



# Centering Loss and Grief: Positioning Schools as Sites of Collective Healing in the Era of COVID-19

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When the COVID-19 pandemic hit the United States, everyday life was fundamentally transformed. Schools and small businesses were forced to shut down. Individuals were encouraged to wear masks in public settings, “shelter-in-place” orders were implemented across several cities and states, and social distancing became a routine practice. Some lost their jobs and livelihood, while others lost the day-to-day physical connection with colleagues and friends, as their “work-life” had shifted to home. To be certain, the variety of losses that people individually and collectively experienced during the COVID-19 pandemic is quite vast—ranging from small, seemingly inconsequential losses (like the freedom to get a haircut) to more considerable and painful losses (like the loss of life). It is important to note that these losses overlapped with other crises that were fomenting across the nation at the same time—for example, the rise of the white supremacist movement, Black Lives Matter, anti-Asian racism, and draconian immigration enforcement, amongst others. These other pandemics also produced losses, such as the loss of civil rights, crackdowns on civic participation, and fundamental violations of basic human rights and civil liberties. In this paper, we discuss the “losses” we are currently experiencing as a nation and the need for school leaders to pay attention to the range of losses people are experiencing in their daily lives. We draw particular attention to those losses compounded by intersecting historical oppressions that disproportionately impact historically marginalized students, families, and communities. We also (re)imagine the transformation of schools to sites of collective healing that work to humanize the collective experience by anchoring actions in resistance, love, collective well-being, hope, and solidarity with and alongside teachers, students, families, and communities.

**Keywords:** COVID-19, schools, trauma, healing, grief/loss

## CENTERING LOSS AND GRIEF: POSITIONING SCHOOLS AS SITES OF COLLECTIVE HEALING IN THE ERA OF COVID-19

COVID-19 has infected over 109 billion people across the globe, tragically ending the lives of 2.41 million people worldwide (World Health Organization, 2021)<sup>1</sup>. In the United States alone, over 486,450 people have already died from the disease, and over 81,000 people are contracting the disease each day despite a nationwide vaccination effort (Center for Disease Control and Prevention, 2021). Given these overwhelming statistics, there is little doubt that people worldwide are suffering from intense anxiety, stress, and angst. Those who have lost friends, relatives, and loved ones to this disease must also deal with the additional pain and emotional trauma that often accompanies loss and grief (Masiero et al., 2020).

In the United States, the pandemic radically restructured and transformed both our personal and professional lives. As state regulations and mandatory closures extended into months, many businesses—especially small and family-owned businesses—were forced to shut down. Many individuals lost their jobs, while others had to adjust to new working conditions as work routines increasingly shifted to the home, placing enhanced demands and stressors on individuals as “home” and “work” spheres became increasingly blurred. The loss of jobs and financial security, coupled with the loss in our day-to-day routines, has only compounded the overwhelming sense of despair brought forth by this pandemic.

The losses have not been equally shared or distributed (Center for Disease Control and Prevention, 2020). Specific communities and groups—such as single parents, the elderly, those who are economically oppressed, and People of Color—have been disproportionately affected by the pandemic. In general, these communities are more likely to have pre-existing social and health conditions that place them at the risk for infection, causing an increased number of infection and death rates as a direct result of these social inequalities (Center for Disease Control and Prevention, 2020).

Indeed, people from minoritized communities are over-represented in “essential” work settings, such as health care, farm work, meat processing, grocery stores, and restaurants—precisely the type of labor that increases their chances of exposure to the virus (Rabouin, 2020). As such, many of these jobs are part-time or piecemeal and do not provide health insurance, thus limiting or curtailing their access to quality healthcare. These and other social and economic barriers, such as lack of transportation, lack of childcare, evictions, homelessness, and distrust in government agencies, only exacerbated these inequalities which have resulted in “more COVID-19 cases, hospitalizations, and deaths in areas where racial and ethnic minority groups live, learn, work, play,

and worship” (Center for Disease Control and Prevention, 2020).

In some cases, the sense of loss was more perceptual and felt rather than the actual and concrete. For example, when state governors began implementing mandatory shutdowns and mask requirements in response to sharp increases in COVID-19 infection rates, some individuals felt that their freedom and civil liberties were being taken away (NBC News, 2020; Rojas, 2020). In extreme cases, militias, right-wing factions, and self-anointed “enforcers of order” surfaced in an obvious effort to demand change and protect the rights they felt were being curtailed by government officials (NBC News, 2020). On many occasions, these protests found widespread support among anti-government organizations, hate groups, “deep State” conspiracy theorists, and right-wing extremist groups (Southern Poverty Law Center, 2020). While many of these organizations were loosely-coupled, they often worked in tandem as they shared many of the same concerns and trepidations (Levy and Strobel, 2020; NBC News, 2020).

The rise of the Black Lives Matter protests across the country demanding racial justice and an end to police and State-sanctioned violence often provided the requisite fodder for right-wing extremist groups to situate themselves as the “true” enforcers of law and order in times of racial and political unrest (NBC News, 2020). Supporting this claim was the widespread belief among these groups that the broader Black Lives Matter movement was a domestic “terrorist” organization controlled by the Democratic Party (Fox News, 2020). In this regard, the majority of these extremist groups perceived themselves as defenders of order and safety in a political environment where they felt their rights were threatened by Black “terrorists” within the so-called “deep State” (McEvoy, 2020; NBC News, 2020). Suffice it to say that these right-wing groups were also experiencing a sense of loss: a presumed loss of power and authority, the supposed loss of order and calm, an assumed loss of independence and autonomy, and the perceived loss of social and political privilege.

The presidential election of 2020 only compounded this sense of loss. Donald J. Trump not only refused to denounce extremist groups, such as the Proud Boys and the Light Foot Militia, but he also conflated the broader Black Lives Matter movement with Antifa— a left-wing political movement grounded in militant opposition to fascism and racialized nationalism (Levy, 2021). Such racially-divisive rhetoric from President Trump continued to fuel rifts in the broader social and political order as he used his bully pulpit to suppress and silence minoritized communities as he had done since the launch of his presidential bid in 2016. In this regard, the sense of loss, devastation, uncertainty, unpredictability, and injury was equally shared by those on the political Left.

As the country dealt with a wide range of losses on multiple levels, schools also had to deal with their own “losses” due to the COVID-19 virus (Gurr and Drysdale, 2020). As schools closed across the country to prevent the spread of the disease, student lives were radically upended as schooling rapidly shifted to the home and delivered *via* online platforms. As bedrooms, living rooms, and kitchen tables were hastily

<sup>1</sup>The COVID-19 statistics referenced in this document reflect data collected by the US Center for Disease Control and Prevention (CDC) and the World Health Organization (WHO) as of February 18, 2021.

transformed into formalized learning environments; families also had to adjust to new routines, learn new concepts, and take on new roles. Teachers had to learn new instructional methods, while simultaneously learning how to quickly assess and accommodate the wide range of technical, instructional, and pedagogical challenges that online instruction introduced. School administrators also had to learn how to navigate the logistics of rapidly meeting student and family needs while simultaneously providing the requisite supports for the faculty and staff—all while figuring out how to reopen schools in a safe and orderly fashion (Narvaez Brelsford et al., 2020). Suffice it to say that schools across the nation—and across the world (Harris, 2020)—experienced a collective sense of loss, as the pandemic forced everyone to adjust to new working conditions and instructional realities.

