relationship to Child
Jones	Jason	M	2000-03-02
			Mother (Biological or adoptive) ▼

Do you have a child support case with the Florida Child Support Program? ☐ Yes ☐ No ☐ Don't know

Client lives ☐ Out of state ☒ In state (indicate county and city)

County of Residence:

City of Residence:

Annual income - all sources (to be recorded separately for each custodian & visitor)

If you have any questions regarding the new variable, please contact  
Kelly O'Rourke, Database Manager at [kes2523@my.fsu.edu](mailto:kes2523@my.fsu.edu)

We received a few questions regarding the expectations for completing the new data and wanted to share the below updates to assist with implementing this new requirement.

- SAV programs do not need to re-submit quarterly reports to DCF for the Oct – Dec 2019 service period.
- Guidance received from the federal program about the new requirement was that the existing child support data element for the SAV grant has changed from “optional” to “mandatory.” A simple yes or no to the child support question is all they are asking for at this time.
- SAV programs will need to be sure that any cases with services from Oct 1, 2019 through September 30, 2020 have the new question answered in the database for Visitors and Custodians.
- For all existing cases, during the reporting year it is acceptable for programs to make changes in the database about the child support question even though the case was accepted earlier. This may include updating older or even closed cases in the database.
- The goal is to have a complete report by September 30, 2020 to indicate whether or not there is child support involvement in every case entered that year.
- FSU is working on revising the database report and expects to have it reconfigured for the next reporting cycle (January – March 2020). Once the new report is configured, the report will show red errors where this question is missing which should help the SAV programs identify cases that need to be updated, if any.
- SAV programs may want to consider adding the child support question to their intake form to obtain the information.
- FSU staff are available to the SAV programs for any questions and/or technical assistance with the new data reporting. In addition, the FSU Clearinghouse reviewed this topic on their last statewide monthly conference call for SAV programs and plan to include this topic again on their call next month. FSU contacts are Kelly O'Rourke at [kes2523@my.fsu.edu](mailto:kes2523@my.fsu.edu) and Karen Oehme at [koehme@fsu.edu](mailto:koehme@fsu.edu) or telephone # (850) 222-3845.

Thank you for your assistance with this new requirement.

## Questions From Directors

***We worked hard to have virtual visits, and now we have to think about transitioning back to in-person visits. Do you have any advice for us?***

**Yes. We want you to think through and minimize the health risks to your staff and your clients. The first list of considerations is below, and we will talk about transitioning in the June 17 webinar! Please mark your calendar!**

### Considerations for Resuming In-Person Supervised Visits

Each Supervised Visitation Program must make its own policies. While virtual visits are a useful alternative for family visitation during a pandemic or emergency, in-person visits are still key to meaningful interaction and family bonding. As in-person visits resume, consider the following in order to ensure the safety and well-being of clients. The Clearinghouse has begun this list, and will be adding to it throughout the month of June.

Please consider:

- Providing PPE (Personal Protective Equipment) for all staff and as needed for clients. Should you have gloves as well as masks?
- How will you fund PPE?
- Remember that staff must replace their masks to ensure that the masks are clean. How will staff be reminded to wash their hands?
- Will clients be required to wear masks? Adult and children both? Be sure to have a policy that is clearly and frequently stated. Remind parents the day before the visit, and put a sign on the front door. This is in addition to having the requirement in your policies, in your court order, and in your orientation checklist.
- Email parents all of your new rules.
- Will you have entrance requirements such as temperatures and a questionnaire or check list asking about possible symptoms and illness. Suggest a virtual visit if requirements not met. (Use a touch-free thermometer)
- Consider keeping virtual visits or highly sanitized or restricted visits for those in high risk professions such as health care

- Be aware of caregivers or foster parents with health risks as well - the child might return to them with infectious viral particles
- Consider allowing only one family in at a time, eliminate the waiting room, have parents who arrive early wait in their car
- Have custodian remain in car and allow staff to come to car to get children to minimize the number of people entering the building
- Do not allow extra visitors for the time being.
- Entrance area sanitation such as cleaning the seats, door handles, knobs, etc. frequently
- Have more cleaning supplies/gloves on hand and establish a cleaning schedule
- Sign in area sanitation such as clean and sanitized pens – one pen for clean, one for used pens that need to be re-sanitized
- Make hand sanitizer available in all areas
- Require hand washing immediately upon entry
- Consider Plexiglass partitions in appropriate areas to safely distance people – but only if someone is in charge of cleaning it periodically
- Who will clean bathrooms after each visit? Be sure that surfaces throughout the program are wiped down with sanitizer.
- Sanitation of toys
  - Clean after every visit
  - Do not use stuffed animals – they can't be cleaned
  - Consider reducing the number of toys available so you can keep up with cleaning them
  - Do not put away any used toys to know which were used and need to be sanitized
  - Compiling different toy boxes to be rotated in while the other is being cleaned (to minimize wait time between visits)
  - Only allow toys with few pieces
  - Have clients bring their own toys for now
  - Use a sanitizing mist to spray over all the toys for a quick clean
- Start in-person visits with clients most in need of touch/human interaction such as babies and small children, or cases ending soon, or parents about to move or be deployed, etc.
- If any client will not be required to use masks, consider allowing monitoring via camera from another room to keep staff safe
- Start slowly so your staff get used to the sanitizing routine. Don't have too many visits in one day – allow time to clean after each visit.

