A community of care: Student conduct during the Covid-19 pandemic

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Abstract
During the COVID-19 pandemic, universities adjusted policy and protocols to manage the environment and mitigate the risk of virus transmission among the campus community. In the early semesters of the pandemic, these changes restricted student behavior that would have otherwise been encouraged, such as attending gatherings, and often resulted in conduct violations that had penalties, including removal from campus. This article will explore how one university implemented a Community of Care ethos to promote the health, safety, and wellbeing of the campus community and will identify the challenges and lessons learned during the COVID-19 pandemic.

INTRODUCTION

Student conduct philosophy places emphasis on balancing the rights of and responsibilities of members of the community (Boylan, 2004). During the COVID-19 pandemic, balancing the rights of the community and enforcing appropriate behavioral expectations for mitigating the public health crisis illuminated this philosophy. Team members’ enforcing and holding students accountable to public responsibility was paramount to minimizing the spread of the virus.

Simultaneously, the onset of the COVID-19 pandemic triggered universities to rethink student code of conduct policies and practices. Most universities moved from in-person learning formats to online synchronous and asynchronous learning. Faculty and staff began working remotely. Students were isolated and/or quarantined on-campus, and some left the campus entirely. Students who were not accustomed to attending class online were suddenly placed in online learning environments for which they may not have known the rules of appropriate behavior.

The shift to online learning environments gave rise to new types of disruptive classroom behaviors such as Zoom-bombing and using racial epithets in the chat features of video conferencing platforms. Although many universities had online programs prior to the onset of COVID-19, many students conduct systems were unprepared for the number and types of complaints received as the shift to large-scale online learning occurred. Due to
the anonymity that some online formats allow, universities faced difficulty identifying the students responsible for these disruptive behaviors.

In addition to newly emerging online behaviors, institutions that retained some degree of in-person opportunities also experienced student behavior that required quick evaluation of how COVID-19 mandates were enforced in order to protect the safety of the community. Students were expected to adjust to changing guest policies in residence halls, and gatherings that were commonplace previously were considered virus super-spreader events in a day’s time. The implementation of policies related to facial coverings and physical distancing at universities created a need for enforcement measures. Different universities approached these new needs in a variety of ways. Some universities wrote new policies into their student code of conduct, whereas others crafted new ways to use existing policy to address these behaviors.

In an Education Advisory Board (EAB) survey, approximately 40% of universities said they would ask students to sign agreements to follow university and public health guidelines. Thirty-seven percent responded that they were considering making changes to their student code of conduct policies, and another 17 percent stated that they had already updated code of conduct policies to respond to new expectations of students (Badger, 2020; Anderson, 2020). The rapidly changing nature of the virus also required institutions to make changes to policy and required for flexibility in the implementation as they shifted. At Arizona State University (ASU), a Community of Care agreement was created in addition to utilizing existing policies. This provided a shared agreement among students, faculty, and staff about behavioral expectations to abide by in order to maintain a safe community.

A COMMUNITY OF CARE APPROACH

ASU implemented a common ground understanding of a “Community of Care” ethos. The Community of Care ethos is based on the belief that all members of the community are responsible for keeping the community safe and healthy. In a Community of Care, students were held accountable for the university's expectations and public health guidelines. The Community of Care included education for students and community members on behavioral expectations and institutional policies and a network of staff resources for support. Because ASU committed to maintaining service to students during the pandemic, special emphasis was placed on implementing mitigation strategies in support of not disrupting the education of students. As such, the Community of Care was designed to seek agreement from students and community members to abide by stated expectations while adopting an ethos of care during the COVID-19 pandemic. The Community of Care agreement provided common language for the ASU community while promoting the health and wellbeing of our community members.

During the ASU Community of Care design, communication of shifting expectations to the campus community had to be considered. With more students accessing their education online, getting the policy or community expectations out to a more dispersed student body was critical. The Community of Care was communicated through a series of videos, as well as through web-pages, social media platforms, emails, and community message boards. Additionally, ASU used a network of staff for calling campaigns to connect students to new expectations while deploying some staff around campus to address individuals who were non-compliant with masking and distancing expectations. The purpose of these efforts was to execute a communication strategy, an enforcement strategy, and a strategy for support.
In addition, ASU implemented a Community of Care engager model. The purpose of the engager model was to provide students who were in isolation and/or quarantine with a single point of contact for wraparound support services. The engagers were members of the Student Services division at ASU and provided consistent outreach and coordination of support resources such as food or other basic needs. The engager model was implemented as a sustainable strategy to scale support in an ongoing way.

