

## RESEARCH ARTICLE

# Considerations for educators in supporting student learning in the midst of COVID-19

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## Abstract

COVID-19 has presented a period of unprecedented challenge for schools in the United States. Thousands of school buildings across the country were closed in the spring of 2020 through the end of the school year to slow the spread of the global pandemic. Plans to reopen schools in many states remain uncertain as the virus continues to spread across communities. Current and future challenges are complex, with significant impacts on the global economy, health care system, and overall well-being. When schools reopen, students will present with a wide variety of academic and social-emotional needs, and schools will need to mindfully adjust systems and practices to meet the needs of their unique student population. This paper provides educators with suggestions on how to adapt existing multitiered systems of support using a trauma-informed lens to support students during this unusual time.

## KEYWORDS

academic intervention, COVID-19, multitiered systems of support, social-emotional intervention, trauma-informed

## 1 | INTRODUCTION

In March 2020, schools across the United States began to face what would become an unprecedented period of challenge. Due to the spread of a global pandemic, COVID-19, 48 states, four U.S. territories, the District of Columbia, and the Department of Defense Education Activity directed or recommended school building closures that would continue for the remainder of the academic year. These school closures resulted in an unparalleled disruption to academic instruction for at least 124,000 U.S. public and private schools and 55.1 million students nationwide (Education Week, 2020).

Both short- and long-term effects of the pandemic will be complex, multifaceted, and particularly significant for the most disadvantaged. In addition to schools, states across the country mandated the closure of businesses to slow the spread of the virus. According to the U.S. Bureau of Labor Statistics (2020), this resulted in an increase in the country's unemployment rate of 10.3 percentage points to 14.7% in April 2020, representing the highest rate and largest 1-month increase in the history of the data. Thus, families across the nation have begun to face economic implications that will be far-reaching and likely persistent. Individuals in precarious employment and financial conditions may have faced significant stressors in attaining necessities and medical care, which are especially crucial during a time of the pandemic.

The COVID-19 crisis has also coincided with a time that issues of inequality and injustice in the United States are on the forefront of the public consciousness. While the effects of the virus on the physical health of racial and ethnic minority groups is not yet fully understood, preliminary data suggests that minority communities are enduring a disproportionate burden of illness and death. According to a recent report authored by the Centers for Disease Control and Prevention, initial data has suggested an overrepresentation of blacks among hospitalized patients and higher death rates among black/African American and Hispanic/Latino individuals in comparison to white and Asian individuals (Garg et al., 2020). These trends have intensified challenges for many minority communities and highlighted economic inequalities that impact access to high-quality health care.

Implementation of social distancing measures and stay-at-home orders across the country have been integral in limiting and delaying infection rates to avoid overwhelming the medical system. However, use of such measures has led to a wide range of personal experiences, as well as the potential for significant psychosocial impacts. Some families may appreciate the reduction in responsibilities outside of the home, increased time spent with immediate family, and the potential for greater social solidarity. Whereas others may feel socially isolated and overcome with feelings of anxiety, panic, and fear. When coupled with the threat of income loss, disruption to routines and positive health habits, and increased pressure on healthcare systems, such feelings could contribute to heightened psychological risk (Organisation for Economic Co-Operation and Development [OECD], 2020). Levels of risk could be even more pronounced for individuals who have been directly impacted by the virus, such as those who have fallen ill, had a close friend or family member fall ill, or have experienced loss of a loved one.

## 2 | POTENTIAL IMPLICATIONS FOR STUDENTS AND SCHOOLS

Because adults are the primary source of support for children during the pandemic, their ability to cope with stress is paramount for child well-being. Therefore, as adults are faced with increased stress, the pandemic has the potential to have significant impacts on children. For children in some families, stressors that were present before the pandemic, such as financial insecurity, housing instability, food insecurity, social isolation, and limited access to quality health care will likely increase (OECD, 2020). This toxic overload of hardship can in turn lead to increased rates of substance abuse, domestic violence, and untreated mental health problems (Shonkoff, 2020). The interpretation of and reaction to these events will be personal to each child, governed by an interaction among their pre-existing trauma exposure, environmental variables (e.g., social/family connection, financial and community resources), and personal factors (e.g., developmental maturity, coping skills, psychological history; Chafouleas & Marcy, 2020). The impact may be minimal for some children, whereas for others COVID-19 will represent an adverse childhood experience. Exposure to trauma can result in significant long-term negative consequences (Chafouleas et al., 2019). However, impacts are influenced by the duration, intensity, predictability, and consequences of the traumatic experience (Chafouleas & Marcy, 2020), all of which are difficult to assess within a pandemic that is continually evolving.

