Korina Barry (00:00):

Boozhoo/hello everyone. This is Korina Barry. Today. I'm speaking with you with a heavy heart from Minneapolis, which is home. We at CASCW want to be intentional about the space that we take up right now. And we also want to be a resource it's a delicate balance while we recorded today's episode with Dr. Anne Gearity a week or so ago, with the primary focus on how adults can support children and youth, as they navigate stress and trauma in a pandemic, we also realized this information may feel helpful as we navigate an added level of grief and pain following the murder of George Floyd. We hope you find Dr. Gearity's tips and tools for addressing trauma, self regulation, and nurturing resilience helpful during this time. Please be well. Take care. And fight for justice.

Korina Barry (<u>01:28</u>):

This morning I am talking with Anne Gearity, a professor at the university of Minnesota. And how are you doing?

Dr. Anne Gearity (<u>01:35</u>):

I'm doing okay.

Korina Barry (<u>01:36</u>):

Could you share a little bit more about yourself and your work?

Dr. Anne Gearity (<u>01:39</u>):

So I've been a clinical social worker forever, and I am at the Department of Psychiatry now, but most of my time is spent in mental health in the community. So for the last eight weeks, I've been talking to people on zoom and I'm particularly interested in young children and their families and how they are managing these very hard times.

Korina Barry (<u>02:05</u>):

And how are you yourself adjusting to all of the changes? I know you said you're doing lots of work via zoom, which is very different, but even just navigating life at home and are there different ways you're taking care of yourself during this time?

Dr. Anne Gearity (<u>02:20</u>):

Um, this is a very, very odd time. I find time. Even the word time is so difficult. I was just talking to someone and we were saying that we don't have any of the usual signifiers that we count on to kind of Mark weekday and weekend. And I can't tell if I've been doing this for, you know, weeks or months. So I think most of the way I'm taking care of myself is trying not to think too far ahead. I sort of go into a week and thinking I'll do this this week. And it's hard to think of how long we'll have to do this and what else we can do to manage. This is a new world as new and different in so ways. Yeah. One of the most impressive things about COVID is that everybody's experiencing it, it's happening to all of us. So I can't think of a community event that is so engulfing and also preoccupying this long.

Dr. Anne Gearity (03:15):

There hasn't been, but this idea that we're all in it together, um, sounds tried sometimes, but there's some really valid, um, truth to that. We're all trying to figure this out. And certainly some of us have much more resources than others. Um, but this is hard. That is, so your work has shifted to working

from home and you're continuing that work via zoom, which is very different and still connecting with children and families. I'm wondering if you could share with us, what concerns do you have for children who are actively, you know, experiencing trauma during this time and even just children who may be reexperiencing trauma right now that maybe there are triggers or other things happening with kiddos that are at home, you know, and not in school right now during the pandemic. Yeah. Well, a couple of things. One is that for lots of children, I think being home and being with family and not having parents have to go to work and they're having a more, um, a less stressful time if their parents can be supportive.

Dr. Anne Gearity (<u>04:21</u>):

So one of the messages and I'm very actively giving to families, as much as I can is your job is to really help your child manage this crisis. Traumas are always about events that overwhelmed children, and it's only a trauma. If you're overwhelmed and can't pull resources in. So when parents are able to help their children manage, it, doesn't have to be a trauma. And one of the very practical things I'm saying to parents all the time is you can't stay mad at your children. You can get mad, they can get mad really quickly, but then you have to move on and you have to figure out how to help your children. You cannot stay mad at your children cause staying mad and having a grudge during COVID can make this isolation or trauma, staying connected and supportive can help your children manage this adversity for all of us.