In order to better understand the individual and collective sense of loss we are all experiencing as a result of the COVID-19 pandemic, we will briefly summarize the key literature on loss in the areas of psychology and social work and how these concepts have been understood and applied within the academic and scholarly domains in which they flourished. It is important to note that we will keep our literature review at the broad/conceptual level which will allow us to capture how these concepts are related and how they might be taken up within the educational arena.

Using this summary of the literature as a springboard, we will then discuss the broader social and political context in which the COVID pandemic unfolded within the United States: from the election of Donald J. Trump through the Black Lives Matter demonstrations that occurred in response to police abuse and systemic white supremacy. We focus on how the unfolding health pandemic only exacerbated the sense of trauma and loss for historically marginalized students and families, forcing schools to become sites in which suffering, pain, and loss were manifested. Given the overwhelming sense of loss and grief by various school stakeholders, we end our discussion with a call to reframe schools as sites of possibility and radical healing, where schools are not solely defined by their productivity, but by their ability to boldly and courageously move toward a more radical politics of hope *via* the implementation of a radical healing justice framework grounded in critical, Socratic, and audacious hope.

## UNDERSTANDING TRAUMA, LOSS, AND GRIEF

According to Granek (2010), contemporary understandings of loss and grief can be traced to the early work of Sigmund Freud (1963), who understood grief as a psychological process through which death/loss is resolved. Freud posited that there were normal as well as pathological ways to resolve loss. A healthy way requires a mourner to “detach” one’s libidinal connections to the deceased person and “reinvest” this psychic energy in another person or object (Goldsworthy, 2005). Those who failed to do the necessary grief-work could potentially develop a wide range of psychiatric illnesses, including melancholia/depression, difficulty

in sleeping, withdrawal, and suicidal ideation (Bradbury, 2001; Clewell, 2004).

While Freud’s theory provided a rudimentary understanding of trauma, grief, and melancholy, it was the foundational work of Lindemann (1944), who operationalized grief as a *medical* disease that ought to be diagnosed and treated by medical professionals. Not only did Lindemann view grief as a treatable “disease” with discrete causes and symptoms, but he also firmly believed that it ought to be scientifically and rigorously studied—which was a limitation in Freud’s original work. Lindemann’s groundbreaking research on grief served as a watershed moment because it moved grief from the realm of soft sciences (i.e., psychoanalysis) into the realm of more rigorous medical sciences (i.e., psychiatry). Granek (2010) asserted that Lindemann’s research singlehandedly concretized our understanding of grief as a disease, solidifying the popular understanding of grief as a “pathology” in need of medical attention.

The dominant belief that there are healthy and pathological ways to overcome grief was further developed by Kübler-Ross (1970), who posited that individuals progressed through five distinct “stages” of emotions when dealing with grief: (1) denial, (2) anger, (3) bargaining, (4) depression, and (5) acceptance. Although Kübler-Ross’ stage model has been heavily criticized as overly rigid and linear (Corr, 1993; Maciejewski et al., 2007), the theory still holds much currency in modern times. In fact, Scott Berinato recently published an interview in the *Harvard Business Review* (Berinato, 2020) that quoted Kübler-Ross’ model extensively when discussing the grief we are experiencing as a society due to COVID-19:

[Q] What can individuals do to manage all this grief?

[A] Understanding the stages of grief is a start... It’s not a map but it provides some scaffolding for this unknown world. There’s denial, which we say a lot of early on: *This virus won’t affect us*. There’s anger: *You’re making me stay home and taking away my activities*. There’s bargaining: *Okay, if I social distance for 2 weeks everything will be better, right?* There’s sadness: *I don’t know when this will end*. And finally, there’s acceptance: *This is happening; I have to figure out how to proceed*. Acceptance, as you might imagine, is where the power lies. We find control in acceptance. *I can wash my hands. I can keep a safe distance. I can learn how to work virtually*. (emphasis in original, paragraph 7).

As the above quote suggests, individuals not only progress through “stages” of grief but, ideally, arrive at an endpoint where grief is successfully managed and resolved. Although pathology is not explicitly stated in the model, it is certainly implied: individuals who fail to successfully begin (or complete) a stage, are in need of professional help and assistance in order to progress to the next level.

According to Granek (2010), there is also another school of thought that recognizes “grief as trauma” (p. 65). Researchers who employ this perspective focus on the circumstances in which the loss happens and how these impact the grieving process of individual survivors (Jacobs, 1999). Many survivors, for example, experience symptoms of post-traumatic stress disorder (PTSD), depression, anxiety disorder, and other physical manifestations

and/or behaviors as a direct result of the traumatic event. In this regard, some researchers (Prigerson and Jacobs, 2001) posited that traumatic grief is a distinct clinical entity, with its own symptoms and behavioral characteristics (Boelen et al., 2003).

Taken holistically, the major theories surrounding loss and grief remain firmly rooted in the pathology model (Doka, 2001) and emphasize death/dying as the primary sources of grief as opposed to broader, or more holistic forms of loss (Goldsworthy, 2005). Notwithstanding, there is a growing movement within the field that makes strong inroads in broadening this discourse. These new concepts employ constructivist theories to better understand "the unique meaning that each person attributes, both in their internal and external worlds, to the grief and loss that they are experiencing" (Goldsworthy, 2005, p. 172). In other words, these new theories and ideas not only reject universal understandings of loss, but also challenge the dominant ideology that "unresolved" grief is either unhealthy or pathological (Doka, 2001; Neimeyer et al., 2014). Many of these new theories posit that trauma is as much an individual phenomenon as it is a social one. In other words, "[a]lthough grief has highly personal qualities, it should be considered within the wider systems and contexts of the individual" (Goldsworthy, 2005, p. 175).

In short, since meaning-making does not happen in isolation, individuals shape—and are shaped by—the environment, people, and relationships that surround them. In this regard, grief, loss, and trauma are not individual constructs but concepts that are imbued with social meaning. On the flipside, since their losses transform individuals, then healing and recovery should also be viewed as social phenomena, where families, friends, colleagues, and others impact (and are impacted by) the individual, and where healing is not viewed as curative, but socially restorative and redemptive (Ginwright, 2015).

We believe this new understanding of the trauma/healing dialectic has significant implications for organizations, such as schools, particularly, as they deal with the aftermath of COVID-19, which impacted society as a whole. The trauma that has been inflicted is not solely individual but is collectively felt and experienced. Moreover, the trauma that is experienced encapsulates loss and grief. Simultaneously, loss and grief encompass trauma. There is little doubt that the current pandemic and its aftermath will leave a lasting impression on schools, families, and communities that will last for many years to come. How schools understand and respond to these collective losses and traumas is critical, particularly as they move toward healing under this "new normal."

## CONTEXTUALIZING THE LOSSES

Globally, the spread of the Coronavirus has led to considerable losses on many fronts. As already mentioned, some losses are material (the most poignant example being the loss of life, or death) while others are more abstract (e.g., the loss of presumed power and freedom). In the United States, to more fully consider the national impact and loss of COVID-19, it is also helpful to analyze how the national and global effects of the pandemic are intimately interconnected. For example, nationally,

millions of Americans and immigrants preserve meaningful, familial, amicable, collegial, and even romantic relationships across geopolitical borders. These relationships influence how individuals, families, and communities have experienced—and continue to experience—the spread of the virus and loss. To illustrate this point, during March and April 2020, when Ecuador and New York City underwent some of the highest worldwide rates of COVID-19 transmissions and deaths per capita, an Ecuadorian immigrant family in New York City might have experienced compounded loss and grief. International loss and grief are merely one example of how the pandemic has affected families all across the United States and the world. In what follows, we describe some of the losses people and institutions in the United States have experienced, including but not limited to political instability, white outrage as a response to the perceived collapse of freedom and rights, the cold-blooded murders of Black people at the hands of police, the rise of anti-Asian racism, and the maltreatment of undocumented immigrants at the hands of the State.