Schools should expect students to react to the pandemic in a variety of ways that will vary depending upon the student's personal experiences and developmental level; however, it is likely that negative reactions may improve

over time (Chafouleas & Marcy, 2020). Research has indicated that chronic stress and trauma can affect the brain in a variety of ways. Children can have difficulty processing emotional and social responses, sustaining attention, and utilizing memory effectively. This can manifest in behaviors such as hyperarousal, hypervigilance, and physical aggression (Swick et al., 2013). Young children may exhibit irritability, crying, regression of skills, clinging behavior, bed-wetting, somatic complaints, withdrawal, and nightmares. These behaviors can lead to long-term effects that may include a variety of mental health issues (e.g., depression, anxiety, adjustment disorders, posttraumatic stress disorder), as well as interpersonal or academic difficulties (Madrid et al., 2006).

Children who contract COVID-19 may be at higher risk for impacts to neuropsychological functioning. While research on this topic is currently in its infancy, researchers have documented preliminary hypotheses concerning neurotropic factors. Based on what is known about other coronaviruses, children who contract COVID-19 could be at higher risk for developing or experiencing an exacerbation of executive functioning weaknesses, attention-deficit/hyperactivity disorder, somatic symptom disorder, and neurocognitive disorders (Condie, 2020). These factors could present significant barriers to student learning that will need to be addressed by schools in a thoughtful and systematic manner.

In addition to psychological and neurological implications, schools must be prepared to address a wide variety of academic needs that will naturally arise as a result of prolonged school closure. To begin, the quality of interim educational measures implemented during school closures was significantly impacted by resources available to schools and districts. For example, districts that utilized electronic devices (i.e., iPads, Chromebooks) to facilitate instruction for all students before the pandemic were able to transition more quickly and fluently to instruction within a virtual environment. In contrast, students in districts that did not have access to electronic devices likely missed weeks of instructional time as schools worked through the logistics of securing and distributing learning materials. Second, the success of virtual learning is largely dependent on the quality of the child's home learning environment. Important factors that may influence a child's success include home educational resources (i.e., computer, internet connection), availability of a quiet workspace, parental education level, parents' fluency in the language of instruction, parents' competency with digital media, and parents' engagement with schools (OECD, 2020). Research suggests that differences in educational performance between children of varying socioeconomic backgrounds widens during school breaks and may account for two-thirds of the achievement gap by ninth grade (Alexander et al., 2007). Such differences will likely be even more pronounced following prolonged school closures due to the pandemic. Therefore, students from socio-economically disadvantaged families may be most vulnerable to falling behind academically.

### 3 | RATIONALE FOR THE CURRENT PAPER

The timeline for schools reopening in many parts of the country is currently uncertain, as is the planned modality of instruction (e.g., in person learning, virtual learning, combination of in person and virtual learning). Depending upon the trajectory of the virus, many schools may reopen for in person instruction at some point in the near future but later need to transition back to virtual learning for a period of time. What is certain is that for the foreseeable future, educators must become highly skilled at flexibly adjusting to an instructional landscape that is continually changing while also meeting the needs of a student population that is rapidly increasing in need and diversity. Educators will be tasked with supporting students who have experienced an event unlike any that has occurred in modern history. Social-emotional and academic needs will vary in complexity and breadth, necessitating the use of systematic practices that can be readily adapted to support changing demands. The rationale for this paper is to describe specific, actionable, empirically based systems and practices that educators can employ in addressing social-emotional well-being and academic learning within the context of the COVID-19 pandemic.