Dr. Anne Gearity (<u>05:16</u>):

You know, again, this is something we all have to share. It's nobody's fault. And parents really have to pay attention to that for kids who have been traumatized, um, you know, things can be retraumatizing when the feeling of powerlessness returns and what makes children feel most powerless is when they don't have adult support. So message to everyone in child welfare, make sure the adults are supportive. Um, I had a case recently where a board was really getting upset cause he wanted to go out and see his friends. And the mom was able to shift from getting mad at him to saying, I know what you mean. I want to see my friends too. I saw miss my friends and then the two of them could commiserate over a shared experience. There's no place for power struggles during COVID. They are just not useful. And that's what parents have to do is figure out how to get out of the power struggle and stay connected to their kids so that we can show our kids out. I don't know that COVID will become a trauma because we're all in it, but it will become traumatic if kids feel too alone and too strange from the adults in their lives. So that's the number one message.

Korina Barry (<u>06:32</u>):

Yeah. And we'll come back to parents, and thinking of the child welfare workers and frontline child welfare professionals that are continuing to support families during this time are doing this work through video conferencing. And sometimes in some of our more high risk cases are still going out into the home in person. And so related to what you're saying, as far as, I mean, and sometimes two social workers are the stable adult in many children's lives who are in the foster care system, right? And so they may be serving multiple roles here. I'm just wondering if you have any advice for those individuals, those frontline workers supporting kids right now and in the pandemic, supporting parents and caregivers.

Dr. Anne Gearity (<u>07:20</u>):

So, so when there's adversity, this is where the word resilience comes in. When there's adversity, our bodies have an option to collapse or to keep going. And resilience is the experience of learning and growing even in adversity. So we want to really be thinking about how do we help children stay

resilient? And my second best advice is blame it on COVID, right. We really want to say to kids when they're having a grumpy day or when they're, you know, falling apart or when they're having emotions or feeling too big, we want to say, this is about COVID. No wonder you're feeling grumpy. This is about that. This is what happens when we have something this hard and by blaming it on COVID, I'm really helping the child not blame it on themselves. Right? The second thing that makes a trauma is that the child feels confused.

Dr. Anne Gearity (08:16):

And so they end up feeling afraid and alone and they internalize that. So it becomes my fault or it becomes I'm the bad person. I'm the kid who's having, you know, tantrums. Instead of saying, everybody feels terrible when there's COVID. And let me help you find a way to feel terrible, that isn't about smashing things or let me help you find a way to feel scared so that you don't have to make a mess or your feelings don't have to get so big. So traumas one term resilience is a second term. And my third favorite term is regulation. So what I'm saying to all the people that I consult with is that mental health support child welfare support is all about helping children stay regulated during COVID and regulated is how do I keep my balance in the face of very difficult events? How do I feel?

Dr. Anne Gearity (<u>09:13</u>):

Okay. So I don't have to feel so frightened all the time. And that's what regulation is. So that's what our work really has to be about. How do we help kids learn to stay more regulated? It could be that some kids come out of this experience stronger cause they went into it. And that's, that's a really helpful idea. Some kids could come out thinking, not that their lives are, are difficult or that, you know, they are their families let them down or that their families don't work. They could come out thinking we did it somehow we managed. And that could be a really positive thing. But I think the adults have to have that mindset. They have to be thinking not about what's wrong with the kid, but what's hard for the kid. That's a big shift. What's hard for the kid right now. And how do I shore up that kid so that she can have a feeling I'm doing it.

Korina Barry (10:07):

Yeah. And for folks who are listening and maybe don't know, or resilience is still a new concept for them, could you just briefly share a little define resilience a little more?

Dr. Anne Gearity (10:20):

Okay. So resilience is just the word that means, um, I managed, you know, I stayed above water. We used to think that maybe that was something that some people had and other people didn't and the research is pretty solid. That it's an earned experience. So every time I find something hard and I manage and rise above it, over comment, um, master it, I'm a little more resilient. And every time I find something hard and I collapse and fall apart, I'm a little less resilient. We know that some kids have many, many more risks than others that make them, uh, make managing more challenging. But we also know that one of the best protections for children to stay resilient or keep learning is having adults who are kind and supportive and patient and see children as struggling to learn rather than being bad or being difficult to being disobedient.

