Toward a New Community of Care: Best Practices for Educators and Administrators During the COVID-19 Pandemic

Cody M. Clemens and Tomeka M. Robinson

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Abstract: The onset of COVID-19 left people feeling unsettled, confused, and afraid of what tomorrow may hold. As university professors specializing in health communication, we too were left with these same feelings. As health communication scholars, we focus on issues surrounding illness, risk, crisis, care, health inequities, and wellness. COVID-19 is a health crisis, yes, but it has also changed the way we operate not only in higher education but in daily life. We begin this essay with an overview of COVID-19 and its impact on students, educators, and administrators. Then, we suggest four best practices to foster a community of care in the classroom during and beyond the COVID-19 pandemic.

According to the Centers for Disease Control and Prevention (CDC) (2021), "a novel coronavirus is a new coronavirus that has not been previously identified" (n.p.). Normally, coronaviruses cause mild illness and symptoms usually associated with the common cold. COVID-19 is a highly infectious disease where most people experience mild to moderate respiratory illness without requiring special treatment. The virus is spread through droplets of saliva or discharge from the nose when an infected person sneezes or coughs (CDC, 2021). In early 2020, people across the globe felt uneasy and afraid when the Director-General of the World Health Organization, Dr. Tedros Adhanom Ghebreyesus, transformed a novel coronavirus into COVID-19 with his tweet (Twitter, 2020). Dr. Ghebreyesus made COVID-19 real, he gave it life, and whether they wanted to or not, people had to embrace this new term.

Cody M. Clemens, Marietta College, Marietta, OH
Tomeka M. Robinson, Hofstra University, Hempstead, NY

CONTACT: cmc004@marietta.edu

As university professors of health communication, we quickly began to realize things were about to change dramatically within educational institutions. Although our primary mission of educating young minds would not change, the vision for executing our mission was going to be drastically redesigned. New COVID-19 policies initially forced all educators to transform into virtual modalities to complete the spring semester. As universities braced for the fall semester and the impact of virtual learning on retention, some institutions made the choice to offer all instruction in either a hybrid format (i.e., classes are held in person sometimes and online for others), a fully online format (synchronous or asynchronous), and some even decided to return to full-time in-person instruction.

These changes have challenged instructors to enhance our technological teaching abilities on platforms such as Zoom, WebEx, Microsoft Teams, or Google Classroom. When returning to campus, educators, students, and administrators had to adhere to new safety standards such as wearing masks, maintaining social distance, proper handwashing procedures, and even testing protocols. While these are the obvious changes in our jobs, in this essay, we discuss four best practices for educators and administrators to foster a community of care for students and fellow colleagues in the current era of COVID-19.

Best Practices for Creating a Community of Care

The year 2020 drastically changed the way in which educators operated both in and outside of the classroom. In other words, the COVID-19 pandemic triggered a plethora of crises across the globe, in the workplace, and inside educational environments. More importantly, this global health pandemic constitutes both an economic and health crisis, and it is coupled with other more common natural disasters (e.g., hurricanes, floods, wildfires, etc.) and social challenges (e.g., gender inequality, racism, poverty, etc.) (Kay, 2020; Stephens et al., 2020). To ensure educational spaces are utilized effectively, to ensure wellness of those working and existing at educational institutions, and to ensure those being educated feel valued, we developed four best practices for communication educators and administrators to foster a new community of care.

Although care, especially within a global health pandemic, is hard to quantify, Noddings (2005) asserts that the need to be taken care of is a universal characteristic. Caring requires a sense of mutuality and connection and is not accomplished without action and understanding (Chaskin & Rauner, 1995; Hayes et al., 1994). Therefore, our recommendations for best practices are as follows: (1) *employ supportive communication practices*; (2) *practice collective sensemaking*; (3) *foster inclusive pedagogical practices*; and (4) *engage in mindfulness*. As the context of this essay unfolds, we explore these four best practices more deeply.

Best Practice One: Employ Supportive Communication Practices

First, even under normal circumstances, students need educators, educators need administrators, and administrators need peers who deeply care not only about performance, but also about the well-being of one another. Research studies on caring in academic contexts argue that instructor-student relationships foster the degree to which students feel cared for and a part of the broader academic community (Osterman, 2000; Schussler & Collins, 2006). University instructors play a vital role in creating a community of care for their students because they provide the bridge between the academy and individual students (Bosworth, 1995). Moreover, the relationship between administrators and instructors is an important one, where instructors need the resources and support to engage in their work. Therefore, the need

for supportive communication practices such as social support, effective listening, and high person-centeredness are all essential to success. These supportive communicative practices have become all the more important given the circumstances administrators, educators, and students are experiencing due to COVID-19. When everyone understands that social support is available to those who need it, this communicative practice often has positive effects on learning and well-being (Faulkner et al., 2020; MacGeorge et al., 2012).