A community of care emerged during the COVID-19 pandemic

Once the Community of Care agreement was implemented, new behavioral trends began to emerge in the environment that required additional attention by conduct staff. Masking and social distancing requirements proved difficult to enforce, and the consequences to the community when not followed often required swift and stern responses from the university. ASU began utilizing interim actions to remove students from the campus environment immediately if they did not follow the Community of Care agreement. Once students and staff started to understand and adopt the Community of Care agreement, ASU community members began reporting non-compliance with the community policies, while students took an interest in reporting their peers who were not following Community of Care expectations.

Interventions had to be created to educate students on the dangers they put themselves and their peers in when COVID-19 expectations were not followed. Educational interventions to address behaviors in online classrooms and on social media sites were implemented. Gatherings on and off campus carried extremely high consequences. Pre-pandemic, gatherings might result in educational sanctions; however, during the pandemic, sanctions shifted to removal from university housing and in some cases removal from campus entirely. Yet, students were forthcoming about reporting their peers out of concern for the public's health.

Community of care commitment and accountability: On-campus residents

One area that students were held accountable to the Community of Care was in on-campus housing. ASU housed approximately 10,000 students during the COVID-19 pandemic. The new policies restricted the number of visitors a residential student was permitted to have in their room, and visitors from outside of the community were not permitted.

Residential students participated in the Community of Care Commitment training videos prior to arrival to campus in the fall 2020. The videos emphasized fundamental shared responsibility for the health of the ASU community. The topics included physical distancing while on campus, face coverings, advice from peers on how to remain socially connected, and setting boundaries that support public health. Residential students were not able to move into their room until they completed the training videos and agreed to the Community of Care guidelines by signing a document of commitment.

In addition, residential students received contact from their student housing staff member, the Community Assistant (CA), prior to their arrival. This contact included pre-recorded videos, online group messaging applications and social media, marketing materials, and e-mails. The CA reminded them of tasks to complete prior to moving in, such as completing the Community of Care Commitment training and submitting a negative
COVID-19 test result to the university. Upon arrival, CAs hosted mandatory virtual floor meetings, and students received e-mails and marketing materials to reorient them to the Community of Care Commitment. CAs played an important role in holding students accountable to the Community of Care agreement. CAs were expected to communicate important information regarding students’ responsibilities for keeping the community safe during their intentional interaction discussions with students.

Additionally, peer-to-peer accountability was encouraged because it was an opportunity for students to learn from their peers how failing to abide by the Community of Care agreement affected other students. One strategy ASU used was the implementation of a Residential Review Board (RRB) as a peer-to-peer accountability initiative during the pandemic. The RRBs reviewed cases involving noise, face coverings, and physical distancing. Students who violated these policies were scheduled for a virtual meeting with the RRB to discuss their involvement in the incident, learn about how their behaviors had affected the community, and share what they learned from the incident. From there, the RRB made decisions on appropriate sanctions to hold students to the Community of Care agreement.

Addressing violations to the community of care

One element of the Community of Care related to student conduct at ASU was the consequences for students who were found in violation. When students violated the policy or did not follow the Community of Care Commitment, the student conduct office and university housing office would collaborate to evaluate appropriate consequences. Some consequences included removal from housing for hosting a social gathering or for repeat violations of the Community of Care that put the residential community at risk.

One lesson learned during this process was the need to evaluate the communication patterns and plans for addressing this type of behavior with students. The removal process became complex when students removed from housing had nowhere to go off-campus on a short-term basis. Concerns about the possibility of contracting or spreading COVID-19 during the removal process were also considered during these actions. Parents and students initiated a review of the temporary housing removal process, which resulted in the temporary removal process being replaced with educational conversations, along with further investigation and a warning about the potential for permanent removal from campus.

In addition to on-campus students, ASU recognized the need to address the behavior of students living off-campus. Large gatherings not following COVID-19 safety practices were of particular concern to community members residing near or around students. University officials also found ways to hold students accountable for failing to isolate after a positive COVID-19 test, flying home to family while being positive for COVID-19, and for attending off-campus events while still contagious with the virus.