Dr. Anne Gearity (<u>11:23</u>):

So a lot of resilience is based on helping people keep learning. Now what makes COVID so interesting as none of us have ever had to do this before. So you ask, how am I managing every day? I'm learning more

about myself, how I manage every day. I discover, you know what? I need to make it a day and I'm in a learning mode. So I don't just do my day. I'm also thinking about my day. I'm thinking, what made me tired today? What was today? There's a kind of playback that allows me to learn. And that's what we want for children. We want them to be thinking about how did I get through today and thinking I got through, I've made it, you know, I want parents every night to congratulate their kids for making it so another COVID day. So let's, let's talk about some tools that parents can use to help their children be more resilient.

Dr. Anne Gearity (<u>12:19</u>):

So the number one tool is if they're kind to their children, their children will stay kind to them. That's the number one tool. We don't want siblings fighting and it's going to happen, but we don't want that to be the pattern. We want to create environments where we're in this together and that idea that we're in this together and that we can forgive each other for these, you know, bursts of frustration or irritability is really important because then we're saying to children, this is Colvin and this is hard and we can do this. So that's number one. The second tool is one of my favorite phrases is learning make you feel better. And right now every place is a classroom. Children are going to be bored. They are so bored. Children are not meant to not be seeing friends, not doing activities. So parents really need to think about how their children are learning.

Dr. Anne Gearity (<u>13:15</u>):

Now children can learn doing laundry. Children can learn helping cook. Children can practice math by measuring out ingredients. So parents have to think about, you know, it's almost like little house on the Prairie days where everything is, has to be about learning, not in a mean instructive way, but in an exploring way. I want children to be engaged in what they're doing. So they're not bored. And thinking about what can we learn? One colleague talked about going on a walk every day was her son. And they just do a different part of the block and they, they call it a discovery walk and they look for things they have noticed before. And then they write them down. I mean, that's a really easy task. I know some families are worried about even going out, but as it gets a little warmer, we can just take small adventures and then get kids to talk about what we saw so that you're using your senses.

Dr. Anne Gearity (14:13):

Um, so that's a learning thing. A third tool that parents can have is really encouraging their children to talk. We're going to move to day treatment on zoom. And this is really hard and we're all struggling with how we do it because so much of helping children with regulation, being with them physically, but we have to help them use words. So if parents can value children's words and again, be kind because sometimes the words will come out and they won't be pretty words. And there'll be frustrated words, but instead of getting mad at kids, if they can say, tell me what you tell me with your words, what it's like for you, tell me was your words what's happening to you. Words are incredibly regulating. And many of our Mo my most challenged kids have very little ability to use words. And when they use words, they tend to use repetitive curses.

Dr. Anne Gearity (<u>15:13</u>):

But I have to hear below that and say, ah, you're telling me how hard it is. Let's talk more because again, we're in sort of regulating. So that's the third tool. The fourth tool is I think parents have to be really kind to themselves. So I know internet use it's up. Kids are watching too much TV. Kids are on their iPad, so their Chromebooks too much. And you just gotta be kind to yourself instead of fighting about what

are you watching? Just sit with your kids and watch it with them. You know? Cause if you're watching a TV show with them, you'll talk to them and then it won't be just staring at the screen. It's actually an interaction I'm worried for parents. You know, they're bored, they're overwhelmed. They're anxious about what will happen to trying to work at home, some of them. So, um, I want to be really kind to parents too, and not expect extraordinary interactions, just everyday interaction.

Dr. Anne Gearity (16:12):

Thank you. That was really great. And I'm thinking about those parents, those caregivers who are tired, who are challenged, who are frustrated in many moments and just being able to see each other, oftentimes in many parents via zoom every day and just kind of seeing it in action, right? Like they are maybe working while also managing the distance learning right next to them. And everyone's struggling in the house. Is there any additional advice you would give to those parents and caregivers during those toughest of moments? Like what does that look like in taking care of each other? Right? There is the phrase taking care of each other. So if COVID's teaching us anything, it says the family unit is the primary unit of experience, because the thing family is in charge of taking care of each other. T.