## 4 | CONSIDERATIONS FOR EDUCATORS

### 4.1 | Addressing social-emotional well-being

As schools reopen, they must be prepared to ensure that learning environments are emotionally and physically safe to minimize potential long-term negative reactions to the pandemic. Special consideration will need to be taken for planning to assist all students with reacclimating to the school environment, as well as for providing additional support to students in need. This can be done by building upon existing multitiered systems of support (MTSS) that provide a continuum of services to students with diverse needs. Integration of a trauma-informed approach within MTSS will be important given the nature of the current situation. Chafouleas et al. (2016) describe a trauma-informed approach as one that represents a system-wide response to provide a continuum of supports to those exposed to trauma. According to the Substance Abuse and Mental Health Services Administration (SAMHSA, 2014), a trauma-informed approach is grounded in four assumptions referred to as “The Four R’s”: realization of the widespread impact of trauma and potential paths for recovery; recognition of the signs and symptoms of trauma; responding in a way that fully integrates knowledge about trauma into policies, procedures, and practices; and actively seeking to resist retraumatization.

Thus, it will be integral for schools and districts to provide staff with trauma-focused training so that they may recognize the signs and symptoms of trauma and respond in ways that avoid retraumatization. Such trainings can be most effective when supplemented with more intensive professional learning that focuses on how to translate specific trauma-informed strategies into the classroom along with teacher coaching to address effectiveness and sustainability (Chafouleas et al., 2016). Within the current context, school psychologists could facilitate trauma-informed trainings and provide consultation to teachers to support follow-up implementation in the classroom. Additionally, schools must plan to thoughtfully adapt universal, targeted, and intensive systems and practices to address students with a wide variety of personal experiences and social-emotional needs upon re-entering school.

#### 4.1.1 | Universal practices

Within MTSS, universal, or Tier 1, social-emotional supports include high-quality, evidence-based instruction that is provided to all students with the goal of optimizing learning and preventing problems as soon as possible (McIntosh & Goodman, 2016). Data-based decision making is utilized to assess the degree to which universal supports are successful in assisting students in reaching grade-level expectations. Universal supports are deemed adequate when at least 80% of the student population in a school is successful without the need for additional assistance. Within the context of the COVID-19 pandemic, more students will likely present with increased social-emotional needs. Therefore, schools must rethink the level of universal social-emotional support that will be necessary to successfully support at least 80% of their student population. While addressing academic skills after the extended school closure remains an important objective, students will not be ready to engage in formal learning until they feel safe, both physically and psychologically (American School Counselor Association & National Association of School Psychologists [ASCA & NASP], 2020). Therefore, educators should begin by prioritizing social-emotional well-being over academic gains in the short-term upon re-entry. The length of time it takes to ensure that students feel safe and ready to learn in school will vary depending upon the degree to which the community is impacted by the virus. Educators should be prepared to adapt their expectations to the response of their unique student population.

When schools reopen, educators should focus their efforts on ensuring that the school environment is supportive, welcoming, and predictable. Before reopening, educators may wish to create and share welcome back videos with students, as well as arrange in-person or virtual school tours or classroom visits. Many students may not have had the opportunity to say goodbye to their teachers from the previous school year; therefore, schools

might consider creating opportunities for students to reconnect with their previous teachers. To further ease the transition to the new year, elementary schools may consider “looping” to allow students to remain with their previous teacher for all or a portion of the 2020–2021 school year.

It will also be important to provide students with opportunities to reconnect with their peers. Whole school and classroom celebrations will be important in rebuilding the school community; however, gatherings of large groups of people may continue to be restricted in many areas. Therefore, schools and districts will need to thoughtfully plan celebrations in a way that maintains social distancing requirements. Examples of adapting celebrations within the context of the pandemic might include holding events outdoors, broadcasting whole school assemblies to individual classrooms using video technology, and using digital technology to create a compilation of student/staff messages (e.g., positive thoughts, hopes and dreams for the new year) which is then shared virtually with the school community.

Students will have likely experienced highly inconsistent academic and behavioral expectations during the months of school closure. Therefore, when schools reopen, educators will need to spend more time than usual teaching and reviewing behavioral expectations and routines. This instruction should be embedded within the content-area curriculum and occur regularly throughout the school year. Additionally, educators should be prepared to explicitly and regularly teach any new behavioral expectations that will be necessary within the context of the pandemic (e.g., social distancing requirements, mask wearing, hand washing). Some students may have difficulty adjusting to the new expectations, and others (particularly younger students) may be somewhat fearful of wearing a mask or seeing others wear masks. Educators should be prepared to respond to these difficulties with patience and understanding. Within the current context, it may be best for educators to view many problem behaviors as potential deficits in self-regulation skills, as well as a prolonged adjustment period to the ongoing pandemic.

