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# Inside Room 111: Being a Responsive Educator through Fostering an Adolescent-Centered Community of Care in the COVID-19 Pandemic

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## **Inside Room 111: Being a Responsive Educator through Fostering an Adolescent-Centered Community of Care in the COVID-19 Pandemic**

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### **Abstract**

The 2021-2022 school year came with the mantra of “learning loss” and the push to fill in the learning gaps and “accelerate learning” at all costs. In an effort to return education to “normal” and reduce learning loss, what transpired for many was a lack of focus on the students’ pandemic experiences and its effect on their lives from a wholistic perspective. Education is at a point where “normal” needs to be re-defined to support students’ needs and their learning, requiring middle level teachers to be responsive educators. Middle level educators can be responsive to their students’ needs by fostering an adolescent-centered community of care. Elements of an adolescent-centered community of care include responsive organizational structures, responsive teacher characteristics and practices grounded in care and advocacy, and positive and supportive peer relationships. This article highlights how one middle level teacher enacted a community of care for her young adolescents to best reach and teach them upon the return to in-person teaching in the COVID-19 pandemic.

### **Introduction**

The bell rings and Ashlee rushes from morning safety duty to her classroom so she can greet students as a new school day begins. Students have already begun lining up at her door, eager to get inside and escape the crowded hallway. As students file into the room, one young lady stops at the door, as she does every day, to provide the latest update on her father. “Good morning, Mrs. Highfill,” she begins, “My dad is starting to do better. My mom said he tried to open his eyes yesterday. They still won’t let me see him because I am not old enough but I did get to FaceTime him, and I could see his eyes moving when I was talking to him so I know he heard me.” “I am so glad to hear he is doing better,” Ashlee responds, “I know you are ready for him to come home.” The student visibly perks up and adds, “My mom said that since his oxygen is getting better they are starting to take him off some of the medicine that makes him so sleepy, which is why he is starting to move more.” More students are entering the class and Ashlee makes sure they step to the side to continue their conversation while letting others pass, “I am really glad he is breathing better. Thank you so much for keeping me updated,” Ashlee adds before the student enters the room. “Reminder everyone, you should be reading once you get to your seat.” As Ashlee makes her way to her desk, a student asks if they can borrow a book they just discovered on the bookshelf. “No problem,

just bring it back when you are done,” Ashlee responds. She takes attendance when an email notification pops up from a parent explaining that their child will be out for a few days due to a death in the family due to COVID, the second one so far this year for this child and it is only October. Pausing to look around the room and finish attendance before returning to the email, Ashlee thinks about how much the pandemic has affected the lives of her students.

### **Return to In-Person Schooling**

Since the onset of COVID-19, the way of education has dramatically changed for Ashlee and so many other middle school educators and their students. Ashlee’s entire school district, one of the top 10 largest districts in the US, converted to virtual schooling in spring of 2020. What followed for the 2020-2021 school year consisted of a chaotic blend of both in-person and virtual teaching. Many students, families, and educators held on to the hope that the 2021-2022 school year would bring “normalcy” back to education with the return to in-person schooling; however, she quickly realized that returning to school as “normal” was not going to be the case.

The 2021-2022 school year came with the mantra of “learning loss” and the push to fill in the learning gaps and “accelerate learning” at all costs. The reality is students have experienced

much disruption to their lives, both personally and educationally, which for many has resulted in a wide range of traumas directly connected to the pandemic (Santos, et al., 2021; Styck, et al., 2021). In an effort to return education to “normal” and reduce learning loss, what transpired for many was a lack of focus on the students’ pandemic experiences and its effect on their lives from a wholistic perspective. Education is at a point where “normal” needs to be re-defined in order to support students’ needs and their learning. Instead of placing learning loss at the forefront of education, we need to place the students themselves and their needs at the forefront so they can move forward with their lives and their learning (AMLE, 2021). For teachers, this means that the return to in-person schooling requires that they are responsive educators.

### **Fostering an Adolescent-Centered Community of Care**

Now, possibly even more than ever, students need adults in their lives who know them well enough to support their basic, developmental, and cultural needs. Ashlee recognizes that students today have spent the last few years with their lives, both personal and educational, on edge due to the pandemic. As such, she understands the importance of providing students with the physical, psychological, and emotional safety they need to learn. The need for teachers to prioritize responsiveness is well documented in middle level literature (Bishop & Harrison, 2021; Jackson & Davis, 2000) and must include a focus on developmentalism *and* culturally responsive and equity-based practices (Gay, 2010; Harrison et al., 2019).

