



Clearinghouse on Supervised Visitation February 2022 E-Press



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Announcements

Upcoming Phone Conferences in 2022:
March 24, 2022 @ 12pm/11CT (Note date change!)
April 20, 2022 @ 12pm/11CT
May 18, 2022 @ 12pm/11CT

Questions from Directors

Q: How do I obtain an Agreement with Law Enforcement? I have everything ready for my new program, but the Court wants that, too.

A: 2022 has brought with it a flood of new and developing supervised visitation programs in Florida.

The general idea for collaborating with law enforcement is so that the local agency understands what services you provide and the nature of the cases you take. Arrests made on outstanding warrants can also be a problem when children witness an arrest on site at your program. The Clearinghouse has a [Law Enforcement Guide to Supervised Visitation Programs](#) on the website.

Keep in mind that every agreement will be different, depending on what the agency will agree to. It may be easier to obtain such an agreement if your program hires off-duty officers to provide security at your program. It is also possible that the agency refuses to enter into an agreement with you. In that case, you should document your efforts to inform the agency of what your program does. Why? Because in the past, program directors have reported that police have not responded to their 911 calls, mistakenly believing that any problem at a program is a “personnel issue” or a mere “disagreement” instead of a crisis that could harm someone.

Remember that law enforcement is NOT required to enter into such an agreement with you.

See Sample Law Enforcement Agreement on pages 3-4

Sample Law Enforcement Agreement

In order to enhance community safety, the _____ Program and _____ Police/Sheriff's Department enter into this Agreement on this ____ day of _____, 2022.

Program agrees to the following:

1. To assist representatives of Department in understanding the mission, goals and services of Program;
2. To keep the Department apprised of hours and days of operation and names of key staff;
3. To draft protocols for periodic communication between the Department and the Program;
4. To provide copies of administrative procedures and policies to Department, and apprise Department of changes in a timely manner;
5. To work with the Department to design a method of reducing the impact that any arrests made on site will have on participants.

Police Department agrees to the following:

1. To designate a representative of Department to serve on Program's community advisory board;
2. To conduct an evaluation of the Program's offices in order to make recommendations on enhancing site safety;
3. To review Program's policies and procedures and make recommendations for enhancing client safety;
4. To conduct local and state background checks on defendants referred in domestic violence cases;
5. To contact the Program whenever Agency has outstanding warrants for arrest on any person using
the program;

6. To refrain whenever possible from arresting any parent in the presence of his or her child or other program participants;

7. To lessen the impact of any emergency arrests made on site by waiting until the visit is over and the parent has left the building;

8. To make any emergency arrests away from the presence of program participants whenever possible.

Program Director Signature

Date

Chief of Police/Sheriff Signature

Date

Questions from Directors

Q: My staff is worn out. The last two years have been exhausting. Do you have any advice for us – how in the world do we build resilience?

A: First, know that you are not alone and that many people are struggling. Sometimes people believe they alone are impacted negatively by a community trauma. Yes, it is possible to build resilience, as we have talked about in prior webinars. But let me remind you that people can focus on specific things they need help with. See the list of characteristics that researchers say can improve the likelihood of resilience and pick one to start with. Sleep and nutrition are a good starting point, because they provide a healthy foundation to build the rest. Optimism and hope for the future are also crucial. Remind your staff to take care of themselves. Assure them that this current crisis will soon be over. Model your own resilience as much as possible. (Are YOU taking care of yourself?)

Cognitive flexibility

- Being aware of automatic negative thoughts
- Reframing negative experiences
- Seeing failure as an opportunity for growth
- Avoiding perfectionism
- Accepting constructive criticism

Active coping skills

- Seeking out resources
- Actively engaging in healthy responses to stress
- Building self-efficacy

Emotional self-regulation

- Having the ability to focus
- Planning ahead
- Controlling impulses
- Calming thoughts in times of adversity.