In adopting a trauma-informed approach, schools will need to use an understanding of trauma to strengthen school-wide practices to create a predictable and supportive learning environment that minimizes unnecessary reminders of potential trauma and loss (National Child Traumatic Stress Network, Schools Committee [NCTSN], 2017). Consistency is a key aspect of supporting children in recovering from stressful and potentially traumatic experiences (Swick et al., 2013). Schools can create a consistent and predictable environment by greeting students warmly when entering the school or classroom, posting and following classroom schedules, teaching and reinforcing behavioral expectations and routines, and placing emphasis on positive, proactive methods of responding to student behavior over more punitive approaches. Developing and implementing a school-wide continuum of responses to student behavior can increase predictability within the school environment, potentially leading to students feeling more safe and supported. Exclusionary discipline practices, such as suspension or expulsion, should be reserved for only the most severe cases that involve a threat to student or staff safety (ASCA & NASP, 2020).

Upon schools reopening, it will be important to provide students with an outlet to collectively discuss and process their experiences during the time of school closure. Classroom meetings addressing this topic may need to occur a few times over the first few weeks of school re-entry and will need to be repeated if additional school closures occur. School psychologists could play an important role in cofacilitating these discussions with classroom teachers. Such discussions may also lead to opportunities for the school psychologist to recognize signs and symptoms of potentially at-risk students so that additional steps may be taken in providing appropriate levels of support to students in need.

### *Social-emotional learning (SEL)*

According to the National Child Traumatic Stress Network (NCTSN, 2017), an important component of Tier 1 supports within trauma-informed MTSS involves providing psychoeducation to students about the effects of stress and trauma on the body, as well as how to utilize healthy coping skills. Such lessons incorporate practices that strive to increase and access students' resilience and protective factors. Bethell et al. (2014) found that building resilience, defined as “staying calm and in control when faced with a challenge,” (p. 2016) in children ages 6–17 can lessen the negative impact of adverse childhood experiences. In their study, children who demonstrated resilience

were found to display higher rates of school engagement. These findings highlight the importance of providing students with explicit instruction in SEL and self-regulation skills when schools reopen.

Schools and districts can build upon structures that may already be in place (e.g., SEL lesson blocks, advisory periods) to provide this instruction. This instruction may also be embedded within the content-area curriculum. Many SEL programs incorporate direct instruction in self-regulation and coping skills. Educators can find information regarding specific evidence-based SEL curricula on the Institute of Education Sciences What Works Clearinghouse website (see <https://ies.ed.gov/ncee/wwc/>). Additionally, the Collaborative for Academic, Social, and Emotional Learning has developed program guides that provide a comprehensive overview and summary of research literature for a variety of SEL curricula spanning pre-k through high school (see <https://casel.org/guide/>). School psychologists may serve as important partners with classroom teachers in facilitating SEL lessons and helping to develop extension activities to support the generalization of skills.

A growing body of evidence supports the use of mindfulness-based interventions (MBIs) in schools to improve resilience and positive coping in the face of challenges (Volanen et al., 2020). MBIs involve helping individuals to develop a greater sense of moment-to-moment awareness and acceptance by engaging in activities that involve focusing one's attention on something specific and learning to notice and refocus attention when distracted. Mindful breathing is one of the most commonly used MBIs and involves focusing attention on your breathing. Implementation of a short (5-min), audio-delivered mindful breathing intervention in the classroom has been preliminarily associated with increases in student engagement and decreases in disruptive behavior (Minkos et al., 2018). MBIs have also been shown to have positive effects on educator stress and well-being (Frank et al., 2015). Within the current pandemic, students are not the only impacted individuals in schools. All school staff are at higher risk for negative effects as well. Therefore, in light of the current context, schools and districts may consider implementing a school-wide MBI to facilitate positive coping in both students and staff. A short, 5-min mindful breathing activity may be easily incorporated into most school schedules and could play a valuable role in promoting social-emotional well-being during this time when it is so important.