One way middle level educators can be responsive to their students’ needs is by fostering an adolescent-centered community of care. Incorporating self-determination theory (Deci & Ryan, 2000) and stage-environment fit theory (Eccles & Midgley, 1989; Eccles et al., 1993), an adolescent-centered community of care is fostered through “... students and teachers caring about and supporting one another through positive school-based relationships and where individuals’ basic and developmental needs are satisfied within a group setting and members feel a sense of belonging and identification with the group” (Kiefer & Ellerbrock, 2019, p. 164). Among other things, student motivation, engagement, and school belonging are supported when such a classroom

community is present (Kiefer & Ellerbrock). Elements of an adolescent-centered community of care include responsive organizational structures, responsive teacher characteristics and practices grounded in care and advocacy, and positive and supportive peer relationships (Kiefer & Ellerbrock; Ellerbrock & Vomvoridi-Ivanovic, 2022). What follows is a glimpse of how Ashlee, a professional middle level educator of 10 years who works in a high-needs Title 1 middle school (484 students, 72% free-reduced lunch), attempts to foster an adolescent-centered community of care in her classroom for her 143 students during the transition back to in-person teaching in the COVID-19 pandemic.

### **Inside Room 111**

#### **Responsive Organizational Structures**

Far too often secondary learning environments are not aligned with the needs of young adolescent learners (Eccles et al., 1993; Eccles & Midgley, 1989; Eccles & Roeser, 2011). These impersonal environments are often incongruent with the developmental and cultural needs of students, making it ever more difficult to advance learning and motivation (Eccles & Roeser). When schools and classrooms are strategically designed to support students’ experiences, identities, and needs, a responsive and affirming community can be fostered (Bishop & Harrison, 2021; Kiefer & Ellerbrock).

Understanding the critical importance of implementing a responsive classroom environment upon the return to in-person teaching, Ashlee made it a goal to create a rather non-traditional and flexible learning space for her students. This non-traditional environment is glaringly obvious upon first entering her room as not one desk can be found. Rugs are placed around the room, dining room tables, a couch, upholstered dining chairs, and a coffee table fill the space. Room 111 looks like it belongs in a café rather than a school. Due to the unusual seating options in the space, Ashlee takes student input to organize her seating charts. Often this starts with a simple bell work prompt within the first few days of the new school year and an index card where students can explain their preferred seating options. As the year progresses, seats are changed as necessary or for specific lessons but, as often as possible, student choice is included in those arrangements. Students appreciated Ashlee’s nontraditional organizational structure, stating such things as

“It feels comfortable in here, like home” and “This environment doesn’t stress me out like my other classroom spaces do as I know I’m supported as an individual in this space.”

### **Responsive Teacher Characteristics and Practices**

Teachers who foster an adolescent-centered community of care strive to embody responsive teacher characteristics that translate to responsive teaching practices (Ellerbrock & Kiefer, 2014; Kiefer & Ellerbrock, 2019). Responsive teacher characteristics include “knowing, caring for, and connecting with students as well as viewing oneself as an adult advocate with the best interests of all young adolescents in mind” (Kiefer & Ellerbrock, p. 167). Responsive teachers understand care is relational *and* academic (Eccles & Roeser, 2011; Nieto, 2010; Noddings, 2005; Schussler & Collins, 2006). They also understand that holding a positive, asset-oriented lens toward all students and viewing diversity as an asset is fundamental to fostering an adolescent-centered community of care (Kiefer & Ellerbrock).

Such responsive, caring teacher characteristics can translate into the utilization of responsive teacher practices that help to foster an adolescent-centered community of care (Kiefer & Ellerbrock, 2019). Need supportive instructional practices (e.g., expressing high expectations, providing challenge and support, knowing students, supporting student wellbeing and success (Stroet et al., 2013)), warm demanding (high academic expectations coupled with positive regard for students (Bondy & Ross, 2008; Noddings, 2005)), empowering students to persevere (Harrison et al., 2019), and foster student agency (Freire, 1970) are just a few examples of responsive teacher practices.

Teacher care is also actionized through advocacy (Bishop & Harrison, 2021). Advocacy focuses on students’ wellbeing and is “an attitude of caring that translates into actions” (p. 15). By sheer definition, an adult advocate embodies the characteristics of a responsive educator, one who translates these beliefs into practices, fundamental to promoting a community of care (Ellerbrock & Kiefer, 2014; Kiefer & Ellerbrock, 2019). When a responsive teacher embraces the role of adult advocate, there is potential to bolster teacher-student relationships, strengthen students’ sense of connectedness, increase motivation, promote perseverance, support

student agency, and increase academic and personal growth (Bishop & Harrison, 2021; Ellerbrock & Kiefer; Jackson & Davis, 2000; Kiefer & Ellerbrock).