Optimism

- Being hopeful for the future
- Having a sense of humor

Physical well-being

- Getting good sleep
- Having healthy eating and exercise habits

Supportive social network

- Building prosocial skills that foster caring, supportive relationships
- Engaging in positive communities
- Building secure, trusting relationships to buffer toxic stress

Mindfulness/Spirituality

- Having positive core values/beliefs
- Engaging in altruistic behavior
- Finding meaning and purpose in life
- Having faith/spirituality/moral compass

(Iacoviello & Charney, 2014; Madsen Thompson & Klika, 2015; Wu et al., 2013)

Finally, come on the upcoming phone conferences for new ideas. We at the Clearinghouse will work on more handouts for staff.

Celebrating Black History Month!

Black Leaders Who Are Shaping History Today

[First Lady Michelle Obama](#) worked on projects to prevent the obesity epidemic in children with her Let's Move initiative and encouraged young children to exercise and eat nutritious food. In addition, Michelle promoted healthier school lunches and funded meal programs for poor children, with the Hunger-Free Kids Act and Joining Forces program for access to health services for families. Obama also is a strong advocate for women's health issues and has spoken on these topics for some time.

Learn more about Michelle Obama by visiting https://en.wikipedia.org/wiki/Michelle_Obama

[Alicia Auguello Cook](#), more familiarly known as Alicia Keys, is an American singer, actress, and songwriter. She began playing the piano at age 12 and was signed by a record label at 15. She has earned 15 Grammy awards and has sold over 90 million records worldwide. She co-founded a non-profit called Keep a Kid Alive, which provides medicine, orphan care, and social services for children and families with AIDS and HIV in Africa. Additionally, she works hard to advocate for individuals with HIV/AIDS due to the loss of her close family member being affected by it. Through her performances, she has also fundraised to remember and raise awareness to topics such as poverty in Africa, a tribute to 911 heroes, Hope for Haiti after its major earthquake, and Half the Sky: turning oppression into opportunity for women worldwide. Keys participated in the Women's March in Washington DC, where she advocates for women and children. In 2009 she won the humanitarian award for all her work for children and women globally.

Learn more about Alicia Cook by visiting https://en.wikipedia.org/wiki/Alicia_Keys

[Amariyanna Copeny](#) is a youth activist from Flint, Michigan who is known as 'Little Miss Flint'. She is known for raising awareness and speaking out on the Flint water crisis through fundraising for underprivileged children in her town and across the nation. At the age of 8, she wrote a letter to President Barack Obama to draw immediate attention to the water crisis and he responded with visiting her town to see the firsthand effects the water crisis had on the town. Soon after, Flint was declared in an emergency state and in 2016 there was nationwide awareness of the critical state and President Obama authorized \$100 million to fix the crisis.

Learn more about Amariyanna Copeny visiting https://findatwiki.com/Little_Miss_Flint

[Kheris Rogers](#) is a 15-year-old entrepreneur that began her clothing line 'Flexin' on My complexion' in 2017. Her clothing line was inspired to combat racism and colorism, after being teased as a young girl for the dark color of her skin in school. She founded the company at age 10 and continues to empower young girls through shaping the lens of beauty, saying its more than just your image and its who you are inside. Kheris has spoken at Google, Disney Channel, and other programs to continue sharing her message of anti-bullying, anti-racism and more.

Learn more about <https://www.famousbirthdays.com/people/kheris-rogers.html>

Teaching Children About Failure



Everyone experiences failure. Parents can help children learn about failure and how to gain valuable information from it.

Process of Learning

Humans are not born knowing everything. Instead, knowledge is gained through a learning process. Children learn by observing, listening, exploring, experimenting, and asking questions (Raising Children, 2021). While children learn something new, they may have preconceived notions of what to expect. As a result, sometimes they may be right; other times, they may be wrong.



Failure and Success:

The word “failure” is typically associated with a negative connotation. However, failing is just as important as succeeding. When one succeeds, one achieves the desired outcome.

However, failing does not mean that one is incapable of reaching the desired outcome. It simply means that they were not successful this time around for whatever reason.



Failure is a Part of Learning:

No one wants to fail. However, failure should be seen as an important part of learning and a driver towards success.

To learn from failures and succeed, children need to:

- Examine why they have failed,
- Make a plan on how to succeed,
- And try again!