***I have a new program, and I want to make it a hybrid In-Person and Virtual Visitation Program. Can you please share with me the times when I could offer virtual visits?***

**Yes. Please keep in mind that child development experts agree that in-person, parent-child contact is the best method of developing a nurturing, positive relationship. But the world is very complex, and sometimes those contacts simply can't be provided. Below is a chart of situations that may warrant virtual visits.**

<b>Meeting Family Needs: When Virtual Visits Might Be A Good Option</b>
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While in-person visits are preferred for family bonding and meaningful interaction, we've discovered that virtual visits can be a helpful alternative in many situations. In addition, virtual visits can be used as a starting point in certain cases and in combination with in-person visits to suit each case's needs. Examples include:

- Visits with parents who are not able to be present
  - Deployed parents
  - Jailed parents/ parents on house arrests
  - Out of town or state parents
- When transportation is an issue
- Bad weather or when travel to the center is not advised
- Can lessen no-shows and cancellations
- Can be less stressful in cases with physical or sexual abuse
- Visits during off hours, times when the program is closed
- Visits when safety or personal hygiene are an issue
- When a parent or child is sick or a COVID19 danger
- When children are reluctant to visit in person or are afraid of parent
- Can bring a larger number of children together from different places for a visit at once
- Can allow for distant relatives such as grandparents, aunts, uncles and cousins to connect extended families to the child (Be sure this is allowed by the court)
- Can fit in more visits in the allotted time than in-person
- Morning visits possible which may suit younger children (more awake than in the afternoon or evening.)
- Eliminates need for cleaning, disinfection, other operational issues

- Allows for families to share personal items and demonstrations not possible at the center, such as playing an instrument, etc.
- Families may feel more comfortable when the monitor is invisible (muted audio and video) than with in-the-room monitoring
- Travel time to and from centers is eliminated



May 28, 2020

Dear Colleague:

Across the country, the Coronavirus disease 2019 (COVID-19) pandemic has impacted almost every aspect of our daily lives. This is a challenging time for many families and communities. For parents and caregivers with limited resources and supports, the pandemic has exacerbated the uncertainty, stress, and isolation for the most vulnerable children and families living in poverty. The intent of this letter is to encourage family support, maternal and child health, and early childhood programs (including Head Start, home visiting, early intervention, and other early care and learning programs) to promote family strengthening and prevention strategies via virtual, electronic, telephonic, or other safe means during the COVID-19 pandemic. With many Americans living under some type of stay-at-home order and many states closing schools for the remainder of the academic year to help reduce the spread of COVID-19, the network of community and social supports for vulnerable families has drastically changed in a matter of weeks. As schools and businesses have closed, virtual and other remote services are rapidly being deployed to maintain connections and provide a lifeline for these families. The urgency and complexity of the situation requires that we come together to provide the necessary supports to help families build resilience during this challenging time. We recognize and appreciate the tremendous efforts of health and social service providers and frontline staff within states and communities across the country to keep children and families healthy and safe, particularly given the challenges and constraints faced during the pandemic.

With the rise in unemployment and access to resources and routines disrupted, many children and pregnant and parenting caregivers lack access to health, education, behavioral health, and social services, and seek support to provide essential food, housing, and basic supplies for daily living. More parents and caregivers are facing significant isolation, stress, anxiety, depression, and trauma, which may also increase risk of child maltreatment, family violence, and other adverse childhood experiences. The result has been decreased access to health and behavioral health services including screenings for maternal depression and developmental delays, well-child care, and support for children with special health care needs.

As federal agencies with a collective mission to improve the health, economic, and social well-being of children and families across the country, we have joined together as partners to urge our grantees and their state/territory/tribes and local partners to collaborate in new and creative ways to engage and support the whole family. Several states and local jurisdictions have seen decreases in reports of suspected child abuse and neglect as most schools and other child and family-serving programs have closed to prevent the spread of COVID-19. Experts do not believe that child maltreatment has actually decreased during this time and are concerned that the observed decrease is because mandated reporters, such as teachers and child care providers, are no longer seeing children on a daily basis.

It is critical that we come together as cross-sector partners to help families cope, decrease parental stress, support responsive relationships, and build protective factors to strengthen families and communities. Ideally, under normal circumstances, a prevention and whole-family approach proactively connects all children, youth, and their parents/caregivers to health, early learning, and family support services before they are in crisis. We recognize that many families are already in crisis so it is essential that systems coordination, service adaptation, and other innovative strategies are implemented to respond to current needs and to mitigate any additional negative impacts to children and families. In response to the COVID-19 pandemic, several early childhood programs including Head Start, home visiting and other child and family support programs have had to close their offices and classrooms or limit services. As a result, we have seen programs respond by rapidly adapting and implementing innovative practices and solutions to continue serving families through remote service delivery (e.g., via phone, text, email, videoconferencing) and other strategies. We encourage our grantees and their partners to leverage, align, and maximize federal funding and policy flexibilities offered in response to COVID-19 to connect families to what they need, strengthen early childhood systems, and plan for sustainability (see Appendix A for COVID-19 Policy and Funding Resources). Participating in state and local COVID-19 planning response efforts can help meet the needs of vulnerable children and families and the early childhood and family support workforce who are serving these families. Below are examples of actions that family support, maternal and child health, and early childhood programs can take to support families during this challenging time. See Appendix A for additional resources for families and programs.