Second, online instruction poses unique challenges for fostering a community of care. When approaching online instruction, pedagogy must shift to address some of the sociocognitive needs for our students. In an effort to explore some of the challenges the COVID-19 pandemic has posed on education, Mouchantaf (2020) surveyed 300 instructors across the United States and Lebanon to better understand the advantages and disadvantages of online compared to face-to-face instruction. They found that online learning was effective in eliminating barriers while providing increased convenience, flexibility, and feedback, which was consistent with prior research on the benefits of e-learning (Ni, 2013). However, the advantages may not be fully realized if the connection between the instructor and the student is lacking. In face-to-face classes, the instructor can more easily interact with students, which can reduce attendance and work completion issues. Therefore, instructors in online environments must make an effort to reach out to students that are falling behind even in asynchronous delivery modes.

Third, listening—an interactive process between two or more people—is key to employing supportive communicative practices. According to Brinkert (2019), "listening plays an important role in all forms of learning" (p. 168). Thus, educators must be able to effectively listen to communicative messages even in online classes (Brinkert, 2019; Faulkner et al., 2020).

Finally, high person-centeredness is another way to exhibit care and concern beyond what is usually displayed. According to Bodie et al. (2012), high person-centeredness occurs when people display more care or concern than low or moderate person-centered messages. A high person-centered message allows individuals to know they are valued, feel validated about their experiences and emotions, and it invites increased engagement (Bodie et al., 2012). If educators and administrators offer social support, engage in effective listening, and offer high person-centered messages, we believe the community of care in the university will be stronger regardless of instructional modality.

Best Practice Two: Practice Collective Sensemaking

Sensemaking is a dynamic process through which individuals and groups work to understand ambiguous, oblique, or novel situations (Weick et al., 2005). Through the sensemaking process, people develop accounts of reality that interpret or explain (Maitlis, 2005). Scholars outline three moves involved in the sensemaking process: (1) noticing or perceiving cues; (2) creating interpretations of those cues; and (3) acting on those interpretations to attempt to create or restore order. Within university spaces, individuals engage in collective sensemaking as they co-construct meaning (Maitlis & Christianson, 2014; Sandberg & Tsoukas, 2014). However, we could be even more successful by enhancing coordinated action. Organizational scholars who study sensemaking point to social interaction as a vital component in this process (Balogun et al., 2015; Balogun & Johnson, 2004).

In the case of COVID-19, instructors were posed with the unique challenge of engaging in this collective sensemaking process with their students even within a computer mediated environment; however, communication scholars have the tools to talk through, listen, and more importantly help

to facilitate the construction of meaning even in crisis situations. Weick's (1979) model of organizing starts with ecological changes that can reconfigure our worlds and realities. Within this model the stages of *enactment, selection,* and *retention* can be useful for helping to make sense of the COVID-19 crisis. *Enactment* refers to the ability of actors to deal with uncertainty to gather new information and better understand their surroundings and environment. Next, these actors *select* explanations that can simplify and explain their environment. Lastly, *retention* allows for the utilization of the most viable explanation and allowing that to be preserved (Stephens et al., 2020; Weick, 1979). Thus, instructors must open dialogues about alternative perspectives for their students and administrators must make space for instructors and students to offer their perspectives and experiences. While this may require some vulnerability, thinking through alternative emotions in a crisis situation like COVID-19, affords everyone an opportunity to reimagine the world as well.

Best Practice Three: Foster Inclusive Pedagogical Practices

While COVID-19 impacted all communities, impacts were more severe among certain communities. Therefore, instructors, scholars, and administrators should engage in practices that recognize issues of difference, power, privilege, marginalized and intersecting identities, and the ways in which this has disproportionately impacted communities of color (Faulkner et al., 2020; Kay, 2020). Research shows repeatedly that across all national crises and disasters that the most disenfranchised among the U.S. population are disproportionately harmed physically, emotionally, and educationally (Fortuna et al., 2020; Kay, 2020). While systemic social determinants of health are not considered risk factors for COVID-19, they are a mediator of toxic stress (Adams et al., 2020). Therefore, the already existing sociopolitical, racial, and environmental stresses that communities of color were already experiencing and the increasing targeting of Asians and Asian-Americans in response to the outbreak only served to amplify this toxic stress.

In April 2020, the CDC reported national data on confirmed COVID-19 cases by race and ethnicity and found that Black Americans accounted for 34% of confirmed cases, even though they only account for 13% of the total U.S. population (National Center for Immunization and Respiratory Diseases & the Division of Viral Diseases, 2020). Latinx populations saw similar statistics nationwide (Chavez & Mark, 2020). While these health disparities can be attributed in part to co-morbidities, it is highly likely that other preexisting inequities such as inequities in health care access and quality, lower rates of vaccination and cancer screenings, low wage employment, environmental racism, and a myriad of others had a bigger impact. Therefore, conversations within our communities of care (the university) must include open and honest conversations about these issues.