Children and Parents Perspective on Failure

Children are ambivalent towards failure. Throughout development, children come up with their own perspective about failure based on their parents' views. Once children develop their opinions about failure, they embrace failure or fear it.

Parents' Views on Failure Influences Children's Mindset

A study conducted by Haimovitz and Dweck found that parents' perspective of failure and how to respond to it influences children's mindsets.

- Parents who view failure as debilitating had children who believed that intelligence is a fixed concept and were more concerned with their outcomes than learning and improving.
- Parents who viewed failure as a negative concept were also less likely to react with support for their children's learning and improvement.

(Haimovitz and Dweck, 2016)

Fixed Mindset vs Growth Mindset

Fixed Mindset is when intelligence is viewed as a fixed and solid concept. Children with a fixed mindset view failure as something within themselves and believe that it cannot be altered or overcome; thus, limiting themselves and refusing to try again.

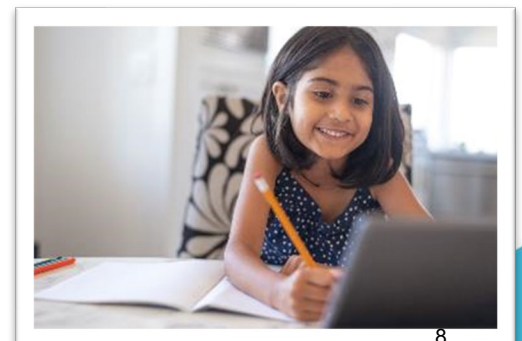
Children who display having a fixed mindset may:

- Avoid challenges
- Avoid failure
- Are afraid of making mistakes
- Give up easily
- Don't see value in putting in effort
- Ignore feedback



Growth Mindset is when intelligence is viewed as a malleable concept that can change and develop. Children who have a growth mindset view mistakes and failures as opportunities to improve and grow.

- Children who display having a growth mindset may:
- Embrace challenges
- View failure as a way to learn
- Persist in the face of setbacks
- View effort as needed to succeed
- Learn from criticism



(Evolving Education, 2021)

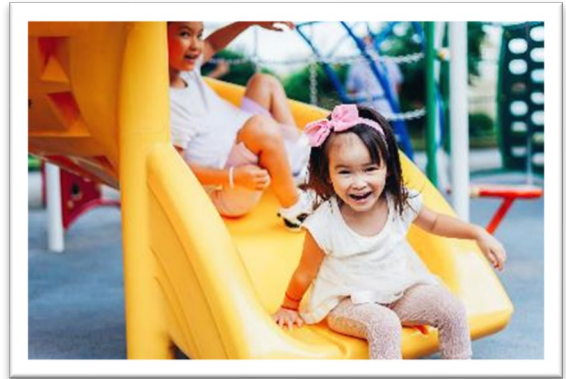
The Importance of Learning to Fail

Life is not always sunshine and rainbows. Failing and succeeding occur throughout an individual's lifespan ranging from childhood to adulthood. Children need to learn and be ready for the challenges that lay ahead. As a result, parents, caregivers, and other adults involved in children's lives must allow children to fail.

Children who learn how to fail learn to:

- Try new things
- Take risks
- View mistakes as ways to improve
- Learn from their mistakes

(Understood, 2020)



How to Help Children Face Failure

Children need to learn how deal with failure. Some tips on how to teach children how to fail include:

Show empathy

Empathize with children, especially when in distress. Children's feelings are valid. It's essential not to brush off their feelings of disappointment.

Normalize failure

Explain to children that failure is part of life and that everyone fails at some point in life. Tell children "The only person who never failed is someone who never tried."

Make it a teachable moment

Explain to children that there is an opportunity to learn and even grow from failure.

Ask questions about the process

Guide children to realize what they could do to improve or have done differently.

Provide feedback

Provide children feedback on their effort.

Create a safe space for learning

Create meaningful challenges for children, encourage them to make mistakes, and talk about them.

Tips to Help Children Face Failure



Show empathy:

Empathize with children, especially when in distress. Acknowledging and validating children's feelings can help them better regulate their emotions.

Normalize failure:

Explain to children that failure is a normal part of life and everyone experiences it at some point. Provide an environment that normalizes making mistakes to help build a children's resilience.