#### *Partnering with families*

- Connect families to state and local resources or information, such as 211, crisis hotlines, or family resource centers for identified needs.
- Increase the frequency of visits or other check-ins to maintain connections with families – especially those identified at elevated risk – and communicate the availability of support to families.
- Support families' capacity to connect with health and family support professionals through virtual, electronic, and telephonic means, including assisting families with access to technology and internet connectivity.
- Reach out to parents via text to send messages of support and let them know that they are not alone, that there is support for them, and to reinforce the positive things they do for their families. The Office of Head Start has developed sample social media messages that can be used.
- Provide tools to help parents establish or maintain daily routines that support children's developmental and social-emotional needs, while balancing caregivers' work or other required tasks. Early care and learning (including Head Start), and infant mental health consultants can be useful partners.
- Talk to parents about strategies to support their own family and build protective factors especially during these uncertain times. The Children's Bureau has developed several tip sheets for parents that can be used to address a number of topics.
- Establish voluntary peer parenting support groups or partner with a state or local family resource center to connect isolated families with each other virtually.

- Integrate additional questions or protocols into virtual visits as part of home visiting and other early childhood programs to assess family health and social needs as well as safety and risk concerns. Staff should be adequately trained to effectively assess concerns and refer as needed.

*Partnering with state and local organizations and service providers*

- Develop and circulate a list of local emergency resources among staff and partners, covering areas of need including food and essential daily needs (e.g., diapers, electricity/gas providers), child protection hotlines/warmlines, intimate partner violence support, suicide hotlines, early intervention programs, emergency shelter, unemployment assistance, etc.
- Forge partnerships with pediatricians/healthcare providers to consider ways to continue providing well-child visits and preventive check-ups remotely, and develop guidance related to maintaining and promoting healthy child development in the home.
- Refer families to food and nutrition services, including the Special Supplemental Nutrition Program for Women, Infants, and Children and food banks, and assist with essential supply needs.
- Ensure that pregnant and postpartum women have access to prenatal and postnatal care and well-child care for infants.
- Conduct virtual screenings or refer to providers to conduct screenings for developmental delays, maternal depression, and other behavioral health concerns.
- Partner with local health departments to promote dissemination of key public health messages to prevent exposure to COVID-19.
- Partner with local schools to identify children and families who may benefit from virtual family support visits, especially for children not showing up to online classes and their families.
- Work with the state or local child welfare agency to develop local partnerships for families who were reported for abuse or neglect, but were screened out and need support.
- Disseminate resource lists and educational materials through outreach or services conducted through community and faith-based organizations or cross-sector partners (e.g., sharing parenting tip sheets or activity kits at meal pick-up points).
- Partner with infant mental health associations or mental health consultants to identify behavioral health services and supports able to serve families remotely, and to provide consultation or other resources for program staff to manage secondary stress.
- Partner with the local child protective services agency or infant-toddler court program to develop a response protocol for virtual work when child or family safety issues are identified. This includes assigning a “service facilitator,” such as a mental health provider/consultant or parent, family, and community engagement manager, to serve as a point of contact and support for staff and for families with more complex needs.

Some of these practices may live beyond the COVID-19 crisis, practices that we are finding help to build relationships with families that reach beyond classrooms and regular face-to-face visits. We can use this challenging moment to become the system that will help families individually and treats families holistically and with respect, that will keep children safe, be agile and creative to support parents and help strengthen their protective capacities, and that is fair and just. We need a system that sees ourselves in one another, a system that is rooted in kindness. We have

never needed community more. If we can be there for vulnerable families now in these challenging times, we can be there for them in the future. Through partnerships, we can continue to work through this crisis to strengthen families and communities. Please let us know how we can help and support you as you work toward our mutual goals. We appreciate all of the work that you do to support children and families, and thank you for navigating the daily challenges that have resulted from this public health emergency.

Sincerely,

/s/

Dr. Deborah Bergeron  
Director  
Office of Early Childhood Development and Office of Head Start  
Administration for Children and Families

/s/

Ms. Shannon Christian  
Director  
Office of Child Care  
Administration for Children and Families

/s/

Dr. Jerry Milner  
Associate Commissioner  
Children's Bureau  
Administration for Children and Families

/s/

Dr. Michael Warren  
Associate Administrator  
Maternal and Child Health Bureau  
Health Resources and Services Administration

## **Appendix A:**

### **Selected Resources for Primary Prevention to Strengthen Families and Support the Whole Family**

#### **Resources for Families**

*National Child Abuse Prevention Month Resources*

<https://www.childwelfare.gov/topics/preventing/preventionmonth/resources/resource-guide>