Additionally, it has been well documented that there are some accessibility issues for students who are poor or live in rural communities. To address the issue of the digital divide for students in rural communities, Raledge et al. (2020) conducted meetings with a diverse group of rural higher education leaders and stakeholders. Two of the major suggestions they have for instructors is to make course material more mobile friendly and to reinforce a sense of community from afar. For several students, their cell phones are the only means they have for connecting to the internet. Therefore, overreliance on data rich resources like downloading PowerPoints or Zoom videos will not work for these students. There must be a concerted effort to utilize more web-based resources that do not require downloads. Moreover, community building is vital when individuals are in virtual formats. For students, things like online office hours, drop-in rooms, and synchronous discussion sessions and debates can assist

students who may already be physically isolated. For administrators and instructors, interactive virtual meetings and discussions about issues within the university must be utilized. Failure to account for these socioemotional needs does little to preserve the value of our interactions.

Finally, individuals that come from disenfranchised communities are the same people whose families are at increased risk for illness, unemployment, and community exposure to COVID-19 (Belmonte, 2020). Thus, many of our students have parents who were unable to work from home, did not have work-leave benefits, and/or lost their jobs. This creates resource inequities and students are often called to pick up the slack for their struggling families. For administrators and instructors, many will be called to care for and support their immediate and extended family members. Recognition of these inequities is more than just talking about them, however; but it also extends to our approach to deadlines, attendance practices, and even issues like camera usage. Moreover, the targeting that has occurred for Asian and Asian-Americans especially with many including President Donald Trump referring to the disease as the *Chinese Virus,* has created fear because the threats of physical violence are real (Buscher, 2020). Therefore, discussions about the implications of rhetorical choices on the lived experiences of individuals is necessary for creating an inclusive space. As a community of care, we need to illustrate care for the individual and not just the course content or the work of the university.

Best Practice Four: Engage in Mindfulness

As COVID-19 continues to impact the daily lives of people across the globe, conversations surrounding mental illness are also on the rise (Russell & St. James, 2020). Mental illnesses, such as anxiety, depression, overwhelming anger, self-abuse, attempted suicide, and suicide, on college campuses have, sadly, risen globally too (El Morr et al., 2020). This spike in mental illness on college campuses is not solely due to COVID-19, but the global health pandemic has not helped move the statistics in the right direction. In order to combat mental illness on a college campus, it is essential to provide the appropriate level of care for individuals in need. The CDC (2021) recommends that schools continue to provide mental health support services to ensure the well-being of their students and that workplaces make space for employees to seek mental health resources. Although, in the midst of COVID-19, face-to-face services may not be available; therefore, colleges may need to invest even more of their time and efforts into combating mental illness in other ways such as virtual mental health support sessions (El Morr et al., 2020).

Within our communities of care, we also want to encourage our colleagues and students to engage in mindfulness practices. Mindfulness is an emerging mental health approach that encourages people to pay attention to purpose, to be present in the moment, and to value experiences as they unfold moment by moment (El Morr et al., 2020; Kabat-Zinn, 2003). Mindfulness techniques consist of meditation, breathing techniques, reflection, and acceptance practices. These techniques hold promise in reducing mental health challenges on college campuses (El Morr et al., 2020).

Currently, virtual communities are thriving, and scholars have reported on positive health outcomes when individuals are supported virtually. Evidence shows that access to virtual communities enable and empower people to become active participants in managing their own health conditions (Bender et al., 2013; Jadad et al., 2006). So, we are suggesting that colleagues take time to incorporate mindfulness techniques inside their virtual communities of care through Zoom, WebEx, or other virtual learning platforms. Colleagues could incorporate mindfulness breathing techniques before or after class, they

could engage in reflection activities at the end of class, or they could even assign students to come up with their own mindfulness techniques or activities. Since many educators are forced to create learning communities virtually due to COVID-19 restrictions, it is our hope that they take this best practice seriously and incorporate mindfulness into their communities of care. We firmly believe that both our colleagues and their students will feel better after instituting these mindfulness practices.

Conclusion

As fear, confusion, and uncertainty continue to rise from ongoing uncertainty surrounding COVID-19, we propose four best practices to create and improve communities of care for students. Nobody knew COVID-19 would impact the world the way it has, but we can be sure that humans are adaptable. By incorporating these best practices into pedagogical practices, we are confident that the health and wellness of students will improve. Fostering a community of care is one way to address student uneasiness brought about by COVID-19. Moreover, when circumstances of COVID-19 are finally behind us, we hope teachers will continue to employ these best practices designed to reduce fear and create a better tomorrow for all.

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