Make it a teachable moment:

Explain to children that there is an opportunity to learn and grow from failure. Empower them to turn failures into positive learning experiences.



Ask questions about the process:

Help children build problem-solving skills by guiding them in recognizing how they can improve or what they can do differently in the future.



Provide feedback:

Provide children positive and constructive feedback on their efforts to help build confidence, self-esteem, and resilience.



Create a safe space:

Children need a physically and emotionally safe space to process their feelings about failure.



What to Avoid

Teasing, mocking, or ridiculing children for failing.

Dismissing children's feelings about failure.

Scorning children for failing at something.

Ignoring children's discomfort about failure.



Teaching Children Boundaries

When teaching children about boundaries, we let them know the importance of understanding and respecting their own needs, as well as the needs of others. By fostering boundaries, children are able to develop a well-defined sense of who they are, what they are responsible for, and the ability to choose, among other qualities.

(Cloud et al., 2002)

What are Boundaries?

Boundaries can be considered a limit that someone has set for themselves, including physical, emotional, material, and mental boundaries.



Physical boundaries relate to our personal space and physical touch, such as one's body parts.

- For example, "I would appreciate not being touched right now."



Emotional boundaries relate to our feelings and dealing with them.

- For example, "Respectfully, I don't feel like speaking about this at this moment."



Material boundaries can be referred to as possessions or tangible items.

- For example, "I don't appreciate always sharing my toys with you, and you never share yours."



Mental boundaries allow us to form our own thoughts and opinions, which can aid in navigating discussions.

- For example, "I don't feel comfortable sharing personal information with you right now."

PHYSICAL BOUNDARIES

"I would appreciate not being touched right now."



"Respectfully, I don't feel like speaking about this at this moment."



EMOTIONAL BOUNDARIES

"I don't appreciate always sharing my toys with you and you never share yours."



MATERIAL BOUNDARIES

"I don't feel comfortable sharing personal information with you right now."



MENTAL BOUNDARIES

Importance of Boundaries

Boundaries are essential to be established in any individual's life, no matter the age. Boundaries can help reduce anxious feelings and can promote self-confidence. In addition to this, it can also prevent harm from occurring in different manners. For example, a child who knows that their body belongs to them is more likely to say "No, I do not want to be hugged" and notify their parents if someone touches them inappropriately.

Boundaries define self:	Boundaries clarify responsibilities:	Boundaries give us options:
<ul style="list-style-type: none">• When boundaries are established, we become more aware of our rights and of what is important to us and others.• Setting boundaries is a sign of respect towards yourself and others.• Clear boundaries provide a clearer picture of our own needs and desires making it easier to ask for assistance when we need it.	<ul style="list-style-type: none">• They define what we own and what we are responsible (our body and our feelings).• We do not have to take on other people's responsibilities unless we choose to, the same way that they do not have to take on ours.• Empathy towards other people's needs is important but so are our own limitations.	<ul style="list-style-type: none">• Boundaries teach individuals that they have control within their lives. Thus, they can choose whether they want something to happen or not.

(Children's Center, 2018)

Teaching Boundaries

To teach children about boundaries, it is important first to teach them the foundation that encompasses boundaries, which is empathy and self-awareness, which then leads to healthy boundary setting. Children learn best by example, so in order to teach a child how to set their boundaries, parents, teachers, and other trusted adults must model that behavior.

Teaching Empathy:

- Addressing a problem behavior as soon as it occurs gives a child an opportunity to learn from experience what empathy is.
- Creating rules that helps see two perspectives is another technique that can help a child develop empathy.

Teaching Self-awareness:

- Since children learn best by example, modeling behavior can show children how they can develop their own sense of self-awareness.
- Helping a child identify their emotions can also play a role in developing a sense of self-awareness.

(Jacobson, 2021)

Children Learning Boundaries

Children learn by mirroring adults:

Children learn the fastest by watching others, especially their parents. It is important that adults model what they want their children to know. The healthier their boundaries are, the more likely children will learn good boundaries from watching. In addition to this, it is important for parents to keep learning new skills to teach their kids.