*Resources for Child Care*

<https://childcare.gov>

*Supporting Families in Uncertain Times*

<https://eclkc.ohs.acf.hhs.gov/family-support-well-being/article/supporting-families-uncertain-times-social-media-messages>

*Understanding Trauma in an Early Childhood Context*

<https://eclkc.ohs.acf.hhs.gov/video/understanding-trauma-early-childhood-context>

*Understanding How Family Stress and Trauma Impacts Home Visitors*

<https://eclkc.ohs.acf.hhs.gov/video/understanding-how-family-stress-trauma-impacts-home-visitors>

*National Child Traumatic Stress Network*

<https://www.nctsn.org/>

*National Network to End Domestic Violence*

<https://nnedv.org/>

*CDC COVID-19 Stress and Coping Resources*

<https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/managing-stress-anxiety.html>

*This is the Moment for Community*

<https://cbexpress.acf.hhs.gov/index.cfm?event=website.viewArticles&issueid=215&sectionid=1&articleid=5545>

*Center of Excellence for Infant and Early Childhood Mental Health Consultation*

<https://www.samhsa.gov/iecmhc>

#### **Selected Grant Programs**

*Child Care and Development Fund State Administrators*

<https://www.acf.hhs.gov/occ/resource/ccdf-grantee-state-and-territory-contacts>

*Community-Based Child Abuse Prevention (Title II of the Child Abuse Prevention and Treatment Act)*

<https://friendsnrc.org/cbcap/state-assignments/>

*Early Childhood Comprehensive Systems*

<https://mchb.hrsa.gov/earlychildhoodcomprehensivesystems>

*Head Start Grantee Locator:* <https://eclkc.ohs.acf.hhs.gov/center-locator>

*Head Start State Collaboration Offices*

<https://eclkc.ohs.acf.hhs.gov/programs/head-start-collaboration-offices-state>

*Maternal Infant and Early Childhood Home Visiting*

<https://mchb.hrsa.gov/maternal-child-health-initiatives/home-visiting-overview>

*Preschool Development Grants Birth through Five*

<https://www.acf.hhs.gov/occ/resource/pdg-b-5-initiative>

*Tribal Maternal, Infant, and Early Childhood Home Visiting program*

<https://www.acf.hhs.gov/occ/home-visiting/tribal-home-visiting/grantees>

### **COVID-19 Policy and Funding Resources**

*Administration for Children and Families COVID-19 Response and Resources*

<https://www.acf.hhs.gov/coronavirus>

*Centers for Disease Control and Prevention COVID-19*

<https://www.cdc.gov/coronavirus/2019-ncov/index.html>

*COVID-19 Maternal and Child Health Bureau Frequently Asked Questions*

<https://mchb.hrsa.gov/coronavirus-frequently-asked-questions>

*HHS Guidance and Information for Human Services Programs*

<https://aspe.hhs.gov/coronavirus>

*Centers for Medicare & Medicaid Services - COVID-19 Program Guidance and Information*

<https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page>

# Routines for Parents & Children during the Pandemic

By: Katie Desorcy



## Introduction

There is no doubt that COVID-19 has thrown everybody off with their routines. Whether your child was in pre-school or finishing their last few months of high school, all kids have been impacted in some way or another with the major change in their daily routine. Those age groups have very different routines and understanding the routine your child needs for normalcy is important. As parents, challenges arise with helping your child with e-learning and working from home. In addition to sharing space with each other, everybody is battling isolation from peers, a frustration with being cooped up, and a sense that there is no end in sight. While some people thrive on routine and others do not, experts have stated that children thrive on routine. It is important to keep as much consistency as possible. While many things have changed, creating a routine will help keep some sense of normalcy in you and your child's life.

## Objectives

- Understand the importance of routine
- Understand different routines for different age groups

## Importance of Routines

There are many benefits of having a routine in place in your household. While you try to help your child with online learning and try to manage business meetings and phone calls, juggling life at home during quarantine can be stressful. Children are not able to socialize with their friends, learn in the traditional way they are used to of going to school, and participate in extracurricular activities. With such easy access to technology, it is important to set a routine so that your child does not end up spending countless hours in front of a screen. While it is important to set a routine, it is also important to not be overwhelmed by sticking to an exact schedule. If your child loves a game you are playing as a family, continue playing that game instead of moving on to the next scheduled activity.

## Benefits of a routine:



- For anyone experiencing anxiety about what is happening, a new routine can help provide them with a sense of normalcy.
- Help kids feel empowered. Research suggests that when children are involved in negotiating their routines, this helps support their empowerment.
- Routines help people stay focused.
- Decreases overwhelming feelings on how to handle being home with your kids all day.

## Creating a Routine for Different Age Groups

Creating a routine will look different for every family. Every family is unique and has their own set of needs and things that will work for their routine and things that won't. Children in different age groups also have different sets of needs. A five-year-old may need way more structure than a seventeen-year-old. One key thing to remember is transition times. It will be difficult for a child to transition from playing outside to doing their homework, so allowing some time for the child to transition between activities is helpful.