Dr. Anne Gearity (17:05):

hat's your operative word. So when parents get frustrated and they want to lash out at their kids, it's often because they are frustrated and they're feeling overwhelmed. And then I can blame my kid and we all do it. Right? We exploded our kid because he's making noises or he dropped, you know, something on the floor or he's making it hard for me to do what I want. And same with anger. I can blame my kids for a minute and then I have to change, right? I can't blame the people I love so I can be mad or I can be frustrated for a minute. And then I got to regulate that I got to walk into another room. I got to get a glass of water. I got to pretend that I have to go to the bathroom.

Dr. Anne Gearity (17:55):

I have to go away. And we regulate myself. I have to say, this is my kid. And my job is to protect my kid. And if I want to smash my kid right now, I'm not doing my job. So we have to interrupt what has become a societal pattern, which is I'm allowed to be so mad at my kid. And I can't do that during COVID. I really can't. So for parents who grew up with angry parents, whose nature has been to get mad out, we got to learn to do something different. We all got count 20 or 30 or 40 because we can't survive COVID if we're furious with each other. We can't survive COVID if we're hurting each other. And that's asking a lot of people to do. I know that, but COVID is extraordinary. Maybe we can actually change how we relate to our kids during this time.

Dr. Anne Gearity (18:56):

And maybe we'll all get more resilient. And I think some people are doing it, I think because it's not the stress of school because it's not the stress of racing around. I think people are being more kind to their kids and that would be resilient if we could come out of that with some awareness that we can parent differently, that would be an incredible achievement. That's my hope. And I know that the population you're talking about are the families with the least resources. I don't want to be Pollyanna-ish. I know living in an apartment with three rooms and two kids is really hard. I know that people and limited space it's really hard to get away, but that's what we're trying to rediscover. How do we sooth our kids? You know, I think of, I think of olden times when people were really frightened and they'd sing the whole culture of music because people would sing. And the reason you're saying is that you can't stay mad

when you're singing. So maybe another tool is we should all sing. We should all sit more, but we have to find ways not to be mad at our kids.

Dr. Anne Gearity (<u>20:12</u>):

And you know, this is well, I'm one, I love the singing piece just cause I know singing videos, I'm not a good singer myself, but like listening to others, seeing, and just when, how we've seen around the world, ways communities are doing that. And it, it brings immediate joy and smiles to our so, so yeah, and I think we, you know, only sing with kids, you know, you, can't not connect as we're singing. There's something about that. I, I haven't thought of that until this moment, but maybe that's one of our tools we should see more. And, and I'm thinking too, of right.

Korina Barry (20:46):

So being a social worker myself and previously working in direct practice, um, my social network, my immediate network is a lot of social workers. And, and of course in my work as well, still staying connected with workers who are on the front lines and continuing to do the really, you know, the already challenging work of child welfare. And then I'm seeing many of them doing well and doing their best. And I'm seeing many of them struggling while doing their best and sharing and being very vulnerable and saying like, I am home working from home. I have my kiddos at home and I'm managing that layer. Then I'm also doing this very challenging work where I am still having to do child abuse, maltreatment investigations, you know, so they have this layered, these layers of stress and trauma and worry. And I'm seeing some of them feel like they're losing more hope each day. And they're just kind of feeling really broken down, which I imagine then gives them even more fear of what then the kind of parent they're able to be to their own kiddos and how they're showing up for their own family. You've already given such great advice and tips, but knowing that specific kind of layer that some of our frontline professionals are, are dealing with. Do you have any additional thoughts or advice for them?