Children learn what belongs to whom:

When we help children identify what falls within their limits of ownership and teach respect for what belongs to them, we also help children identify what is within other people's limits as well. Children can learn this by adults allowing them to choose what to share with others and what they want to keep special, and to teach children to ask first before borrowing something from someone else.

Honor children's space and privacy:

Children need to know that they have the right to their own privacy. For example, adults should model knocking before entering their bedroom or bathroom or asking for permission before taking care of their bodies (like bath time). We let children know that their space and body belong to them by asking for permission.

Give children choices:

Letting children have options enables them to have a sense of realization that they have a say in what happens in their lives and that their opinions matter.

Teach that it's okay to say "NO":

Sometimes, children feel obligated to show affection to their friends and relatives even if it makes them feel uncomfortable. It is crucial to let a child know that they do not have to accept a kiss or a hug from a relative or a friend if it makes them uncomfortable. Teaching children to "just obey" can make them more vulnerable to abuse. Adults can role-play asking for a hug and give the child practice saying no. This allows children to learn they have rights to their own bodies.

(Children's Center, 2018)



Postpartum Depression

Identifying Depression, Baby Blues, and Postpartum Depression

Depression

The birth of a child is often a time where mothers feel a wide range of different feelings. It is important to be able to distinguish when a feeling deviates from normal and seek assistance.

Depression

Depression or major depressive disorder is a mental illness that negatively affects how one feels, thinks, and acts. Depression must last at least two weeks and may require treatment.

Symptoms associated to depression may cause impairment to one's everyday functioning. Some symptoms of depression include:

- Feeling sad, anxious, or "empty"
- Loss of interest in activities that were once enjoyable
- Changes in appetite (eating too much or too little)
- Sleeping issues (sleeping too much or little to none)
- Issues thinking, concentrating, or making decisions
- Loss of energy (feeling tired)
- Feeling worthless or guilty

(American Psychiatric Association, n.d.)



Depression is suggested to be caused by a combination of genetic, biological, environmental, and psychological factors (National Institute of Mental Health, n.d.).

Baby Blues

Baby blues are feelings of sadness that mothers may experience the first few days after having a baby. The baby blues are usually experienced within the first 2 weeks after having a baby and typically goes away without any treatment (National Institute of Mental Health, n.d.).

Symptoms associated to the baby blues do not cause serious impairment in the mother's ability to function. Symptoms of the baby blues include:

- Mood swings
- Feeling irritable, overwhelmed, or sad
- Decrease in concentration

Approximately, 70% of new mothers have the baby blues (Stewart & Vigod, 2016). Although the exact cause of baby blues is unknown, it is believed to be associated to hormonal changes that occurs during pregnancy and after giving birth. As well as having to adjust to caring for a baby.

(American Pregnancy Association, n.d.).

Postpartum Depression

Postpartum Depression is a depression that occurs after childbirth. Postpartum depression can affect how women feel, think, and act. After giving birth, it is common for mothers to experience feelings of sadness within the first few days after having a baby. However, if feelings of sadness have been present for longer than 2 weeks, then it is possible that one may have postpartum depression (Office on Women's Health, 2019).

Symptoms associated with postpartum depression can cause impairment to women's everyday functioning and their ability to care for others. Symptoms of postpartum depression are like the symptoms of depression but may also include:

- Persistent sad, anxious, or "empty mood"
- Irritability
- Feelings of guilt, worthlessness, hopelessness, or helplessness
- Withdraw from friends and family
- Trouble bonding with the baby
- Thoughts about harming oneself or the baby