### Tips on Creating a Routine:

- Get creative and think beyond Netflix and Disney Plus.
- Schedule video calls with your children and their friends, this will help with your child's feelings of isolation.
- Make time for you as the parent. It is ok to schedule free time for your kids so that you can take time for yourself.
- Have consistent bedtimes and get up at the same time, Monday through Friday.
- Structure the day for learning, free time, healthy meals and snacks, and physical activity.
- Allow flexibility in the schedule—it's okay to adapt based on your day.

Here is an example for elementary - middle school aged kids:

Before 9:00am	Wake up	Eat breakfast, make your bed, get dressed, put PJ's in laundry
9:00-10:00	Morning walk	Family walk with the dog Yoga if it's raining
10:00-11:00	Academic time	NO ELECTRONICS Sudoku books, flash cards, study guide, Journal
11:00-12:00	Creative time	Legos, magnatiles, drawing, crafting, play music, cook or bake, etc
12:00	Lunch	
12:30PM	Chore time	A- wipe all kitchen table and chairs. B - wipe all door handles, light switches, and desk tops. C - Wipe both bathrooms - sinks and toilets
1:00-2:30	Quiet time	Reading, puzzles, nap
2:30-4:00	Academic time	ELECTRONICS OK Ipad games, Prodigy, Educational show
4:00-5:00	Afternoon fresh air	Bikes, Walk the dog, play outside
5:00-6:00	Dinner	
6:00-8:00	Free TV time	Kid showers x3
8:00	Bedtime	All kids
9:00PM	Bedtime	All kids who follow the daily schedule & don't fight

Here is an example for high-school aged kids:

By 8:30am	Wake up	<ul style="list-style-type: none"> <li>• Practice affirmations and set an intention for the day</li> <li>• Eat breakfast</li> <li>• Shower and get ready for the day</li> </ul>
9:15-10:00	Morning Fresh Air	<ul style="list-style-type: none"> <li>• Walk/run outside, play a sport or ride a bike (yoga or workout video if it's raining)</li> </ul>
10:00-10:30	Chores	<ul style="list-style-type: none"> <li>• See mom for today's list</li> </ul>
10:30-12:00pm	Academic Learning	<ul style="list-style-type: none"> <li>• School assigned recordings or homework, if applicable</li> <li>• Workbooks or study guides</li> <li>• Research something of interest about history, science, or art</li> </ul>
12:00-12:30	Lunch	<ul style="list-style-type: none"> <li>• Remember to clean up after yourself</li> </ul>
12:30-1:30	Talents and Goals	<ul style="list-style-type: none"> <li>• Focus on one goal you have been working on. For example: Piano, poetry, hand lettering, sketching, playing chess</li> </ul>
1:30-3:00	Academic Learning	<ul style="list-style-type: none"> <li>• School assignment recordings or homework, if applicable</li> <li>• Research adult roles and learn them. For example, how to budget, understand how interest works in finance, menu planning, how to do laundry, change a car tire, etc.</li> </ul>
3:00-3:30	Take a Break	<ul style="list-style-type: none"> <li>• Screen time allowed for texting friends, gaming, etc.</li> </ul>
3:30-4:30	Afternoon Fresh Air	<ul style="list-style-type: none"> <li>• Walk/run outside, play a sport or ride a bike (yoga or a workout video if it's raining)</li> </ul>
4:30-5:00	Reading	<ul style="list-style-type: none"> <li>• Read a book</li> </ul>
5:00-6:00	Dinner	<ul style="list-style-type: none"> <li>• Help with prep and clean up</li> </ul>
6:00-7:00	Family Time	<ul style="list-style-type: none"> <li>• Spend time with family playing board games, discussions, learning, service projects</li> </ul>
7:00-9:00	Free Time	<ul style="list-style-type: none"> <li>• Work on hobbies</li> <li>• Movies/screen time</li> </ul>
9:00-10:00pm	Bedtime	<ul style="list-style-type: none"> <li>• Get ready for bed</li> <li>• Journaling, meditation, or prayer.</li> </ul>

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# Getting Reacquainted with Your Child After the Pandemic

By Livia Ledbetter



## Introduction

Many parents may have seen contact with their children change in pretty significant ways due to closures and policy changes in response to the COVID-19 crisis. Long separations can cause distressing and intense emotions for both parents and children. Parents can utilize the following tips to find creative ways to re-establish connections with their child after a parental absence.

Some of the suggestions below may apply only to custodians. Others can be used during parenting time supported by monitored exchanges. Still others can be used during supervised visits.

## Objectives

In this e-press, caregivers and social service providers will:

- Explore creative ways for children and parents to re-establish close connections after parental absence
- Learn tips to facilitate a smooth transition

## Five Ways to Reacquaint After the Pandemic

### #1: Create a journal together

Journaling has been shown to provide many health benefits. Parents can create a journal that they use to write back and forth with their child. This is a good way to ease back into the reunion process, getting to know your child again and having them get to know you.

You and your child can share about your day, ask and answer questions, draw pictures, make a craft, write a song, or do a number of other fun, creative activities. There are many samples of these types of journals and activities online. Remember not to treat this like a school or educational activity and instead as a way to bond and connect more with your child.