Dr. Anne Gearity (<u>22:11</u>):

I do. I have a couple of thoughts. Um, you know, I've been in this long enough, this work that, um, I have some memories of when child welfare was different. So back in the seventies, even before we had the mandated reporting laws, I think social workers were allowed to be a lot more supportive. And we looked at families as struggling and we weren't so focused on bad behavior of parents. And I think call that forces us back to that. I think workers, even though they're investigating, they need to be investigating how the family is falling apart and hopefully they can be really and pass it to the parent. You know, we've shifted to thinking, we need to keep families more intact and that's what we have to do right now. But to keep families intact, I have to be so kind to the parent and then demand that the parent be as kind to their kid. So that changes how I investigate.

Dr. Anne Gearity (<u>23:13</u>):

It really changes how I go into a family and what my attitude. Um, I've always thought that. And I remember talking to as to what for years and years about this work, that a small percentage of parents are intentionally malicious to their kids. And more often parents are overwhelmed and, and yet our investigations has kind of blurred that. So my first advice would be really make sure what's going on by asking parent, to be honest with you, how overwhelmed are they? What do they need? What are the struggles that they're having? Because I think their parents often who are scared themselves and then they blame their kids, right? We have to identify those who want to hurt their kids really fast. And we

have to get in really quickly. But if my intention is not to hurt my kid, but in being overwhelmed, that's what happens.

Dr. Anne Gearity (<u>24:10</u>):

We've got to approach it differently. So that's number one. The second thought I have is that, um, I think asking parents to think about their behaviors as affecting parenting, I've always thought in child welfare, we need to separate out what parents do and how they parent, you know, we know that parents who are using drugs can still parents. Sometimes if we heighten that idea of parent capacity and doing COVID, we're really saying you have to take care of your kids first. So if you're gonna slip and, and use drugs, you got to make sure your kids are safe. And you got to figure out how to take care of your kids so that you buffer them from what you need at that point. And I think really being direct with parents about how do you keep your kids safe? We've, you know, we've talked over the years that child protection has kind of lost the focus on protecting kids.

Dr. Anne Gearity (<u>25:12</u>):

And it urgently because we're so focused on if the parents have done something wrong and right now we need to be back to sing. The first sentence is how are you taking care of your kids? Can you take care of your kids? Are you at a point where you can't take care of your kids? And if that's the case, then let us help you make sure your kids are safe. And, and what the parent is doing is almost secondary to what you do, taking care of your kids. Now, the third thing is I am so admiring of parents, I have never had to parent under the circumstances. So I'm always humbled when I give advice, because I don't know how I be doing. And I think for the workers who are trying to parent and do the work, you know, really thinking about, um, uh, how I can be available part of the day.

Dr. Anne Gearity (26:04):

Um, I hope the organizations are really consciously saying you're on for zoom these hours. And then you do your paperwork these hours. So that parents have time that they feel like they can be with their children. Um, you know, we can do paperwork at 10 o'clock at night, but they gotta have that permission. They cannot be on all eight hours. They have to be able to multitask and to do these calls, you gotta be able to know that someone else is watching your kids. We just got to be realistic. So we're changing how we work. I think saying to our kids, this is my job. And right now I have to be quiet. And can you play while I do? My job is one of the best tools that parents can use. Again, the words when children know that it's not about them, they can function differently.

Dr. Anne Gearity (<u>26:59</u>):

If they think it's about you and them, then they personalize it. I remember one of the hardest moments of my life, wasn't in my daughter asked me why I went to work and I gave her a very lofty explanation. And she said, I think it's because she don't like to be with me. And I thought I'd die, but that's what four year olds think. You know, that's what preschoolers think. They think that if you're doing something, it's because you don't want to be with them. So when you say I have to do my work, and this is my work, and when I do my work, then I get money so that we can buy our food. So right now your job is to play. So I can do my work that helps kids manage. I think we have to be very honest with our kids.