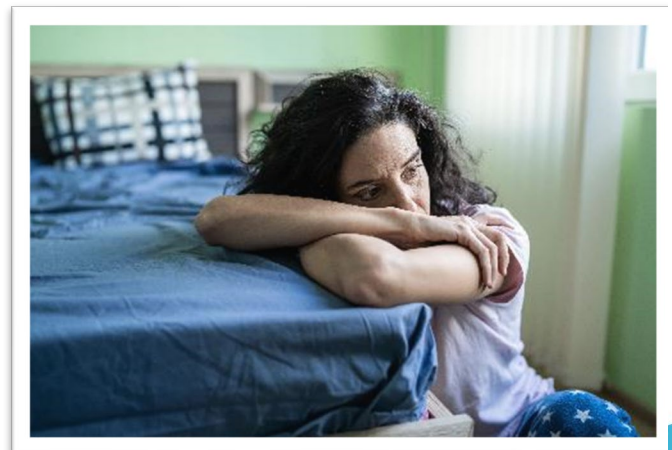
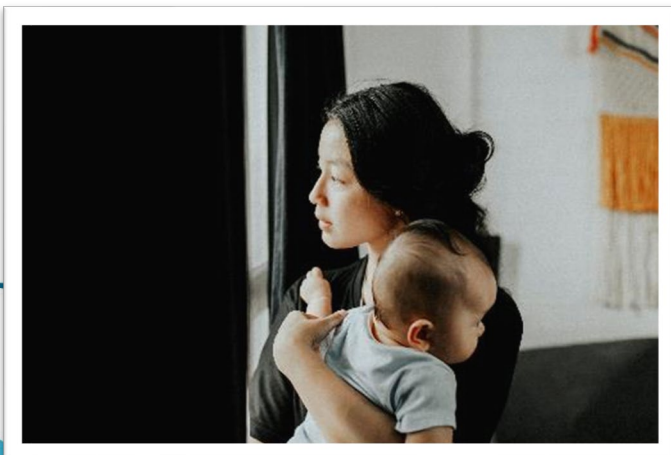
(National Institute of Mental Health, n.d)

Some women may be more at risk of experiencing postpartum depression. Women who are at a higher risk of postpartum may:

- Have a personal history of depression or bipolar disorder
- Have a family history of depression or bipolar disorder
- Not have any support from friends or family
- Had problems with previous pregnancy/birth
- Use substances
- A history of trauma
- Live a stressful life

(Office on Women's Health, 2019)

Treatments for postpartum depression typically include therapy, medicine, or a combination of both.



Shattering the Stigma and Supporting Mothers

Currently, there is an immense pressure surrounding pregnancy and motherhood. The pressure may negatively affect mothers and their children. It is important that mothers feel supported and receive treatment.

How to Support Mothers

If you suspect a mother may have postpartum depression, you can:

Talk to them about the change you are seeing in them –

EX: “I have noticed that you haven’t [insert specific behavior/personality change]. How are you feeling?”

Listen to their feelings

EX: Allow them to express how they are feeling. Validate their feelings and reassure them that they are a good mother. Make sure to not compare their experience to others.

Offer to help complete everyday tasks

EX: Offer to help do tasks such as laundry, washing the dishes, and cooking.

Encourage them to talk to a doctor

EX: Encourage them to talk to the doctor about their symptoms and seek treatment.

Resources for Women Experiencing Postpartum Depression

Postpartum Support Int. Helpline	1-800-944-4773 (Call or text “Help”)	https://www.postpartum.net/
National Alliance on Mental Illness	1-800-950-6264	https://www.nami.org/Home
Postpartum Depression	1-855-939-0386	https://www.postpartumdepression.org/resources/
Suicide Prevention Lifeline	1-800-273-8255	https://suicidepreventionlifeline.org/
Crisis Text Line	Text HOME to 741741	https://www.crisistextline.org/



Dealing with Deployment

Having a parent deployed may bring up a wide range of emotions for children. These emotions can persist from first learning about deployment to well after the parent has returned home. Stress may also be heightened within families as one parent attempts to take on both parenting roles along with managing their own feelings.

Signs of Deployment Stress in Children

Although stress symptoms can vary according to the child's age, parents must be mindful of the following symptoms:

Babies

Difficulties with feeding, sleep disturbances, increased irritability, or low energy.

Toddlers and preschoolers

Aggressiveness, clinginess, shifts in eating or sleeping patterns, or crying more often.

Elementary age

Developmental regression like baby talk or bedwetting, shifts in eating patterns, sleep disturbances, and physical complaints like headaches.




Adolescents

Loss of interest in usual activities, mood swings, anger, and engaging in risky behavior like alcohol, drugs, or sex.