A good example along with various journal prompts can be found here:

<https://www.momendeavors.com/diy-parent-child-communication-journal-prompts/>

## **#2: Spend time outdoors**

Spending time outside provides a number of health benefits for both you and your child. Outdoor playtime allows children to soak up sunlight and produce sufficient levels of vitamin D, improves their focus, socialization, and academic performance, and allows them to spend time in and appreciate nature.

## **#3: Find local resources**

Libraries often have children's sections as well as programs, events, and activities just for children. Explore your local library with your child: have them choose books they are interested in and read them together. You can also explore children's books with themes similar to your life situation, such as books about parental separation. If they are old enough, you can help your child sign up for a library card. Letting them have a library card can teach responsibility.



Local museums sometimes have programming for children as well, and can be a fun way to encourage any interests they may have in art, science, or natural history.

## **#4: Cook or bake together**

Get to know your child again by cooking their favorite meals together. Cooking can be a great bonding activity. Children can read recipes or measure out ingredients, promoting reading and math skills. You and your child can learn more about each other through the process of cooking and sharing favorite meals together.

## **#5: Reconnect with family history**

If you have any old photo albums, scrapbooks, or other items that document family history, this may be a good time to explore them with your child. Old photos and stories about family members can foster a sense of connection to family, allowing them to feel more comfortable toward you as well.

## **Tips for Parents**

### **Ease into it**

Keep your expectations low, at least for the first few visits. Depending on your child's age, development, and other unique factors, as well as the circumstances of your separation, your child may not react positively at first. Communication may be strained, or they may even express some resentment. Know what things you have no control over, such as your child's memories and how they feel about the absence, and what you do have control over, such as how you talk to your child and how you regulate your emotions.

### **Don't talk badly about the other parent**

Keep children out of family conflicts. Actions that put the child in the middle of parental conflict, such as talking badly about the other parent or assigning blame, can leave children feeling confused or angry. Children may develop a feeling that they need to 'choose' a parent, which can lead guilt, shame, and other psychological distress.

### **Don't overwhelm your child**

Children enjoy routine, and anything that disrupts that routine, whether positive or negative, can easily be overwhelming for a child. Emotions may be especially high at the beginning of a reunion after a long separation. Work to set up a simple schedule or routine that works best for everyone involved, working with your child to include activities or games they enjoy.



### **Avoid indulgence to 'make up for lost time'**

Small gifts or thoughtful presents are OK when visiting with a child you have been separated from for a while but avoid using money and gifts to try to win a child's affection or loyalty, or to make up for lost time.

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# Grief & Loss in Children During the Pandemic

By Karma Kovacs



## Introduction

COVID-19 has taken a huge toll on everyone's lives. It has taken numerous people's lives, jobs, and daily routines. Everyone has been affected in one way or another and has experienced some kind of grief, whether it be a loss of a friend or family member or a loss of structure and security in their lives. This includes children as well. Although they may not be as aware of what is going on or the depth of the situation, they are also experiencing similar trauma and grief as adults are.

## Objectives

- The different types of grief children may be facing
- Why they are experiencing a sense of loss and grief
- How parents and other adults in their lives can help

## Different Types of Grief During COVID-19

Because COVID-19 has affected so many parts of our lives, many people will be experiencing different forms of grief.

### Anticipatory Grief

During this pandemic, this is a kind of grief many people are currently experiencing. Anticipatory grief is a feeling of sadness or anxiety we get when we think about the future. Those who are experiencing anticipatory grief may be afraid of losing a loved one to the virus, getting the virus themselves, or any broader changes in their environment caused by the virus. Uncertainty scares people and unfortunately, there is still a lot of things scientists still do not know about the virus and what the future holds for us.

### Collective Grief

Collective grief is grief that is experienced together as a community. Because what we are experiencing is a pandemic, everyone has been affected and therefore is grieving together.

## **Prolonged Grief**

Due to the uncertain nature of the virus, officials do not have any idea of how long it will take the virus to run its course and have our lives resumed back to normal. This long pause on normal life may cause people to grieve for longer periods.

## **Why Children May Be Experiencing a Sense of Loss and Grief**

There are several reasons why children may be feeling a sense of loss and grief during these unprecedented times.

1. They may be sad because they are not able to go to school anymore and see their friends. This disrupts their whole structure and it may be hard for them to adjust. Also, for younger children, this means that they completely lose touch with their friends.
2. Children are seeing that they're parents are stressed due to the loss of a job, loss of finances, or other stressors caused by the virus. Children are easily affected by their environment and if they see their parents in constant stress and grief, it will have a similar effect on children.
3. Children may be feeling hopeless about quarantine.
4. Children may be worried about themselves catching the virus or family members catching the virus.



## **How Parents and Other Adults in Their Lives Can Help**

If you notice changes in a child such as changes in appetite, low energy, social withdrawal, or continuous feelings of sadness and helplessness, then they may be showing signs of grief or depression. To combat this, there are multiple things you can do to help.

- Have an open and honest conversation about the virus and ask them what their concerns are. In this conversation, make sure to be comforting and to assure them that they will be okay.
- Keep routines in place. This will help children feel like there is still structure in their lives and will give them a sense of normalcy.