Ashlee deeply understands the importance of enacting responsive practices for her students. However, upon returning to in-person teaching, the intense push from the school district for teachers to focus on “accelerating” students to make up for “learning loss,” Ashlee quickly found herself in an ethical struggle between what she is required to do and what she believes she must do to support her students’ needs to best reach and teach them. She believes she must meet her students where they are at. She needs to listen to them, foster a sense of connectedness between and among students and herself, and support the unique developmental and cultural needs of her student population. Thus, instead of starting off the school year with a focus on academics to make up for the “learning loss” that was becoming the mantra of all things schooling, Ashlee made a choice to focus her first weeks on relational care and build a sense of classroom acceptance and belonging through positive school-based relationships. She engaged students in a series of classroom activities designed to foster connections, encouraged students to think about their individual strengths and uniqueness as well as that of their peers, and taught students about the importance of perseverance in difficult times, using the pandemic as an example.

Ashlee also re-examined her coursework and policies associated with student work. At the onset of returning to in-person schooling, Ashlee found herself teaching the exact same content in the exact same way with the exact same policies and quantity of coursework only to find her students not being able to keep up and, thus failing to meet expectations. Longer and more frequent absences brought on by the pandemic created mountains of work for students to keep up with or make up, making it almost impossible for students to catch up and actually learn. Upon their return from quarantine, Ashlee saw the stress radiating off of her students and she did not want to cause any further stress. In order to be more responsive, yet hold all students accountable to meet her high academic expectations, Ashlee chose to reduce the quantity of coursework assigned and increase both the quality of assignments and the quality of the work expected. She adapted a flexible mindset regarding timeliness of completion

without punitive measures, holding the mindset, “I expect you to do high quality work even if it takes you longer to complete it.” Ashlee found that holding students to the rigor of fewer, high-quality assignments while demonstrating empathy and understanding regarding when assignments were due empowered her students to persevere, supported her ability to foster relationships with students, and helped her meet their everchanging needs while still being mindful that student learning is the goal.

Ashlee also understood students yearned for peer interaction, which was especially exacerbated due to isolationism experienced as a result of remote learning. Thus, through her revised teaching approaches, Ashlee encouraged student choice and agency and increased the quantity and quality of student collaboration. As such, common instructional approaches included the use of cooperative learning, tiered collaborative assignments, student-choice boards, and project-based learning.

### **Positive and Supportive Peer Relationships**

Peer relationships are critical to fostering an adolescent-centered community of care (Kiefer & Ellerbrock, 2019). Positive, quality peer relationships are built on trust, effective communication, and academic and emotional support that help support motivation and learning (Headden & McKay, 2015). Teachers play a key role in helping young adolescents develop these high-quality peer relationships in school (Benson et al., 2012). As previously mentioned, Ashlee understood the importance of peer interaction and believed it was her responsibility to help support positive peer relationship development especially due the potential disruption in peer relations and social development due to the pandemic. Upon return to in-person teaching, Ashlee spent the first weeks of school engaging students in activities to foster an understanding and appreciation of one another and what makes each student unique. In one activity, Ashlee had students complete an individual personality survey and discuss results in small groups. Students were asked to consider how different personality types may think, communicate, approach conflict, and problem solve. She also asked students to discuss what different personalities types may want and need from their friendships. She then engaged students in a conversation about the ways

society may view aspects of one’s personality and had students debate the fairness of such.

### **Conclusion**

Weeks since the initial conversation transpired at the threshold of Room 111, Ashlee is once again greeting students at the door in-between classes when the young lady runs up to her to excitedly share an update about her father’s condition, “Mrs. Highfill! Mrs Highfill! My dad comes home today!” They hug as Ashlee responds, “Oh my, I am so happy to hear that! I bet you are really excited!” This moment is one Ashlee hoped would come before the school year ended as she often thought about how difficult this last year has been for her students, especially this young lady.

Through striving to implement an adolescent-centered community of care, Ashlee aspired to support her students’ needs and advance their learning while mitigating the potential negative effects that returning to in-person schooling in the COVID-19 pandemic may have her students’ personal and academic development. For many, she was successful. For others, she was only able to help so much. What Ashlee learned is that being a responsive educator in the pandemic means first prioritizing students’ needs above all else at all times. It is important to acknowledge that being a responsive educator who strives to implement such a community of care is hard work and an ongoing challenge. It is our hope that Ashlee’s experience helps others think about ways they may be able to foster an adolescent-centered community care during the era of the COVID-19 pandemic that supports students’ basic, developmental, and cultural needs—our “new normal” in education must reside here.

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