## U.S. Executive Leadership and the 2020 Presidential Race

One of the losses during the spread of COVID-19 was the loss of executive branch data-driven decision-making and leadership exhibited by the 45th U.S. Commander-in-Chief. As noted in the literature, "Donald [J.] Trump is not simply a presidential figure, but the embodiment of white supremacy, capitalism, racism, neoliberalism, patriarchy, xenophobia, Islam[o]phobia, homophobia, and more" (Castrellón et al., 2017, p. 936). Amid the global pandemic, Donald J. Trump was more preoccupied with running an electoral reelection campaign than protecting the general welfare. While the CDC reported the first transmissions of COVID-19 in February 2020, President Donald J. Trump and his administration failed to enact early and restrict national measures to prevent the virus from spreading. His careless resolution resulted in increased transmission rates and more intensive care unit beds occupied at hospitals across the country, ultimately leading to the loss of more lives, ranging from civilians to healthcare professionals and service workers alike.

Instead of focusing on enacting measures that would limit the spread of the virus and save lives, Donald J. Trump focused on escalating friction among the populace of the United States. Despite the strong recommendation of the public health and medical experts to wear masks or face coverings, Donald J. Trump publicly denounced their effectiveness. His oppositional stance on enacting a national face mask or covering protective order hinged on the presumed loss of personal freedom, which particularly agitated the members of his white conservative constituency. Repeatedly, Donald J. Trump went on record proclaiming his disagreement with wearing masks and denouncing their efficiency in reducing viral transmission, declaring, "I don't think I'm going to be doing it [wearing a mask or face covering]" (Cillizza, 2020). Another example was on September 29, 2020, during the presidential debate, when Donald J. Trump asserted, "I don't wear masks like him [Joseph R. Biden, then-Democratic presidential candidate]. Every time

you see him, he's got a mask" (Cathey, 2020). His politically conservative and shallow discourse against wearing face masks or coverings became an impetus for white conservatives to publicly protest their suspected violation and loss of personal freedom and liberties. Many white conservatives saw the government enforcement of preventative measures against COVID-19 (e.g., wearing face masks or coverings, endorsing stay-at-home orders, limiting dining-in options in restaurants, curfews, amongst others) as politicized as opposed to local and national health and safety measures.

### white Rage

In response to the virtual absence of national leadership in reducing the spread of the COVID-19 virus, many state governments enacted stay-at-home and face-covering mandates. These orders strictly instructed the closing or restricted access to highly trafficked public and commercial spaces (e.g., PK-12 schools, universities and colleges, beaches and parks, bars and restaurants, and gyms) to reduce the likelihood of viral transmission. However, as mentioned, white conservative groups were opposed to these public health measures as they presumably infringed on their rights and liberties. Simultaneously, individuals across the country were fighting not to lose the ability to breathe—whether due to COVID-19 infection or literal suffocation at the knees of police officers—there was a surge in the public complaints expressed by white conservatives against their “loss” of individual freedom. Across the country, white conservatives organized protests to declare their grievances with signs that read, “Give me liberty or give me death” and “Live free or die” (Bushman, 2020). It is also worth pointing out that white conservative protesters were further exacerbated and agitated by the rising public condemning of anti-Asian racism and anti-Blackness that erupted from circles fighting against the emerging and ongoing oppression against racially minoritized communities in the United States.

The public outrage expressed by white conservatives is only a manifestation of white supremacy and the opposite of what Anderson (2017) coined “white rage.” In her analysis of the Black-led demonstrations that transpired after police officers murdered Michael Brown in 2014, Anderson noticed that news outlets and national attention focused on presumed “Black rage,” rather than what was causing the commotion: the protection of Whiteness. The concept of “Black rage” is a white supremacist standpoint that dismisses the pervasiveness of white supremacy in the society. Put bluntly, white supremacy and anti-Blackness are the impetus for the numerous killings, shootings, and lynchings of Black lives, and what led to Black-led manifestations for Black lives. However, white rage is not about the overt expression of white supremacy but rather the covert ways in which the system continues to protect Whiteness (Anderson, 2017). Anderson (2017) wrote, “white rage is not about visible violence, but rather it works its way through the courts, the legislatures, and a range of government bureaucracies. It wreaks havoc subtly, almost imperceptibly” (p. 2). Amid the COVID-19 pandemic, white rage is evident in how the nation addressed the spread of the virus by allowing systemic inequities (e.g., access to health insurance, economic oppression, job security, amongst

others) to persist and disproportionately take Black lives (Poteat et al., 2020).

### Black Lives Matter

The loss of Black lives amid the COVID-19 global pandemic is one of America's most excruciating realities. The nation was responsible for taking and losing Black lives through what should have been preventable phenomena or circumstances: police brutality and medical inequality. On May 25, 2020, the murder of George Floyd at the knee of the police officer, Derek Chauvin ignited demonstrations across the country. In particular, Black Lives Matter became a pivotal organization to lead in the protest of the ongoing white supremacy, police brutality, and the murdering of Black lives in the United States. Anti-Black racism and the killing of Black lives is an epidemic in America that outlives the establishment of the country in itself (Anderson, 2017). CBS News (2020) reported that between January to August 2020 alone, the police murdered 164 Black people across the country. That is, 164 Black people. That is at least 164 family members, including mothers, fathers, brothers, sisters, children, cousins, friends, loved ones, and acquaintances impacted by the State's relentless taking of Black lives.

Coronavirus has also affected and taken Black lives at alarmingly disproportionate rates (Poteat et al., 2020). Studies show that while Black people make up ~13% of the U.S. population, they make up about 30% of COVID-19 cases (Poteat et al., 2020). The risk factors that lead to increased mortality, if infected by COVID-19, are significant risks in the Black community (e.g., hypertension, diabetes, and obesity). It is essential to be clear: the pandemic did not create the inequalities that we see today; COVID-19 intensified the existing inequalities that affect Black people in America due to institutional practices and ideologies that foreground this country. Other examples of how the pandemic put on display the workings of white rage include how police handled the diffusion of Black Lives Matter demonstrations by incarcerating Black protesters writ large, thus putting them at a higher risk of contracting the virus.

### Sinophobia

While the transmissions of COVID-19 were on the rise in the United States, President Donald J. Trump asserted on multiple occasions that China was to blame for the pandemic and relied on anti-Asian racist ideologies, or sinophobia, to rest his case. He repeatedly used terms like the “China Virus,” the “Chinese Virus,” and, most recently, the “Kung Flu” to racialize the narrative of the pandemic and appeal to white supremacist public opinion (BBC, 2020a). The President's harmful rhetoric materialized into U.S.-grown public demonization and bullying against Asians, Asian Americans, and Pacific Islanders in the United States and even expanded to other parts of the world (Chen et al., 2020). It is worth noting that the loss of safety of the Asian American and Pacific Islander communities is not new but was instead escalated by white supremacist ideologies and actions that attempted against their well-being out of presumed fear of COVID-19 infection (Chen et al., 2020). The Asian Pacific Policy & Planning Council published an increment in hate crimes reported by Asians, Asian Americans, and Pacific Islanders

in the United States (Jeung, 2020). The report included data concerning public safety, concerns, and threats attempted against the people of Asian descent. The range of incidents involved Asians, Asian Americans, and Pacific Islanders getting barred from establishments and public transportation, getting coughed and spat on, becoming victims of verbal and online harassment, physical assault, shunning, vandalism, workplace discrimination, and, most recently, on March 16, 2021, a deadly shooting in Atlanta, Georgia that ended the lives of six women of Asian descent (Jeung, 2020; Nguyen and Wong, 2021).