Holding students accountable for their decisions and actions and enforcing policies and expectations became increasingly more important during the global pandemic. ASU provided clear communication, policy adjustments, and redeployment of professional and student staff who engaged in difficult conversations with students who chose not to abide by the Community of Care. Additionally, ASU invested time to educate students on the purpose of doing their part to keep their communities safe. As a result, to date ASU was successful in preventing a COVID-19 outbreak on campus.
INFLUENCES ON THE STUDENT CONDUCT POLICY, PROTOCOLS, AND PRACTICE

A myriad of other factors occurring in the national landscape influenced the enforcement of the Community of Care during the COVID-19 pandemic. Some of these factors included socio-cultural influences such as the Black Lives Matter movement, the 2020 Presidential Election, and the emergence of a new wave of student activism on campuses. Other influences impacting decision-making in student conduct follow-up included CDC health guidance changes, county health department changes, and how those changes in turn changed protocols. Another influence impacting the way in which sexual misconduct, domestic violence, stalking, and sexual harassment allegations were addressed was the implementation of the August 2020 Title IX regulations issued by the Office of Civil Rights. The newly defined regulations required institutions to shift to a live hearing model of adjudication, which created new challenges for resolving Title IX matters in a digital format during the pandemic.

Another significant influence on policy decisions during the pandemic were the mandates put into place by states’ governors’ orders. Stay at home orders were executed, essential personnel were defined, local establishments were closed, mask mandates were placed, and limits on numbers of people in rooms were issued. Later, executive orders were lifted at various times, significantly influencing policy decisions and revisions (Fitzsimmons, 2021; Redden, 2021).

Underscoring the critical need to monitor the environment to prevent COVID-19 transmission, policies and protocols that would have otherwise been non-existent are now a part of administrative decision-making. The intersection of how students were coping with the social-political climate, voicing thoughts on campus, and being restricted in how they were able to do so in a safe way was a phenomenon to be navigated during the pandemic. Universities were challenged on strategies for how to respond, how to provide support, and how to empower the voice of the students, while balancing the health of the community, without restricting freedom of speech (ASCA Virtual Connect, 4.23. 2021).

The dichotomy of keeping students, faculty, and staff safe, while advancing connections, engagement, and service to the students was another way in which the Community of Care was influenced. The precautions set forth from the lens of a caring community provided for these critical connection points. In an unknown and unprecedented time when parents, community members, faculty/staff, and students were seeking clarity in the pandemic, policy decisions were made in the best interest of public health. These internal and external influences on policy, protocols, and practice were factors considered when developing the Community of Care at ASU.

LESSONS LEARNED IN STUDENT CONDUCT DURING COVID-19 PANDEMIC

Amid the COVID-19 pandemic, the lessons learned related to student conduct were plentiful. The pandemic posed challenges and opportunities for student conduct staff to whom serving the students and the campus community during the long-standing crisis proved to be a marathon. Given the increase in the number of cases reported related to the Community of Care expectations, there was a need to be creative and innovative in how these expectations were enforced. Shifting staff to assist with addressing COVID-19 conduct violations, rapidly changing to an online modality of adjudicating student conduct
cases, while still addressing all the other conduct/behavior that occurred regularly, posed balancing challenges that staff had to overcome.

Not only did policies change in response to COVID-19, the way in which code of conduct hearings and investigations occurred changed. Almost exclusively, meetings regarding code of conduct allegations moved to online formats. Video conferencing platforms became the norm for universities meeting with students alleged to have violated codes of conduct. One of the challenges present in a virtual space, that universities had to address, was the communication that could get lost over video conferencing and the compassionless feel associated with meetings in this format.

Throughout, it became evident that clarity on what behaviors were expected of students, how to educate them on these behaviors, how to hold students accountable for the behavior, and the consequences for their actions was paramount. Literature on crisis management surmises that, during times of crisis, humans need leadership and communication (Bundy et al., 2017; Dougherty, 1992; Tredgold, 2020; US Dept of Education, 2007). This was illuminated during the COVID-19 pandemic, specifically in relation to student conduct, policies and accountability. In reflection, we learned that it was important to get clear communication to students on policies early, often, and in multiple ways. The traditional acknowledgement of students reading the code of conduct was not sufficient. As policies changed, strategies for reaching the student body became more important. Because students, parents, and others did not fully grasp the gravity of what could happen if they were not compliant with the expectations, education on the impact of the virus was necessary.