- Try new fun activities with them. This will take everyone's minds off things for a while.
- Make sure that you are taking care of yourself and your mental health. As mentioned previously, kids are easily affected by their environment and can tell if something is off. Be easier on yourself and your kids.
- Limit the amount of news kids watch. Although it's important to keep them aware of what is going on, you don't want to cause unnecessary anxiety.
- Lastly, keep in touch with others. Although we may not be able to hang out with others in person, it's nice to catch up via video chat or a phone call. Allow kids to talk to their friends from school or family members.

## **Conclusion**

The era of COVID-19 is new to all of us and we are all adjusting. Children are not oblivious to their surroundings so it is important to check up on your little ones. Try to stay positive and resilient through these tough times.

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# After the Pandemic: What Could be Next?

By Livia Ledbetter



## Introduction

Many of us are seeing major changes in what seems like every aspect of our lives in the wake of the COVID-19 pandemic. Researchers, policy groups, and data from affected areas are giving some idea of the social impact this crisis will have in the weeks, months, and years to come. Families and children are particularly vulnerable, with experts anticipating economic hardship and familial stress leading to an increase in child maltreatment, domestic violence, substance misuse, and other social issues.

## Objectives

- Learn what research is saying about current social trends and what analysts are predicting for the future
- Recommendations for proactive and attainable decisions to prepare for negative or unknown outcomes
- Explore resources and additional readings

## Unemployment and loss of health insurance

The last two weeks of March 2020 saw almost 10 million new claims for unemployment benefits. It is estimated by the end of June, the number of unemployed in the U.S. could rise as high as 47.05 million.

With unemployment comes loss of health insurance. Current estimates place 1.5 million newly unemployed having lost health insurance, and the current projection of 47.05 million unemployed by the end of June is estimated to yield 7.3 million losing health insurance. These numbers do not cover family members, who will also be impacted by job loss.

Source: Woolhandler & Himmelstein, 2020.



## Rise in abuse

A report from the United Nations has found that violence against women and girls, particularly domestic violence, has increased, with reports of calls to helplines for domestic violence cases increasing from 25-33% in countries like the U.S., France, and Argentina. Cramped and confined living conditions during lockdown, as well as escalating worries around security, health, money, and social isolation, are likely to exacerbate household tension.

A 2019 study found that families in Texas already experiencing domestic violence experienced higher rates of domestic violence and child abuse both during and after Hurricane Harvey.



Professionals are predicting an increased demand for social services as a response to higher rates of divorce, custody cases, or abuse or maltreatment claims. Data out of China has shown a drastic spike in divorce filings. A divorce lawyer in Shanghai has reported a 25% increase in his caseload, and reports from Chinese media and government websites are indicating “record-high numbers of divorce filings in early March”.

U.S. firearm sales in March 2020 increased by over 85% compared to March 2019 data. The combination of the public health and economic crises exacerbated by COVID-19, as well as the negative mental health effects of physical distancing and social isolation, have the potential to increase fire-arm related suicides, accidental shootings of young children accessing improperly secured firearms, or domestic violence-related shootings and homicides. Women living with a gun in the home are three to five times more likely to be murdered than those with no gun in the home.

Source: Mannix & Fleelger, 2020; Prasso, 2020; Serrata & Alvarado, 2019; UN Women, 2020

## What can you do?

- The National Domestic Violence Hotline has information and resources on staying safe during COVID-19, including an interactive safety plan:  
<https://www.thehotline.org/2020/03/13/staying-safe-during-covid-19/>  
You can always call 1-800-799-7233 to speak to a trained hotline advocate.

- Futures without Violence has a list of resources for survivors, including undocumented survivors and survivors with substance use disorder, among other populations: <https://www.futureswithoutviolence.org/get-updates-information-covid-19/>

## Effect on children

Services for mothers and children are often disrupted during natural disasters or epidemics like the one we are facing now. The UN estimates that 1.5 billion children and youth globally have been effected by nationwide school closures. Physical distancing, lockdown measures, and suspension of face-to-face services including health services, care facilities, and case management will impact “children’s mental well-being, social development, safety, privacy, economic security, and beyond” (Source: UN Policy Brief: Impact of COVID-19 on children). The UN also estimates that due to the COVID-19 crisis, an estimated 42-66 million children will fall into “extreme poverty”.

School closures are likely to exacerbate learning and achievement disparities, poverty and stress are likely to exacerbate child maltreatment and child deaths, and a lack of services are likely to continue to negatively affect the social and physical well-being of children.



With disrupted routines, soaring unemployment, and children isolated from additional support systems, including teachers and doctors, child welfare experts fear a spike in child abuse cases. States throughout the country are reporting drastic reductions in the amount of calls to child abuse hotlines, with some down over 50%.

A fifth of all reports to child abuse hotlines are from education personnel, another fifth from law enforcement, and a further ten percent from social services personnel. With more children isolated from these additional systems of support, less professionals are able to report abuse concerns.