## Undocumented (Im)migrant Exclusion and Mass Deportations

Another loss that national media has paid less attention to is how the COVID-19 pandemic has affected undocumented immigrants. In the United States, undocumented immigrants generally lack access to quality healthcare. The strained relationship between undocumented immigrants and healthcare is due to an amalgam of income, racism, xenophobia, and language “barriers” and the reality that their absence of an immigration status makes them the direct targets of deportation. The political responses during COVID-19 further harmed undocumented immigrants as the government did not suitably distribute resources to this segment of our population. Although many undocumented immigrants may have lost employment or the ability to work due to their compromised health, there continued to be little to no investment to the health and safety of the undocumented immigrants by the federal government. In addition to dealing with loss and grief nationally and globally, the U.S. Government did not include undocumented immigrants in economic relief efforts, such as stimulus packages through the Coronavirus Aid, Relief, and Economic Security (CARES) Act (Naera, 2020). It is important to note that despite most undocumented immigrants being tax-payers (Naera, 2020), the government purposefully excluded them from relief plans, thus rendering them more vulnerable to the health, economic, and material effects and loss and grief caused by the pandemic.

Aside from minimal healthcare access, the gruesome realities of deportation did not dissipate during the COVID-19 pandemic. At the beginning of the pandemic, the United States deported back to Guatemala, hundreds of undocumented immigrants who were sick with the virus (Gonzalez, 2020). These deportations led to insurmountable suffering from families in the United States who lost sick family members to deportation as their repatriation could be understood as a certain death sentence in their countries of birth. Approximately 4 months into the pandemic, the Immigration and Customs Enforcement (ICE) suspended deportations, yet they were resumed only 3 months later (Jordan, 2020). In addition to the deportation of undocumented immigrants, undocumented women in detention centers were also victims to the workings of ICE and the nation-state. In the middle of the pandemic and throughout time, hundreds of undocumented women were submitted to sterilization without their consent (Moore, 2020). The trauma ensued by forced sterilization can only be understood as inhumane. In this sense, trauma, loss, and grief during the era of COVID-19 are more

than the loss of lives; the pandemic and the government response have inflicted complex trauma on the people it has impacted, particularly those the State has historically marginalized.

## THE OPERATIONALIZATION OF LOSS AND GRIEF

In the United States, the COVID-19 pandemic has had disproportionate effects on historically marginalized communities (e.g., Black, Brown, Native, Asian, undocumented immigrants, amongst others) (COVID Tracking Project, 2020) with varying exemplifications of loss and grief for students, schools, and families. The COVID-19 pandemic has manifested trauma, loss, and grief that operationalize as overt and subtle ruptures to the daily lives of historically marginalized communities. The everyday losses in 2020 are intricately linked to larger historical structural oppressions magnified during the COVID-19. Indeed, daily chronic stressors combined with systemic inequities (e.g., education debt and opportunity gaps) and oppressions (e.g., racism, xenophobia, anti-Blackness, police brutality, fear of deportation, access to health care, white supremacy/white rage, amongst others) are inflated during the pandemic crisis.

Prior to the COVID-19 era, an educational debt that has caused educational disparities for Students of Color (Ladson-Billings, 2006), already existed as well as a staggering opportunity gap (Milner, 2020). Ladson-Billings (2006) argues that a focus on an achievement gap, which highlights educational disparities amongst races, does not take into account the historical denial of education and lack of investments into the educational experiences of Students of Color. Likewise, the opportunity gap moves away from an imposed focus on achievement markers, such as test scores, and reflects the existence of rifts between Students of Color and their white counterparts. The concept of an achievement gap allows for the focus on assessments that determine achievement as opposed to systemic barriers. The opportunity gap brings attention to the teacher quality gap, teacher training gap, housing equality gap, income gap, school funding gap, the digital divide, and more (Milner, 2020). While the pandemic did not create the educational debt (Ladson-Billings, 2006) or the opportunity gap (Milner, 2020), it certainly exasperated and brought attention to the long-standing systemic inequities (Sahlberg, 2020), and became integral to educational policy and COVID-19 responses from educational leaders (Hollweck and Doucet, 2020).

In response to school closures, educational leaders and policymakers worked (and continue to work) tirelessly to come up with emergency responses to meet the schooling needs of historically marginalized populations. Providing access to technology, food, school supplies, and more, became pertinent to education policy discourse and planning (Hollweck and Doucet, 2020). Scholars argue now that educational policy discourses are focusing on addressing these historical gaps, that now is the time to reimagine what schools and education could look like, as such schooling, should not go back to its traditional norms that upheld the status quo (Hollweck and Doucet, 2020; Love, 2020).

## Learning Loss

As education moved to a virtual setting, teachers across the United States also shifted to virtual teaching. Whereas, very few teachers have been trained or prepared to teach in virtual settings, they have learned new pedagogical and technological tools and practices to meet the demand (Hollweck and Doucet, 2020). Likewise, many students have not been traditionally learned in virtual spaces, or even have access to necessary virtual learning tools. This switch brought attention to the widening historical technology and educational gaps. The switch to virtual learning has sparked interest in a learning loss, which situates a loss in learning or schooling that is happening among children across the world, including the United States (Reilly, 2020). The concept of the learning loss contextualizes that students are falling behind, that the achievement gap is widening, and students are not going to be adequately prepared for the next grade, college, or the workforce (Reilly and Ball, 2020). Indeed, it has stirred fear that the youth of the nation, particularly Students of Color, are falling behind in school (Reilly, 2020).

Attention placed on the learning loss can take away from the historical ramifications of systemic educational inequities, mental health needs, and what students are currently learning and experiencing by living through the pandemic (Sahlberg, 2020; Ferlazzo, 2021). The conceptualization of the learning loss is fixated on the idea of education and production, schooling and assessment, or standardized testing. Advancing attention to a learning loss has caused policymakers, politicians, some educational leaders, and the public to begin discussing how schools will address the issue, with potential solutions, such as reopening schools, summer school, year-round learning, longer school days, assessments, grade-retention, and tutoring (Ferlazzo, 2021; Strauss, 2021). None of these will address the loss and grief that students, families, and teachers all over the world are currently experiencing. The learning loss is viewed as the loss of productivity and not the loss students are experiencing. In other words, such a narrow focus on academics minimizes the complexities of all the losses experienced by students, families, and educators.

The operationalization of loss and grief accumulate beyond a learning loss in schools. Indeed, vocalized by many educators through social media outlets is the now familiar post that states, “Kids are surviving a pandemic, not losing learning” (Ferlazzo, 2021). Perhaps to best put this in a perspective is a quote from a youth interviewed about the learning loss in Ferlazzo’s (2021) Edweek article, *“I lost family, I lost myself and what hurts me more is that I lost everyone who said they were there for me”* (emphasis in original). No matter what shape the loss took form in, all school community members and stakeholders experienced some form of loss and grief that have impactful influences on their experiences in learning, belonging, teaching, and more. In this way, the manifestations of loss are experienced differently for students, schools, and families.