We learned that team members who had interactions with students were faced with difficult conversations to provide a common understanding on policies such as why the pools and gym facilities were closed in residence halls, or why one-way entry points may have been closed down, to name a few. We also learned that communication channels up, down, and across the organization were equally important when it came to community compliance and consistency in enforcing the Community of Care expectations and policies. When communication was not clear or when there was a delay in communicating through the organization, or when our constituents simply did not agree with the policy decisions being made, we met challenges and resistance. When students were placed in isolation, they didn’t know how to behave or what was expected of them, and the breakdown in our clarity was evident. Another challenge of communication was with the use of virtual conduct meetings. This format added a barrier to conduct investigators’ ability to observe a student’s demeanor during the conduct meeting. Although this barrier was challenging, the virtual meeting did provide for a level of efficiency in managing the overall student conduct numbers in this year.

In a year when protocols were constantly changing as we learned more about COVID-19, staff adapted to the enforcing of policies exceedingly well. The challenge of policy enforcement in a Community of Care in the residential environment also presented opportunities for intentional connections with students in a virtual and in-person environment. When students were faced with isolation or quarantine due to testing positive for COVID-19 or having been in close contact with someone who did, staff were intentional in the connection to each of these individuals. Another lesson learned was the importance of staying the course in policy enforcement and accountability. Although this is not a new concept to student conduct team members, the stamina needed during this public health crisis was unlike that which has been seen in other conduct situations. As these challenges presented many lessons learned for the student conduct staff, they also presented opportunities for future practice. The next section will discuss anticipations for
the future and recommendations for coming out ahead on the other side of the COVID-19 pandemic.

**CONCLUSION: LOOKING AHEAD**

Scientists predict that COVID-19 is not going away. While there may be some level of immunity as we begin to see more people vaccinated, there is much left to be considered as we emerge on the other side of the pandemic. From the start of the global pandemic in March 2020 throughout the subsequent 18 months, students were largely working on their studies remotely and were devoid of their previously accustomed social interactions. After the vaccination became available and plans for a fully immersive academic year got underway, restrictions began to ease, and students began engaging with each other and the social environment more regularly. During the Fall 2021 semester, students are attending in-person classes, participating in social activities, and residence halls are seeing historically high numbers of occupants. With that has come the influx of students testing the boundaries of what we are calling the Community of Care expectations. In a virtual connect of student conduct officers for Region 2 ASCA, there was discussion about the anticipation that a different type of student behavior may emerge as institutions return to an immersion environment (ASCA Virtual Connect, 4.23.2021).

In reflection, the lessons learned were plentiful during the COVID-19 pandemic and we assert that university staff and leaders in higher education will need to pay particular attention to these lessons learned in an effort to affect student behavioral outcomes in the next several years. One outcome of orienting students to the expectations of appropriate community conduct is an opportunity for students’ learning and development (Boylan, 2004; Brown-McClure & Cooks, 2020; Dannells, 1997). We need to provide social norming campaigns; we need to work with students to co-create organic peer-to-peer accountability related to community health; and we should tell the student conduct story using data collected about virus transmission and the minimal transmission rates due to the precautions put into place during the pandemic.

Student conduct team members have found many great successes in the adjustments made throughout the quick pivot to policy changes, enforcement, accountability, and implementation. One such example is that conduct meetings moved to a virtual environment. The virtual meeting allowed for flexible video recording of the meetings, flexibility on space and physical distancing, and document sharing. It also allowed for advisors to attend from anywhere in the country. Additionally, the virtual appellate hearing boards provided a more equitable power dynamic among all parties, the hearing board, and staff in the meeting. ASU anticipates continuing these changes into the future as we plan for students to return to full immersion on campus.

As states ease the restrictions of masking, physical distancing, and crowd sizes, it is anticipated that students will test the boundaries just in a new kind of way. ASU is ready to ride the wave as the pandemic subsides and will continue to evaluate policy decisions, enforcement, accountability and implementation strategies using these lessons learned during the COVID-19 crisis to strengthen the practices we use in student conduct, student behavioral intervention, student management, and overall health of the campus communities.

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