(Family Development Guide, n.d)

Responses to Deployment Across Children's Age Groups

Below are children's reactions to deployment across age groups:

	Toddlers (1 – 5 years old)	Toddlers may not understand why mom or dad is not there for bedtime. As such, children within this age group may often question where mom or dad is and may respond by crying, changes in sleeping or eating patterns, or clinginess.
	School-Aged Children (6 – 12 years old)	School-aged children tend to focus more on the safety and wellbeing of the parent. As such, children may seem preoccupied, anxious, withdrawn, or may begin regressing developmentally.
	Teenagers (13 – 17 years old)	Adolescence is often a challenging period with constant change; thus, teenagers may have stronger reactions to a parent's deployment. For instance, they avoid communication with a deployed parent, resent parents for the new household responsibilities, or disregard their academics.

(American Academy of Pediatrics, n.d)

Understanding How Deployment May be Affecting Parents

As previously discussed, deployment is a stressful time for all family members. Before helping children cope, it is essential for the parent who stays at home to check in with themselves first.

Parents, consider asking yourself the following questions:

- How much have I been sleeping? Do I feel rested once I wake up?
- Am I hiding my feelings? If so, what are they, and why?
- Have I eaten enough? Do I feel satiated after a meal?
- Have I reached out to friends/family?
- Have I been focusing on things out of my control?
- Have I continued my hobbies?

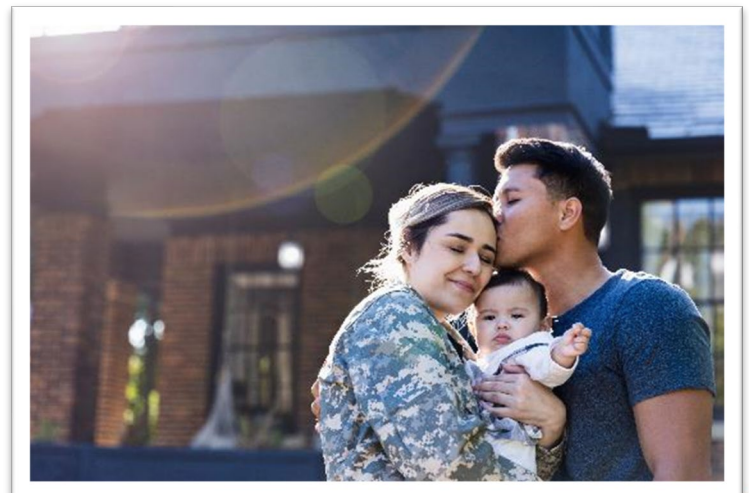
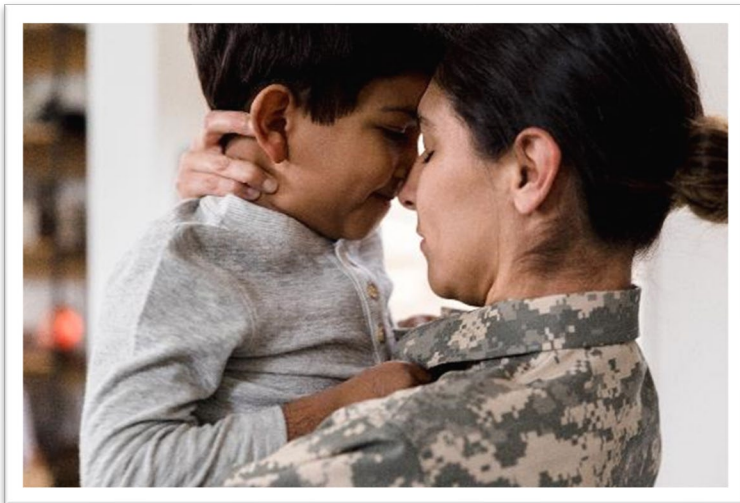
(Military Onesource, n.d)

Adjusting to a Parent's Return

Although parents may expect children's stress to disappear as soon as the deployed parent returns home, that may not be the case. Instead, children may experience an increase in stress since the parent may have returned with physical or mental wounds which may be difficult for children to understand. Also, children may struggle with being close to the deployed parent over the fear of enduring another painful goodbye if the parent is redeployed.