## Students

There have been multiple losses for students in PK-12 schools ranging from schooling experiences to home and community life. The materializations of the disruption to students’ schooling

include, but are not limited to, the loss of daily school routines: socializing opportunities with friends and classmates, teacher/student relationships, classroom spaces, and access to school counselors, and amongst others. There are also losses connected to structural barriers, such as access to meals provided by the school, access to school technological resources (e.g., calculators, computers, and tablets, amongst others), access to teaching assistants or paraeducators who provide extra learning support. Finally, students with Individual Education Programs (IEPs) have lost critical access to key resources, materials, and support systems on campus.

Many schools and school districts across the United States have been quick to find ways to respond to the loss students have experienced. For example, grab-and-go food stations have been set up in under-resourced communities to ensure that students can access food (Gaddis and Rosenthal, 2020). Emergency funding has also purchased technological resources for students who do not have access to technology at home. While immediate policy decisions have been made at schools and school districts across the United States, there remain the root causes of structural inequities. For instance, many low-income families do not have access to technology, such as laptops or the internet to complete their educational tasks. Additionally, many parents feel underprepared to support their children in virtual learning or they do not have the adequate resources to do so. Although some schools responded by providing access to Chromebooks or other tools, many students continue to have connectivity issues, do not have internet, or are simply unable to partake in remote-learning with the expectations placed upon them (continuous online classes, during the school day). These quick policy decisions will only change the current situation and not make changes to historical and societal injustices deeply rooted in educational policy. Nevertheless, these policy changes are inherently changing education as we know it. However, for these students, the loss and the manifestations of grief also spill over into the loss of daily routines and relationships. With the closing of schools, there is now an absence of school routines and relationships among students. Indeed, playgrounds, parks, and get-togethers with friends cannot, and will not, look the same. Likewise, the loss of their family structure, or the loss of income in the household could have detrimental influences on their home lives and schooling.

## Schools

From shutdowns, hybrid models to cohort learning models, schooling as we know it has drastically altered throughout 2020 and so far at the time of this writing in 2021. Aside from students and families, administrators, teachers, counselors, paraeducators, maintenance and cafeteria staff, bus drivers, office staff, even school board representatives have all faced unique challenges, loss, and grief. Perhaps one of the most salient illustrations of loss is that of the physical space of the school campus. Like many businesses and offices, schools and universities shut down their campus to minimize exposure to COVID-19. The work, however, did not stop. Instead, many faculty and staff worked from home, if they were able to. Some teachers taught online from a designated office space, while others had makeshift offices

in their homes, their cars, or anywhere they could find a space. The extra responsibility of learning how to utilize an online platform for many teachers was a difficult task, coupled with the extra pressures of navigating homelife and professional life at the same time.

Students also struggled to find a space in their home that was adequate to tune in to their classes and do homework—assuming they had access to the internet and tools needed for virtual learning. The loss of the physical campus space manifested in the rupture of school and home separation. While experiences from school and home are always carried with students and educators (e.g., what happens at home or community could affect students' learning at schools), there had previously been a physical degree of separation. More so, the student-teacher relationships, friendships, and collegial networks developed in schools have also been disrupted. Although teachers, administrators, and some staff were able to work from home, others were not afforded that privilege.

Furloughs were all too common for many school employees, such as bus drivers, cafeteria employees, school nurses, paraprofessionals, maintenance staff, and amongst others (Lieberman, 2020). Some school faculty and staff continued to work in (mostly) empty school buildings. For example, in schools designated with grab-and-go meals, cafeteria employees and maintenance staff continued to be present. It is the school maintenance staff and cafeteria employees who have kept schools running and uphold the CDC recommendations (Long, 2020). Additionally, for some teachers who were unable to work from home or their schools had returned to in-person teaching, they continued to operate from their classrooms. News stories of educators contracting the virus in school buildings and passing away from it are not uncommon. As schools began reopening, school faculty and staff returned to buildings, taking the required precautions to keep the building safe for all present. Indeed, in July 2020, we heard about three teachers who shared a classroom in Arizona. Despite the recommended precautions of social distancing, using hand sanitizers, and wearing masks, all three contracted COVID-19, leaving one teacher dead (Henderson, 2020). By September, we knew of at least the death of six teachers since the reopening of schools (Shepherd, 2020). Since then, the numbers continue to increase. The loss of the lives of these educators profoundly impacts their families, students, and their larger school communities.

## Families

In pandemic times, it is not uncommon for students to have a family member lose their jobs, or to have physically lost a family member due to the disease, or had an immediate relative become ill, leading to medical assistance and expenses. For many families, the immediate loss of income or the physical loss of family members leaves little time to grieve as the family must also focus on survival. Aside from grieving the loss of a family member, the loss of one person can have a detrimental effect on the home and family structure. For example, if an elder or an older sibling/relative, who provides caretaking for the children when parents or guardians are at work, has passed away or become severely ill due to COVID-19, the family has not only lost a family

member, they have also lost childcare. Losing childcare might not be as painful as losing a family member; however, it can provide ample financial stress as childcare is expensive and may cause one or more guardians to stay at home to care for the children. Another possibility is that the older sibling, or an extended family member, must now be the caretaker for the younger children, even if they are in school trying to do their studies.

Likewise, if the head of a household has passed away due to COVID-19, the family has lost both a family member and the primary income source. If a parent/guardian, or the head of household, is no longer working because their place of employment is closed or they were laid off, they have had to leave work to care of the family members; if they are too ill to work, or they have passed away, it could also mean a loss of access to health insurance (assuming the person's employment provided health insurance for the family). Such losses can further increase the risk of families falling below the poverty line, which has significant implications on survival, mental health, health care, food security, access to technology, and more. Therefore, the physical loss of family members and the loss of one's jobs have immediate effects on the health and safety of the family. Yet, there is little time to grieve as the survival of the family members takes precedence.

The loss of elders in families and communities contributes to the loss of intergenerational and historical memory. For some families, this might mean a loss to cultural connections and historical memories, such as memories of "home" or the birthplace of the elder, memories of family members, such as great-great-grandparents or family members in other parts of the world, family language, food, and family recipes, and more. Particularly, there have been several losses of elders in American Indian and Alaskan Native families, as members of these communities have seen a disproportionate amount of deaths due to COVID-19 (Healy, 2021). One person Healy (2021) interviewed described losing so many elders as a "cultural book burning," and "losing historical knowledge, encyclopedias." The familial and community losses of elders experienced during the COVID-19 era can manifest in intergenerational memory ruptures.