Dr. Anne Gearity (27:45):

Um, I think we have to say to our kids, my work is really hard. So I'm going to be in the bedroom, doing my work. And at 12 o'clock, my work will be done and then I'll come out, we'll make lunch and we'll do

something that allows school aged kids to manage without you for awhile. Cause they get it. You know, I think saying to our kids, if work is hard, my work is really hard. So I need to just sit for a couple of minutes so I can let my hard work, leave my mind. And then my other work come into my mind. And can you let me just have a cup of tea? And I'm going to really try to regulate my feeling. So my hard work leaves and my other feelings can come in. That helps kids. Cause they can see you struggling.

Dr. Anne Gearity (28:33):

Right? I don't want to work as to feel hopeless. I'm not hopeless. I'm surprised at how well zoom is working. I feel like I'm doing better work with some of my clients now than I've been doing in the office because I am. Single-minded all we're talking about is how you're doing COVID and when they're not doing COVID, then I'm going into the work of what makes it hard for you to manage right now. And I'm pulling the past into the present instead of exploring their stories. I'm saying, Oh, that's the story. But that was when you were a little bit, look at now, you can do it. And I'm finding that a lot of people are actually managing better than I would expect. So that's why I liked resilience. Maybe, maybe we'll all learn something from this, but I don't want your work as to lose hope.

Dr. Anne Gearity (29:24):

I hope they're not. I don't want to convey to our parents that we feel hopeless about them. I want us to have resources. I want us to make sure that homeless families are having someplace to be safe. That families are able to get food. I want us to make sure that, you know, we're as a community, recognizing that some people are so much more vulnerable. I want families not to be so worried about making their skids do schoolwork. I want teachers to be calling up kids entertaining kids so that parents can get a little bit of a break. I want us to feel like we're a community, but I don't want to work to feel hopeless. This is really hard. And I think if we all acknowledged that this is really hard and we'll get creative about supporting each other.

Korina Barry (<u>30:18</u>):

Communication and using our words has been kind of a big theme. And, and, uh, we'll go back to that a lot in this conversation. I'm also thinking a lot about our older youth and our youth who are able to use their words, right? They're at a point in their development where they're navigating different ways of communicating and some of them may be home with their families and there may be tension. And they're communicating that to each other. You know, that both ways, maybe an unhealthy ways or there's our youth who are in situations where maybe they're not safe and they're not sure how to communicate that or where to go. And so it's kind of two parts, but I wonder, I just think about that age group. And if you have any..

Dr. Anne Gearity (<u>31:03</u>):

I think the, I think you're absolutely right. I'm most worried, heard about our teenagers. Cause this is so against development to be locked away with your family. You know, I hear parents saying, I just wanted to take the car and go for a drive because he shouldn't be around his family so much. Or I just wanted to go for a walk cause this isn't natural to have to be locked in with your family. Teenagers are thinking future orientation. They're thinking, how do I leave my family? Right? That's their job. So this is so hard on the teenagers, I think much harder than anyone else. Um, and I think what we need to do is again, say to parents, don't make this about you. When your kid is frustrated, don't make it about you. Don't get into a fight. This isn't about you. This is your time to remember when you were a teenager and think about how hard it is for her and then, and then empathize with her.

Dr. Anne Gearity (32:03):

Alright, don't get into these stupid fights. Don't fight about what bedtime is don't fight about. Should you change your shirt? Don't fight about taking a shower, just identify this is hard and help your kid to problem solve. What would make her feel better? That's the role of parents right now with teenagers? What could you do that would make you feel better? Um, one of the reasons I'm so concerned about encouraging teachers to enrich and entertain their students is because our teenagers have to figure out how to use their minds this summer. How to plan ahead, how to think about what they want to do. And Colbert's over how to use my imagination to think about, you know, when I can get out of this, what I can do. So we got to really support our teenagers to be not thinking about being compliant, but thinking about being creative and imaginative and think about, you know, what the world wants is going to look like, think about things that they're passionate about.