Source: DHHS, 2002; Hanson, 2020

## What can you do?

- Talk to your children about COVID-19. Honest, age-appropriate discussion can help them to understand what’s happening, help them cope with fear, and let

them feel safe. “How to talk to your kids about COVID-19” from Mayo Clinic: <https://www.mayoclinic.org/diseases-conditions/coronavirus/in-depth/kids-covid-19/art-20482508>

- Check out common news sites for parenting tips. There are many parenting resources available online, as well as creative ways of coping and managing working from home with children, written by parents, professionals, and educators.

US News & World Report’s parenting section is updated with timely and professional parenting information and resources:

<https://www.usnews.com/topics/subjects/parenting>

**Always remember to check the credentials of any website or author to determine credibility.**

- Pediatricians are urging parents to keep scheduled appointments and to stay up-to-date with vaccines. Healthcare providers are increasingly offering telehealth options. Ask your pediatrician or family healthcare provider about appointments being offered by phone or computer. Professionals are warning that disrupted immunization schedules can lead to outbreaks of infections, including measles or whooping cough:

<https://www.usatoday.com/story/opinion/2020/04/28/coronavirus-well-child-checkups-mental-physical-health-column/3029859001/>

### **Substance misuse and mental health**

The National Institute on Alcohol Abuse and Alcoholism (NIAAA) has stated that “the broad effects of the pandemic are likely to lead to excessive alcohol consumption”, noting an increase in drinking and symptoms of alcohol use disorder in the wake of previous disasters like 9/11 and Hurricane Katrina. Physical distancing has implications for access to treatment services, with many in-person recovery programs and visits suspended until they are safe to resume. Alcohol consumption affects the immune system, which complicates risks of COVID-19.

The National Institute on Drug Abuse shares similar concerns, noting that the coronavirus is particularly dangerous to those who smoke or vape as the virus attacks the lungs. Other drug use including use of opioids and methamphetamine can leave the respiratory and pulmonary systems vulnerable as well.

Those with alcohol and substance use disorders are at an increased risk for homelessness and



incarceration, circumstances when are likely to increase transmission of COVID-19, and are less likely to have access to healthcare and housing, further establishing their vulnerable status.

Stress during the outbreak can put many at risk for developing a mental health issue or exacerbating issues already present.

Source: National Institute on Alcohol Abuse and Alcoholism, 2020; National Institute on Drug Abuse, 2020

### **What can you do?**

- The NIAAA's Frequently Asked Questions page includes tools to help those in recovery find quality alcohol treatment through telehealth programs with healthcare professionals and addiction specialists, or self-guided online programs: <https://alcoholtreatment.niaaa.nih.gov/FAQs-searching-alcohol-treatment#topic-how-can-i-access-quality-alcohol-treatment-during-the-covid-19-emergency-through-telehealth-or-online-programs>
- Check out the Substance Abuse and Mental Health Services Administration's tips on "Taking Care of your Behavioral Health": <https://www.samhsa.gov/sites/default/files/tips-social-distancing-quarantine-isolation-031620.pdf>
- The National Suicide Prevention Lifeline's "Emotional Wellbeing During the COVID-19 Outbreak" is regularly updated with new resources and information: <https://suicidepreventionlifeline.org/current-events/supporting-your-emotional-well-being-during-the-covid-19-outbreak/>

### **Resources**

- **The Centers for Disease Control and Prevention's Frequently Asked Questions** page covers various public health information with frequent and timely updates. FAQs cover COVID-19 basics, how it spreads, protecting self and others, preparing families and those with special needs, community outbreaks, symptoms and testing, and other topics: <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>
- **The Florida Department of Health** is continuously updating their website with the latest outbreak data. The bottom of their home page accessed at the following link includes resources for mental health, schools and childcare, businesses, community events, high-risk populations, nursing homes, county health departments, and health care providers: <https://floridahealthcovid19.gov>
- **The Substance Abuse and Mental Health Services Administration** has a large collection of resources and information, including disaster planning for

behavioral health programs, virtual recovery resources, and tips for maintaining good mental health: <https://www.samhsa.gov/coronavirus>

- **The Federal Trade Commission's** website has information for consumers, businesses, and law enforcement on detecting and avoiding scams related to COVID-19, including videos and blog posts on avoiding scams and fraud, and news related to emerging scams: <https://www.ftc.gov/coronavirus>
- **The Ounce of Prevention Fund of Florida** has a free, five-week webinar series on protective factors, including videos on parental resilience in trying times. Access the series here: [https://www.ounce.org/webinar\\_series.html](https://www.ounce.org/webinar_series.html)
- **Prevent Child Abuse America's** large collection of resources on responding to COVID-19 include tips not only for parents and families, but educators, advocates, policy makers, businesses, and communities: <https://preventchildabuse.org/coronavirus-resources/>
- **The National Child Traumatic Stress Network** has a collection of webinars, toolkits, trainings, and fact sheets, as well as additional resources regarding COVID-19: <https://www.nctsn.org>



### Additional Reading and Media

- **Netflix – Coronavirus, Explained:**  
<https://www.youtube.com/watch?v=sgZ7RKYDrLg>
- **UN Women – COVID-19 and ending violence against women and girls:**  
<https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2020/issue-brief-covid-19-and-ending-violence-against-women-and-girls-en.pdf?la=en&vs=5006>

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