## COVID-19 Pandemic and Intersecting Historical Oppressions

The years 2019–2020 were pivotal in bringing attention to multiple crises around the globe, and particularly in the United States. Indeed, there is no denying that they increased attention to systemic racism, anti-Blackness, racist nativism, sinophobia, and white supremacy/white rage and of course, the COVID-19 pandemic. As these conversations strengthened, discussions named "intersecting pandemics" grew. Scholars, health care professionals, and media analysts acknowledged racism and white supremacy as "pandemics," and more specifically, "intersecting pandemics" to the COVID-19 crisis. The pervasiveness of racism and white supremacy are intricately linked to the disproportionate effects of COVID-19 on Communities of Color. However, metaphors that use illness and disability are often used for weakness, limitations, and



disadvantages (Annamma et al., 2017) and consequently can be interpreted as ableism. With regard to using the metaphor of “intersecting pandemics,” Annamma (2021) tweets, “These metaphors evade the way white supremacy and racism are purposefully built into structures and purposefully enacted.” We recognize the salience of this argument and the importance of not using disability or illness as a metaphor for racism and white supremacy. We also acknowledge how the notion of “intersecting pandemics” has been used by scholars, such as Gloria Ladson-Billings (Dixson et al., 2020) to convey the severity of the current period. As such, we recognize the nuances, possibilities, and tensions of both of these concepts.

The Black Lives Matter Movement has called on the United States and the institutions within it (e.g., schools) to do better—to be better—for Communities of Color by acknowledging where systemic racism exists and disrupting oppression in all its manifestations. Indeed, the undergirding of racism, anti-Blackness, racist nativism, and white supremacy in our schools and communities, as well as economic oppression, influences how the pandemic, trauma, loss, and grief is materialized and processed, or not processed. Thus, educators should consider how to navigate these intersecting historical oppressions with the pandemic as schools begin to respond to the needs of the stakeholders in their communities, from staff and faculty to students and families. In the next section, we imagine what schools could look like as sites of collective healing.

## POSITIONING SCHOOLS AS SITES OF COLLECTIVE HEALING

As we consider the collective trauma being experienced simultaneously by teachers, students, families, and communities, and which is heightened by the COVID pandemic and intersecting historical oppressions that are disproportionately impacting and targeting historically marginalized communities, we must work to (re)imagine the role schools play in not only acknowledging collective trauma but also in intentionally creating a space for healing. In other words, it is not enough for schools to respond to trauma through a trauma-informed approach; rather schools need to be intentionally transformed into sites of resistance that center collective healing *via* a radical healing justice framework.

To explore this notion further—positioning schools as sites of collective healing—below, we provide a rationale for how critically challenging trauma-informed approaches can make space to center collective healing *via* a radical healing justice framework (Wallis, 2012; Ginwright, 2015). We then conceptualize the notion of radical healing justice within schools by (re)imagining schools from sites that respond to assumed traumas to sites that center collective healing. As such, we invite readers to join us as we (re)imagine the transformation of schools from sites that respond to trauma (and which often ignore the legacy of schools serving as sites of trauma and violence themselves) into spaces that work to humanize collective experiences by anchoring healing through actions grounded in

resistance, love, collective well-being, hope, and solidarity with and alongside teachers, students, families, and communities.

## Making Space: Shifting From a Trauma-Informed Approach to a Healing-Centered Approach

Emerging from medical and mental health discourses, trauma-informed approaches in schools seek to respond to and help address trauma(s) students enter schools with (Overstreet and Chafouleas, 2016; Avery et al., 2020). Through this model, schools become “a key entry point for mental health services and assessment of trauma, [however] teachers and school staff are generally not sufficiently trained in trauma-informed care” (Dutil, 2020, p. 173); resulting in students who are navigating trauma to experience harsher disciplinary action (Crosby et al., 2018; Dutil, 2020). Conversely, Thomas et al. (2019) who made a meta-analysis of trauma-informed approaches in schools found that research on building emotionally healthy school cultures “[...] places a strong emphasis on using new knowledge to employ empathetic responses to students who are trauma-exposed and avoiding approaching students from a deficit perspective when they exhibit behavior that is considered problematic or disruptive” (p. 426). When considering this dominant framing of trauma-informed practices, several questions arise: (1) Who is defining what is considered to be “problematic or disruptive” behavior? (2) Which students are viewed and positioned as “trauma-exposed”? (3) In what ways does this label intersect with a student’s race, gender, socioeconomic status, immigration status, dis/abilities, language, ethnicity, etc.? and (4) How frequently are notions of “trauma-exposed” discourses used as mechanisms and vehicles to “explain” or “justify” inequitable practices in schools that perpetuate deficit ideologies of historically marginalized students?

Critical scholars (Crosby, 2016; Crosby et al., 2018; Quiros et al., 2019; Dutil, 2020) have not only critiqued the practices of trauma-informed approaches in schools but have also extended the argument to highlight how trauma-informed practices delimit and reduce people to the sources and sites of their trauma (Ginwright, 2018). Ginwright (2018), reflecting on a moment when a student during a healing circle exclaimed, “I am more than what happened to me, I’m not just my trauma,” noted that trauma-informed approaches fail to fully humanize students and their experiences and instead focuses on their “harm, injury, or trauma” (paragraph 5). Similarly, Thomas et al. (2019) argued the need to “[...] recognize how contemporary conceptions [of trauma-informed approaches] re-inscribe deficit perceptions of individuals and essentialize their experiences” (p. 446). Duncan-Andrade (2009) elaborated on this point, further arguing that “[students in urban schools] are *not* the social stressors we are trying to overcome, and they must not be misinterpreted as deficits in our students” (p. 192).

Thus, by focusing on trauma as an individual experience, we not only pathologize the trauma (Ginwright, 2018), but we also fail to acknowledge and address the shared and collective experiences of a people, family, and community. In effect, trauma is situated as an individual rather than as a collective

experience (Ginwright, 2018). Through this individualistic and pathologizing lens of trauma, schools get marred down on practices that seek to “treat” the trauma and individual, missing the opportunity to (re)imagine possibilities of collective healing. Given the context (i.e., the COVID pandemic which intersects and is magnified by historical structural oppression grounded in white supremacy) and the significant sense of loss and grief being experienced by teachers, students, families, and communities (and which is further heightened for historically marginalized communities) centering collective healing rather than responding to individual student trauma(s) is of critical importance within schools.

## Radical Healing Justice as Collective Healing

As hooks (2001) noted, “[r]arely, if ever, are any of us healed in isolation. Healing is an act of communion” (p. 215). By centering healing as an act of communion, we disrupt the individualistic and pathologizing rhetoric that surrounds trauma-informed approaches and create the space needed to (re)imagine and position schools as sites of collective healing. One way to begin to transform schools from a trauma-informed approach to a healing-centered approach is through a radical healing justice framework (Wallis, 2012; Ginwright, 2015).

An emerging framework and movement, healing justice as described by community organizers Tanuja Jagernauth and Stacey Erenberg (Wallis, 2012), has two central aims: (1) to focus on collective healing and well-being, and (2) to transform institutions and relationships that are causing harm (Ginwright, 2015). At the crux of the framework is the positioning of collective healing as a political action; one that collectively seeks to center community healing by grounding actions in dignity (Ginwright, 2015) and critical hope— a critical (re)imagining of sacrifice, selflessness, and transformation (Duncan-Andrade, 2009; Freire, 2014).

Communities engaged in collective healing operationalize it by focusing on the “three R’s” —restoration, resistance, and reclamation (Ginwright, 2015). According to Ginwright (2015), restoration seeks to restore collective well-being, meaning, and purpose. The very act of recentering the collective becomes political in that it is no longer focusing on the individualistic notions of well-being; instead, it is placing and centering collectivism over individualism. In this way, “[r]estoration of community [becomes] a result of political power agency, voice, and action” (p. 39). Resistance in radical justice healing disrupts and rejects Eurocentric understandings of justice by situating hope as a central component of social change (Ginwright, 2015). This becomes particularly critical given the current context that results in an unsurmountable loss and grief for historically marginalized people and communities. Lastly, reclamation, which in many regards is connected to a sense of critical hope, creates the space for communities to “reclaim, redefine, and reimagine a possible future” (Ginwright, 2015, p. 40).