Dr. Anne Gearity (33:07):

Not compliance, no place for compliance right now, right? This is not about compliance. We as a culture have left kids down, not because we intend to because this happened. So we got to stay really invested in helping them be resilient and getting through it. And that's going to be by energy and creativity. Now our youth that are in dangerous situations, again, they gotta use their minds. We've two long solved things by mechanically fixing things. We've got to go back to psychologically fixing things. So when kids are in dangerous situations, they gotta find a way to pull themselves out of a room. They've got to find ways to not provoke an angry mentally ill parent. They've got to find ways to not make it about them. They've got to be able to say, that's my mom. My mom is having a really hard time right now.

Dr. Anne Gearity (<u>34:04</u>):

So I'm going to do the opposite instead of fighting her, which is how we've always interacted. I I'm gonna, I'm gonna walk away. I'm gonna take a shower for 30 minutes. I'm going to cool down. We've got a health and this is again, our workers have got to help our youth really assess their situations honestly, and not assign blame, but assign reality. You know, if I'm a team living with an alcoholic parent, I gotta be able to say, when my dad starts to drink, I know I've got to get my sister and brother, we've got to go watch a movie, right? We've got to give people resources that are about using their minds. So that's the other message to workers is let's go back to our social work basics. Let's remember how we know people cope and let's really value internal resources, not just external resources, right? We all have internal resources. When this first started, I was reading a book about the first year of, um, the world war two in London. And I think I chose it because I needed to read something about how did people get through an unbearable situation and you know, people manage their lives. And when danger came, they had to, you know, change how they coped. And so we had models of extraordinary endurance and extraordinary. Um, again, creativity, we just need to give people permission to use their own minds.

Dr. Anne Gearity (<u>35:40</u>):

Nobody's got an answer for COVID and I really love the, this idea of our internal resources, right? I think especially as social workers, like, you know, like we are the holder of lots of resources and sometimes we are not gentle with ourselves and struggled to tap into our own internal resources or just for every norm, every human right. And just remembering what the capacity that we have and that we have skills and we have resources within us to take care and really tough moments. And I think, I don't know, there's something about this pandemic too, that everything feels so overwhelming and in moments, and it feels like hard to think of what the next, what to do in that next moment. And so being able to take a breath and just kind of like, you know, take it moment by moment. And so related to the internal

resources for folks who are like, that sounds great. I love it. How do I dig in more? Do you off the top of your head? I don't know if you have any suggestions for places. People could go to kind of dig into that a little more like resources and tips on how do I, how do I do some of that internal tap into some of that internal work?

Dr. Anne Gearity (<u>36:53</u>):

So maybe you can find it posted, Mary Harrison over at the CEED Institute, she just posted a article on reflection and reflective practice. And she quoted one of the leaders in infant mental health, who said, it's not what you do, but how you are that often makes the difference. So that question, how are you is really important? I mentioned that parents should say to their kids, how are you doing well, we need to do that to ourselves too, because it's not an empty question. It actually is what triggers that internal resource inventory, if you will, how am I doing? And then I think about, you know, how I am and that's where creativity comes from. Cause I think about how I'm doing and I, if I'm lucky I can think about what I can do differently or what else I can do. So that would be a resource I'll send you Korina by email of book that someone just told me about that was written about for children about COVID and it's an online resource and people might find that helpful.

Dr. Anne Gearity (<u>37:58</u>):

I think people are trying to get together to find ways that we can, um, we can organize, you know, our responses collectively. I think you'd go online and there's just a ton of stuff. MACMH (Minnesota Association for Children's Mental Health). We did a webinar a few weeks ago about how to get beyond our shock and cold that I can't remember the title of it, but it was it's listed in someone just wrote to me yesterday and it said 3000 hits. So people are, they let put it on the it's a downloadable zoom. And so take a at that. And, and w you know, especially workers, you know, if you consume something, you can read it together and then have a, have a zoom discussion and talk about it. I noticed that the film society is making the love than first movie available this week, this weekend. And that's the documentary about Lucy Laney school in North Minneapolis. And, you know, that's sort of really, really moving movie and you want to cry a lot. So, but it conveys again, that same message. How do we, how do we take care of our kids first? How do we love them first? And then teach them how to do their chores? And I think that, you know, sometimes just watching something makes you feel better. So those are the things that come to me right off my head.