### *Social-emotional screening*

While trauma-informed MTSS is well-suited to systematically address the social-emotional needs of students, the effectiveness of the framework is dependent upon the ability of schools to identify strengths and needs, as well as to identify students who may not be responding to supports (Romer et al., 2020). Social-emotional screening measures can help to facilitate early identification of students who may be at-risk for developing significant problems. Commonly used measures include attendance, office discipline referrals, and teacher referral. However, these methods are sometimes criticized as being inefficient and reactive, resulting in delays in providing students with the help that they need (Romer et al., 2020). Additionally, such methods can be somewhat biased in identifying students with acting out, or externalizing, behaviors while missing students with significant needs who may display internalizing behaviors (e.g., negative affect, withdrawal) that are less apparent to outside observers.

To address the limitations of other methods and to respond to student needs within the context of the pandemic, the use of evidence-based, brief behavior rating scales can be used as screeners over and above common Tier 1 assessments such as ODRs. Such measures can provide a means for schools to identify at-risk students (with both internalizing and externalizing behaviors) early who may benefit from additional support, as well as evaluate the response of all students to universal Tier 1 practices (Romer et al., 2020). When children have experienced trauma and environmental stressors, they often manifest as internalizing problems. Therefore, within the current pandemic, it will be particularly important for schools to employ comprehensive methods to identify and support at-risk students.

The process of social-emotional screening involves more than simply selecting and administering a tool and requires careful planning and preparation. Thus, a variety of factors will warrant attention in the planning process. Those factors include: (a) buy-in from school staff and families; (b) allocating fiscal and staffing resources; (c) defining roles and responsibilities of staff involved in the process; (d) addressing ethical and legal considerations (e.g., parental consent, student assent, confidentiality); (f) training and professional development (e.g., administration, data analysis,

decision-making, intervention selection, decision rules); (g) developing or expanding data systems; and (h) identifying and coordinating resources required to support students in need of additional intervention (SAMHSA, 2019). Additionally, schools should choose an instrument that is relevant to the school's demographics and characteristics (contextual fit) and shown to demonstrate strong psychometric properties, while also considering feasibility (e.g., cost of the screener; time needed to collect, score, enter, and analyze data; time needed to train staff) (SAMHSA, 2019). Several compendiums of evidence-based screening tools are available in Appendix III of SAMSHA's document entitled, "Ready, set, go, review: Screening for behavioral health risk in schools" (SAMHSA, 2019; see [https://www.samhsa.gov/sites/default/files/ready\\_set\\_go\\_review\\_mh\\_screening\\_in\\_schools\\_508.pdf](https://www.samhsa.gov/sites/default/files/ready_set_go_review_mh_screening_in_schools_508.pdf)).

#### 4.1.2 | Targeted practices

Targeted, or Tier 2, social-emotional supports consist of evidence-based interventions delivered in a small group format intended to supplement, rather than replace, Tier 1 supports (McIntosh & Goodman, 2016). Within the context of the COVID-19 pandemic, it is likely that students will present with a variety of concerns that may not be adequately addressed by universal supports. Schools should be prepared to address these concerns systematically by connecting students with appropriate Tier 2 interventions based on data obtained from screening measures.

After being out of school for an extended period of time, some students may struggle with day-to-day organizational skills and time management. Others may have difficulty getting along with peers. Some students may be grappling with ongoing stressors and could benefit from regular opportunities to connect with staff and peers on a personal level. Whereas, others may benefit from meeting in a small group to review and practice coping strategies taught during classroom lessons. School psychologists and other school-based clinical staff should be prepared to address these needs through implementation of evidence-based interventions. Schools may also consider creating a systematic process for students who would benefit from regular check ins from clinical staff.

Given the nature of the current situation and potential for more students to present with trauma-related needs, schools may consider implementing interventions specifically geared towards students who have experienced trauma. One of the most well-known, evidence-based, trauma-focused interventions developed for schools is the Cognitive Behavioral Intervention for Trauma in Schools (CBITS) program. CBITS is a comprehensive program that has been used with students in grades 5–12 and consists of both group and individual sessions for children, group sessions for parents, and an educational session for teachers. The goals of the program are to: (1) reduce trauma-related symptoms, (2) teach and build skills to manage stress related to trauma, and (3) strengthen caregiver and peer support (Chafouleas et al., 2016). Bounce Back is an adaptation of the CBITS program for younger students. It is a cognitive-behavioral, skills-based, group intervention designed to teach elementary school children skills to cope with and recover from stressful and traumatic experiences. The intervention includes 10 group sessions along with 2–3 individual sessions and also includes materials for parent education sessions (Langley et al., 2015). Additional information on supporting research literature for CBITS and Bounce Back, as well as detailed information on a number of other trauma-focused interventions, is available through NCTSN (see <http://www.nctsn.org/treatments-and-practices/trauma-treatments/interventions>).