We further nuance the radical healing justice framework by anchoring it in Duncan-Andrade’s (2009) notions of critical, Socratic, and audacious hope. According to Duncan-Andrade, critical hope in and of itself serves an act of resistance and “demands a committed and active struggle” (p. 186). Composed

of three elements—material, Socratic, and audacious hope—critical hope becomes the foundation that supports a Socratic and audacious hope (the elements used in our framing of radical healing justice) and also becomes the foundation for a radical justice healing framework in schools. Emerging from critical hope, Socratic hope urges teachers and students to foster solidarity amongst one another by humanizing each other’s life experiences, inclusive of trauma, grief, and loss (Duncan-Andrade, 2009). Thus, Socratic hope requires that teachers, students, families, and community members alike “[...] painfully examine [their] lives and actions within an unjust society and to share the sensibility that pain may pave the path to justice” (p. 187–188). Meanwhile, an audacious hope shares the burden of loss, grief, and suffering “as a manifestation of a humanizing hope in our collective capacity for healing” (Duncan-Andrade, 2009, p. 190). In other words, an audacious hope challenges individualistic notions of trauma, pain, and healing, and frames it as a collective responsibility. Lastly, and beyond our model of how we are conceptualizing a radical healing justice framework, a material hope provides resources and connections to young people so that they can have agency to grapple with the forces that shape their daily realities.

Collectively, critical, Socratic, and audacious hopes provide the underpinnings of a radical healing justice framework (Figure 1). By intentionally engaging with a radical healing justice framework that is guided by a critical, Socratic, and audacious hope, we shift from individualistic understandings of healing to focus on the collective healing of communities and begin to (re)imagine schools as sites of collective healing.

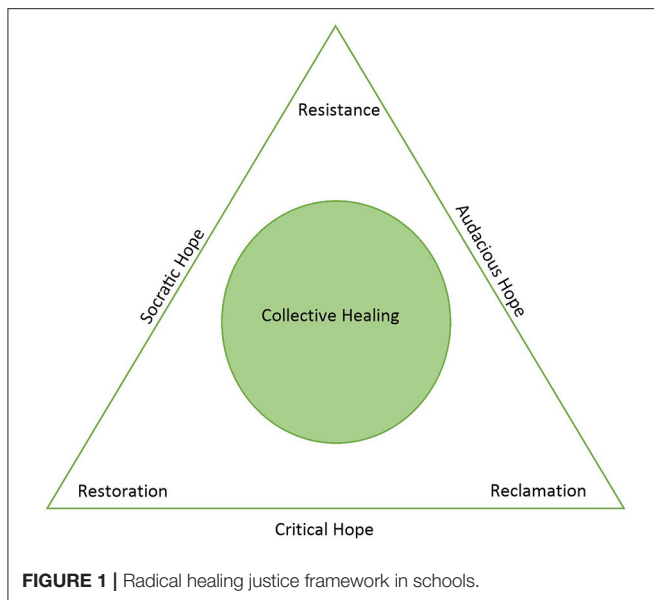
## (Re)imaging Schools as Sites of Collective Healing

Below, we apply a radical healing justice framework grounded in critical, Socratic and audacious hope to (re)imagine the transformation of schools as collective sites of healing— sites of healing that not only address the current moment we find ourselves in (i.e., responding to the COVID pandemic and intersecting historical oppressions) but also the intergenerational traumas (Dutil, 2020) that are experienced by historically marginalized students, families, and communities.

## Resistance

As previously noted, a radical healing justice framework and its three “R’s” are anchored in critical hope. Critical hope, however, cannot and should not be the sustaining factor for collective healing. It requires that it is coupled with action— an action that resists individualistic Eurocentric notions of healing and justice and centers collective healing, thus becoming in and of itself a political act of resistance. Schools and school leaders then must be willing to leverage power for the collective well-being and healing of the community. As noted by Prilleltensky (2008).

Power is pivotal in attaining wellness, promoting liberation, and resisting oppression. Contrary to fragmentary disciplinary discourses, power is never political or psychological; it is always both. The same goes for wellness, liberation, and oppression; they are never political or psychological; they are always both (p. 116).



Thus, even the very act of centering collective healing and anchoring it within the critical hope shifts the traditional power dynamics that perpetually exclude historically marginalized students, families, and communities from the decision-making processes of the school (Olivos, 2006; Fernández and López, 2017; Ishimaru et al., 2018) to a model that centers their current realities and intentionally involves them in the functions and processes of the school.

By (re)imagining schools as sites of collective healing, we enter into a phase of critical hope and rebirth. Following the work and words of *La Junta Collective* — a collective in Los Angeles comprised of teachers, students, families, and communities that seek to transform schools into spaces of collective healing. “We [teachers and school leaders] cannot create healing spaces unless [we], ourselves are in the work of healing our own traumas” (Catubay and Patton, 2020). Just as students are expected to process healing, so should school leaders, teachers, and staff. However, as previously noted, this healing should not be occurring in isolation, nor should healing be “fixed” to locating the trauma within people. Rather than pathologizing the individual, a radical healing framework resists practices that solely frame healing as an individual process grounded in “savior” complexes. That is, the work of “healing” others assumes that people need to be “cured” and “saved” and that we are void of any grief, loss, and trauma. School leaders and teachers must intentionally take action that shifts power dynamics and situates it with and among students, families, and communities. In this way, a collective approach grounded in critical hope frames how grief, loss, and healing are understood and navigated within schools, transforming them into sites of collective healing.

The first step in engaging in a radical healing justice framework necessitates school leaders and teachers to not only acknowledge the loss and grief that students, families, and communities are experiencing but also to acknowledge it for

themselves. By removing the veil that seemingly separates—and further perpetuates a pathologizing narrative of students—humanizing elements from classrooms and schools, school leaders, and teachers begin to challenge individualistic notions of loss, grief, trauma, and healing. More clearly stated, by recognizing that trauma, loss, and grief are not and should not be an individualistic experience and instead be framed as experiences that can connect students, families, communities, teachers, and school leaders, the notion of collective healing can then be centered. In this way, school leaders and teachers collectively resist individualistic Eurocentric understandings of trauma, loss, and grief and engage in a Socratic hope that seeks to build solidarity by sharing these experiences with and amongst themselves, students, and families with the aim of fostering collective healing.

Teachers, for instance, might share their own experiences of loss and grief with colleagues and/or their own students. By engaging in this deeply vulnerable, painful, selfless, and yes, perhaps, uncomfortable act, teachers are simultaneously living and modeling Socratic and audacious hope. They are demystifying this individualistic notion of experiencing loss and grief while working to build solidarity with others. It transforms the space and conversation from “*I am experiencing this*” or “*they are experiencing that*” to “*we are experiencing this*” and in the process, fosters a humanizing and collective healing experience. Thus, if we want to truly transform schools into sites of radical collective healing, then school leaders and teachers must engage in these bold, vulnerable, painful, and courageous steps. It would be hypocritical; otherwise, we expect students to do so if we as teachers and school leaders are unable or unwilling to do this ourselves.