Korina Barry (<u>39:22</u>):

Yeah. And we'll for sure link to those and the description and on the podcast landing page. And I also love that you mentioned Mary because we partner with Mary Harrison over at the center for early education and development, and have been working on this year, lots of new resources related to a reflective supervision and consultation. And they're just doing really great work around infant and early childhood development. And so we'll do back to that, to our listeners, and we'll be sharing more about that.

Dr. Anne Gearity (<u>39:51</u>):

Um, so, so you know, the sentence that I love the most for children right now is tell me what's happening for you. And then parents have to listen, right? Tell me what's happening for you. Cause I, I think once you start listening to your children, they will feel better. You know, we have that word validate, which is a big part of resilience. You don't have to fix the feelings, but you have to validate them. You have to listen to them. And often we get so fast trying to tell children, want to do or how to

fix or how to be different. And right now we have to listen to each other. That's a good last thought, tell me what's happening to you. We should do it to our partners too.

Dr. Anne Gearity (<u>40:32</u>):

We should do it to each other. Tell me what's happening to you right now. I know people are just having, I have no idea how zoom manages all of us using it so much, but you know, families are getting together by zoom. And they're just talking about, you know, tell, tell us what's happening to your week. And it helps. And even as I say, that I'm humbled because many of our child welfare families don't have phones and they don't have computers and they don't have resources that we're, we're taking for granted. A friend of mine said, imagine if this happened 10 years ago, but I know some of our most challenged families are really not having some of these resources. So that's the other thing we have to think about how do we have people, you know, be creative about their resources? How do we get the resources to them? "Tell me what's happening to you" takes no resources.

Korina Barry (<u>41:26</u>):

That's such a good reminder. And I see it to be true in my, and me navigating everyday. Like just the texts or the occasional message, or like you said, on a zoom, like, how are you doing like mental health check-ins reminders of we're all in different places. And that's okay. We can all be struggling and we can have great days, like this is all new territory for us and we're going to get through it.

Dr. Anne Gearity (<u>41:51</u>):

Yeah. And when we say, when you say to a colleague, tell me how you are and the colleague burst into tears and says how hard it is, just sit with it. We don't have to fix it. That's the other thing we're learning. I don't know how we're going to get out of COVID. I don't know what the summer's going to be. Like I can't even contemplate it somedays cause it makes me too anxious. But if I can just sit with whatever I feel today, it passes. You know, one of the things we need to learn about emotions is that they, they have energy that lasts about 90 seconds and anything more is just, it's kind of a grudge or a lingering residual. But if we could all get better at just holding each other's emotions and I think child welfare workers, that's, that's a new skill to say to a mother, tell me what's happening to you and not feel like you have to, you know, rush in and fix. Like you said, we're all stuck in our homes.

Korina Barry (<u>42:52</u>):

Thank you so much. And I really appreciate all of those good thoughts. Some of those simple suggestions that really pull us back to, you know, tapping into those internal resources where we don't have to do a lot of extra work to take care of ourselves.

Korina Barry (<u>43:11</u>):

This podcast was brought to you by the Center for Advanced Studies in Child Welfare. This podcast was produced by Korina Barry. Our series editors were Denise Cooper and Cliff Dahlberg. Music was composed by Big Cats. And this podcast was supported in part by a grant from the Minnesota Department of Human Services, Children and Family Services Division. For more information, please visit the CASCW website at cascw.umn.edu. Thank you for listening and stay well, everyone.