#### 4.1.3 | Intensive practices

When Tier 1 and 2 supports are not sufficient in promoting success, students will require intensive interventions, tailored to their own specific needs. Tier 3 support plans adapt interventions in a unique and specific way to best address individual student needs (McIntosh & Goodman, 2016). Within the context of trauma-informed MTSS, problem behaviors are interpreted in light of potential impacts of chronic stress and trauma. Functional behavioral assessment methods are used to determine underlying factors influencing behavior, and data gathered from such

assessments are used to develop highly individualized plans to specifically address student needs. It will be important for schools to create safe spaces both inside and outside of classrooms for students to utilize coping strategies to self-regulate when experiencing behavioral and emotional challenges (NCTSN, 2017).

According to the NCTSN (2017), Tier 3 supports must actively engage both students and families. School-based clinicians collaborate with families to address concerns, develop a plan for support, and regularly gather input on how they feel their child is doing. Interventions are designed keeping potential parental stressors and challenges in mind, and there is an easily accessible system for providing feedback to the school-based clinician. Additionally, intensive, trauma-informed, school-based supports involve consultation between school staff and wrap-around services (NCTSN, 2017). Partnerships are actively sought with outside service providers and community agencies where students may access services, such as child welfare and residential settings, justice settings, or law enforcement settings.

## 4.2 | Addressing academic skills

While responding to the social/emotional and behavioral implications of the pandemic will be critical as students return, it will also be of the utmost importance to address potential academic skills deficits. The quantity and quality of the virtual education in which students participated in will vary considerably. Furthermore, individual students in a classroom will vary in how much they accessed from the virtual education environment. In addition, the potential for students to have experienced adverse childhood events in their home environment was also magnified during this crisis, which may impact their ability to have retained information covered during this period. This situation will be similar to the return from summer break except that for some students the academic break will have been significantly longer than the typical summer break. Almost forty years of research on the “summer setback” has indicated that it disproportionately impacts students with disabilities and students from culturally and linguistically diverse backgrounds (Johnston et al., 2015). Reading achievement is more impacted than math achievement (Allington & McGill-Franzen, 2003) and students from high SES families actually demonstrate reading gains over the summer (McCoach et al., 2006). It is likely that students from high SES backgrounds will have had greater access to educational opportunities both virtually and through home-based enrichment so may not experience the same level of “COVID setback.”

### 4.2.1 | Universal practices

It is essential that educators do not make assumptions about the academic gains or setbacks made by children during times of school closure. The importance of collecting extensive data regarding students' academic abilities will be essential as children return to school. This will be particularly important for elementary school-age children who are learning fundamental academic skills that serve as the foundation of their schooling. It will also be important for sequential disciplines such as mathematics where an understanding of prior concepts is essential to move forward. Districts will need to gather universal screening data beyond typical short, curriculum-based measurement prompts to assess where students are performing with respect to grade-level standards. At the minimum, schools should use prompts from the previous grade-level, but it is recommended that they engage in broader formative assessment strategies. This may include having students complete post-tests from their prior grade's curriculum to determine if they are returning to school with any knowledge and/or skill gaps.

As noted in the previous section, it is likely that a higher proportion of students than is typical will be found to need additional support when returning to school, thus additional interventions at the Tier 1 or universal level may be needed. In some classrooms, this may necessitate reviewing portions of the previous years' curriculum before moving on to new concepts, or integrating a review of key concepts into ongoing instruction. For students who are on grade level, this may require the use of curriculum compacting (Reis et al., 1998) or other differentiation



strategies (Tomlinson, 1999) to keep these students engaged while the remainder of the class reviews this material. This also leads to the suggestion that schools consider utilizing flexible grouping patterns across classrooms, especially at the elementary level (Hoffman, 2002). Students with similar abilities in a subject can be grouped together to make it easier for the teacher to plan lessons that meet their learning needs. In conjunction with flexible grouping, differentiation will be essential to keep all learners engaged.