## Restoration

Restoration seeks to establish collective well-being, meaning, and purpose. In other words, restoration focuses and centers around the needs of the community. In order to do this, schools and school leaders need to first acknowledge that they, along with teachers, students, families, and communities, are experiencing unprecedented levels of grief and loss related to the ongoing COVID-19 global pandemic. As previously noted, this grief and loss are further emphasized by white supremacist epistemologies and structures that have resulted in: (1) anti-Black rhetoric and white rage that has systematically criminalized Black bodies, including murders at the hands of law enforcement officials; (2) xenophobic policies and rhetorics that have dehumanized un/documented people and families through practices including the forced sterilization of women in detention centers (Cage, 2020); and (3) an economic crisis that has been dubbed as the “worst economic crisis since the 1930’s depression” (BBC, 2020b). These compounded realities are being lived, experienced, and navigated by historically marginalized students, families, and communities—a necessary truth that must be acknowledged and centered in schools.

As noted by German Gallardo, a member of *La Junta Collective*, “if you really want to have that collective healing, if you really want to create a space where the students and the families can heal, you as a member of that community, must

first see yourself as a member of that community and not an outsider” (Catubay and Patton, 2020). According to this logic, school leaders, teachers, and staff must first see themselves as members of the broader community. In doing so, an intentional shift is created—where we no longer are focused on individual healing; rather, we are invested in the collective healing that centers the community and that is framed by a Socratic and audacious hope.

Engaging in community conversations in classrooms with students, amongst teachers, and with families and community members can create another point of entry to practicing radical collective healing in schools. Reflecting on their practice of collective healing, *La Junta Collective* noted that talking circles allowed for relationships to be built and dialogical conversations to be established between teachers, students, families, and community members. Talking circles are in and of themselves spaces to build community, center community needs, recenter healing within schools, and restore humanity within the school walls. “A lot of times it turns into things that are just emotional: sharing with each other, being in a circle, talking about who we are, what we do, what we believe in, like one of the first projects we do is them understanding who they are and their own history and why they’re there” (Catubay and Patton, 2020). School leaders and teachers can begin this practice in their own schools.

For instance, teachers might engage in the practice of talking circles with students within their own classrooms. The talking circles can be framed around experiences related to the COVID-19 pandemic—how it perhaps has impacted their lives, family lives, community, etc. Subsequent talking circles can then expand to centering student experiences with how COVID and intersectional historical oppressions have impacted them, their families, and communities. Through this process, collective healing is further centered for students as elements of Socratic and audacious hope guide their work—building solidarity and collective responsibility amongst students. Helping to ensure that collective healing is being centered beyond students, school leaders might want to create time and space for teachers to engage in their own talking circles as well as create space for parents and community members to be involved in separate talking circles. Ultimately, the goal would be for talking circles to exist that involve teachers, students, families, and community members. In this way, talking circles set the tone for collective well-being, meaning, and purpose—the aim of restoration and Socratic hope.

## Reclamation

Reclamation allows communities to reclaim and redefine healing that is anchored in critical hope and dignity and creates space for communities (in this case, schools) to reimagine future possibilities. By engaging in actions that focus on collective healing rather than responding to and “treating” individual student trauma(s), schools reclaim and redefine healing. In other words, reclamation through a radical healing justice framework forces communities to consider how hope, resistance, and action are interconnected to not only center collective healing but also to reject and disrupt Eurocentric understandings of healing. When school leaders and teachers allow themselves to engage in

deeply vulnerable, painful, selfless, and courageous acts of sharing their own loss and grief with each other and their students, they are inherently rejecting individualistic Eurocentric notions of loss and grief and instead are living and modeling Socratic and audacious hope. In other words, they are redefining and reclaiming what collective healing can be within schools and ensuring that they are a part of that process as well.

This is further expanded with the implementation of talking circles. By intentionally creating space and time for sustained talking circles, schools are unapologetically humanizing teachers, students, families, and community members by allowing collective healing to occur. Similarly, Tran et al. (2020) centered the importance of humanizing schools through a talent-centered education leadership (TCEL) approach especially amidst crisis, and the COVID pandemic, in particular. While Tran et al. focused their framing around how building and district leaders can support teachers, many of the elements they describe lend themselves to a radical healing justice framework within schools. For instance, Tran et al. described how district and building leaders frequently held zoom meetings to check on the mental health of teachers and staff. Through simple actions and gestures as these (e.g., creating intentional space *via* faculty meetings that are specifically focused on the mental health of the larger school community), school leaders begin humanizing the schooling space for teachers and staff. These structural acts further ensure that a Socratic hope is cultivated amongst school leaders and teachers and can ultimately lend themselves as sustained strategies that foster a radical healing justice framework more broadly with students, families, and community members.

However, we warn against school officials stopping at strategies that center only teachers, students, and school staff. Rather, school officials should work alongside students, families, and community members to create structures, policies, and practices that maintain collective healing through a radical healing justice framework grounded in critical, Socratic, and audacious hope. Ultimately, when the community is centered in the process of healing, we can (re)imagine and position schools as sites of collective healing, thus, engaging in a political act of resistance that is anchored in dignity, critical hope, and love.

## CONCLUSION

The intersecting pandemics have continued to deepen the already existing systemic inequities in historically marginalized educational experiences of the communities. Indeed, we cannot separate some of the challenges that have come to light from more massive historical, social injustices. For instance, the technological divide has been growing over time, as have food insecurities—placing enhanced demands on families as well as the schools that serve them. Similarly, The Black Lives Matter Movement has brought attention to anti-Blackness, police brutality, white rage, and deeply rooted social inequities that have existed for centuries. These inequities are not only made visibly by the vastly different COVID-19 infection and death rates in Communities of Color, but result in deep skepticism, mistrust,

and suspicion of government actions to remedy the situation for these communities (Fields et al., 2021). The fact that Black and Brown communities lag behind their white counterparts in COVID-19 vaccine rates is a key example of this deeply-rooted mistrust (Cosgrove et al., 2021).

As we continue to respond to the global pandemic, we must also (re)imagine a space that helps heal individuals from these and other historical systemic injustices. We believe that schools can serve this purpose. A key first step in moving in this direction is to fundamentally question, if not abandon, the urgent need to get “back to normal”—which includes pressures to re-open schools as soon as possible (García and Weiss, 2020). We must keep in mind that schooling under “normal” conditions has largely not worked for Communities of Color. This was true well before the COVID-19 pandemic, and will continue to remain true well after the pandemic is over. Instead of rushing to re-open schools—pretending that students, parents, and educators alike were not substantively impacted by school closures, remote instruction, unstable employment, and a host of other social, health, economic and political traumas—we would be better suited to re-imagine schools as spaces of collective healing where

trauma and grief are not downplayed or individualized, but critically shared, explored, and ultimately transformed.

By acknowledging the various manifestations of loss and grief for all school stakeholders, we can position schools to respond in ways that are more humane, restorative, and compassionate. When we position schools as sites of collective healing, we engage in the act of political resistance that rejects Eurocentric and individualistic notions of healing and instead restores our collective existence through dignity, love, critical hope, and transformation. Eventually, schools become sites of collective healing: where trauma, pain, and grief are not aberrant individual considerations to be treated, but normal human processes that are upheld and reworked for the benefit of the collective whole.

## AUTHOR CONTRIBUTIONS

LC worked on the logistics of the manuscript, from arranging writing sessions to formatting, grammar editing, and uploading the manuscript. All authors contributed a section amounting to equal participation and worked together to provide feedback on each section.

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