If you notice your child remains stressed or gets worse after the deployed parent's return, seek professional support and consider counseling services.

(American Academy of Pediatrics, n.d)



Steps to Mitigate Stress at Home

Although deployments are never going to be easy on a family, parents can mitigate the stress for themselves and their children by creating a safe environment where coping with deployment is navigated.

The following steps are recommendations by the American Academy of Pediatrics (AAP) for parents to mitigate stress.

Step 1: *Before deployment, educate yourself on it.*

It is beneficial to learn about deployment before it occurs. Fortunately, several programs and resources are available for military families to understand what to expect, potential feelings, or manage stress. Once you have become familiar with what to expect, you will not feel out of control. Instead, you will feel better equipped to handle your own or your child's reaction to deployment.

Step 2: *Share and Listen.*

The most crucial step a parent can take to relieve children's deployment-related responses is to talk about it with them and listen. Being open and approachable to answer questions will help children feel recognized and validated. Parents must remember that children are always watching their reactions; if they see a parent suppress their feelings, stress, or having emotional outbursts, children may echo those reactions in the future.

Step 3: *Monitor what your children see.*

News reports of bombings and deaths, especially in areas near the deployed parent, maybe very stressful regardless of the child's age group. Limiting exposure to such content is preferred across all age groups; however, it may not always be feasible. Naturally, children and teenagers will have questions, so it is best to share basic information with them, avoiding graphic details or unnecessary information.

Step 4: *Maintain closeness*

Although one parent may be physically away, there are several ways to encourage closeness. A stuffed animal with a voice recording, a necklace or shirt with their picture, sending pictures and letters, or preparing care packages are a few ways that can help children feel closer to the deployed parent.

Step 5: *Keep kids busy, but not too busy*

Considering how a parent's deployment will change family dynamics and may increase stress in children. Parents must strive to continue their children's activities or hobbies. Children thrive in structured and consistent environments; ceasing or altering routine activities may lead children to experience increased stress levels. However, be mindful of overscheduling activities since it may cause burnout and higher rates of stress.

Step 6: *Know when to call in help*

It can be difficult for a parent to admit they are feeling frustrated because they cannot soothe their child or are having trouble managing the family during deployment, however, they must remember the importance of seeking support. Parents must be vigilant of their children's behavioral changes and consider their frequency to act accordingly. Parents can receive support from a military support group, a military physician, a mental health professional, or the child's pediatrician.

(American Academy of Pediatrics, n.d)

How OMICRON is Affecting Children

- The omicron variant seems to be *affecting children under the age of five through a harsh “barking cough known as croup.”* It is not deadly but appears frightening (NBC Universal News Group, 2022).
- **Airway of children are very narrow and easy to clog with not that much inflammation needed making omicron a threat to children** (NBC Universal News Group, 2022).
- In Texas Children’s Hospital in Houston, **nearly 40% of the pediatric hospitalizations** are for children under the age of five who have COVID-19 (NBC Universal News Group, 2022).
- Most vaccinated children who acquire omicron may experience a fever, a runny nose, cough, congestion, a sore throat, and/or difficulty swallowing. These symptoms are seen in those that are vaccinated. **Those that are not vaccinated may experience severe symptoms** that requires hospitalization (Mount Sinai Today, 2022).
- If a child experiences the following symptoms because of the omicron variant, they should be rushed to the hospital: high fevers, difficulty breathing, persistent chest pain or pressure, severe belly pain, severe diarrhea, confusion, sluggishness, unusually pale, has gray or blue-colored skin, lips, or nail beds (Children’s Hospital Los Angeles, 2022).
- Children and adolescents may experience a range of **long covid symptoms** which consists of the following: unusual fatigue, shortness of breath, brain fog, memory loss, difficulty concentrating, sleep disorders, unexplained fevers, gastrointestinal symptoms, anxiety, or depression (Children’s Hospital Los Angeles, 2022).
- Multisystem inflammatory syndrome in children (MIS-C) is associated with COVID-19 (Centers for Disease Control and Prevention, n.d.).



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Questions?
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