It is also likely that a number of schools will return to some form of virtual education again in the near future. This may require teachers to utilize the principles of universal design when developing online lessons. The concept of universal design in education is to develop instruction so it is as accessible as possible for all students (Hall et al., 2003). Practically, this involves providing common accommodations to all students including multiple ways of presenting information, multiple ways for students to engage with instructional materials, and multiple ways for students to demonstrate their understanding of material. For a comprehensive discussion of implementing a universal design framework to support students, please see Minkos and Maykel (2019). The major lesson from this pandemic is likely that a “one size fits all” approach to education is not efficient, effective, or sustainable. The universal design for learning framework provides a valuable approach in supporting students' highly varied needs during this unusual time.

## 4.2.2 | Targeted and intensive practices

Within the context of the pandemic, it will be especially important to quickly and efficiently identify students in need of targeted, Tier 2 interventions to address academic skill deficits. Regular analysis of universal screening data will be important in facilitating this process, as will selecting appropriate cut scores to identify students in need of additional support. Because more students will be returning to school with skill deficits, cut scores may need to be adjusted in comparison to before the pandemic. For example, if the majority of students present with skill deficits in a particular area, those gaps would be most feasibly addressed through modifications and additions to universal, Tier 1 supports rather than providing small group, targeted intervention to large numbers of students. Therefore, cut scores may need to be decreased as appropriate so that resources may be prioritized for the lowest performing, at-risk students.

Educators will need to use additional diagnostic assessment data as needed to connect students with appropriate, evidence-based interventions to address specific areas in need of support. Valid and reliable progress monitoring measures will need to be used and analyzed at regular intervals to evaluate student growth and to inform modifications to interventions when necessary. Establishing and implementing decision-making rules will help to facilitate this process and will be important in determining when a student may be in need of intensive, Tier 3 supports.

Much like intensive social-emotional supports, Tier 3 academic supports involve adapting evidence-based interventions to meet the specific needs of individual students. Tier 3 interventions are typically provided more frequently than Tier 2 interventions and often in a 1:1 setting. Similar to Tier 2, progress monitoring measures are used regularly to assess student growth and inform modifications to interventions. Decision-making rules help to increase the efficiency of the process. The National Center on Intensive Intervention has a variety of resources that can be valuable in establishing and refining MTSS practices to support academics, such as summary charts of evidence-based interventions and progress monitoring tools, as well as professional learning resources on data-based individualization of interventions (see <https://intensiveintervention.org/>).

## 5 | CONCLUSION

The social-emotional, behavioral, and academic impacts of the COVID-19 pandemic will vary between and within districts, schools, and classrooms. Educators should be commended for the abrupt shift to virtual education that

was accomplished at the onset of the pandemic and the creative problem solving that they utilized. While lessons will be learned from the process, educators will need to continue to demonstrate flexibility, adaptation, and dedication to their students' well-being once schools reopen while also coping with their own personal stressors. Regular education will have to adapt to the unique needs of this unprecedented return to school and provide more intensive social-emotional, behavioral, and academic supports than is typical to all students. Additionally, more students may require a range of targeted or intensive supports to adequately address increased social-emotional and academic needs.

While the COVID-19 pandemic presents its fair share of challenges, it also presents opportunity for reflection and growth. Educators can use this time to examine and build upon existing systems and practices to address complex academic and behavioral needs more efficiently and effectively. If schools are successful in using this time to strengthen skills and practices related to addressing a variety of student needs, lessons learned from this challenging time could potentially be useful in addressing achievement gaps in a meaningful way long-term. The support of administrators, school psychologists, and other support staff will be required to successfully navigate this. The suggestions in this article provide a beginning blueprint of how school personnel can approach this challenging time. Each school and classroom will be facing unique challenges, and school personnel will need to flexibly adapt to the needs of their students. While the immediate future is currently uncertain, eventually normalcy will return. When that time comes, schools and educators across the country will have become more resilient and adept at navigating complex and challenging situations.

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