Seminar Agenda

1. Turn in Crisis Response Role Play Observation papers.
2. Basic Assumptions
3. Caring for the caregiver.

Conceptual Framework of the PREPaRE Model

- Prevent and Prepare for psychological trauma
- Reaffirm physical health and perceptions of security and safety
- Evaluate psychological trauma risk
- Provide interventions and Respond to psychological needs
- Examine the effectiveness of crisis prevention and intervention
Basic Assumptions

1. What crisis events may require school crisis intervention?
   – The characteristics of crises
2. What crisis reactions may require school crisis intervention?
   – The personal consequences of crisis exposure
3. What is school crisis intervention?
   – The PREPaRE model of school crisis prevention and intervention
4. How does school crisis intervention fit into the larger school crisis response?
   – The Incident Command System (ICS)

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Crisis Event Characteristics

1. Perceived as extremely negative
2. Generate feelings of helplessness, powerlessness, and/or entrapment
3. Occur suddenly, unexpectedly, and without warning

Sources: APA. (2000); Brock (2002a, 2006, July, 2006); Brock et al. (2009); Carlson (1997)

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Crisis Event Classifications

1. Acts of war and/or terrorism
2. Violent and/or unexpected death
3. Threatened death and/or injury
4. Human-caused disasters
5. Natural disasters
6. Severe (non-fatal) illness or injury

Source: Brock et al. (2001)
Basic Assumptions

Crisis Event Characteristics

- Variables that affect an event’s traumatic potential.
  - Type of disaster
    1. Human caused vs. Natural
    2. Intentional vs. Accidental

Source: Charuvastra & Cloitre (2008)

Basic Assumptions

Crisis Event Characteristics

- Event predictability, consequences, duration, and intensity interact with the crisis event

Source: Brock et al. (2009)

Basic Assumptions

Levels of School Mental Health Crisis Response

1. Minimal response
2. Building-level response
3. District-level response
4. Community or regional-level response

Sources: Brock (2002b), Brock et al. (1996, 2001)
Basic Assumptions

Activity: Variables that determine the traumatizing potential of a crisis event
1. In small groups of 3 – 4, identify a crisis event that you feel will require each of the four levels of crisis intervention response just identified.
2. Specify the specific crisis event characteristics that generate the specific crisis response level.

Basic Assumptions

Crisis Event Consequences
- The crisis state
- Mental illness
- School-associated crisis consequences

Basic Assumptions

The crisis state is...
- "... a temporary state of upset and disorganization, characterized chiefly by an individual's inability to cope with a particular situation using customary methods of problem solving, and by the potential for a radically positive or negative outcome."

Other characteristics of the crisis state...
- More than simple stress
- Not necessarily mental illness.

Source: Slaikeu (1990, p. 15)
Basic Assumptions

Mental Illness
- Anxiety Disorders
- Substance-Related Disorders
- Dissociative Disorders
- Mood Disorders
- Disorders of Infancy, Childhood, or Adolescence
- Sleep Disorders
- Adjustment Disorders

Source: Brock & Jimerson (2004); Cohen et al. (2010)

Basic Assumptions

The Consequences of Crises on School Functioning
- School behavior problems (i.e., aggressive, delinquent, and criminal behavior)
- School absenteeism
- Academic decline
- Exacerbation of pre-existing educational problems

Sources: Azarian & Skripitchenko-Gregorion (1998a); Brock & Jimerson (2004); Cook-Cattone (2004); March, Amaya-Jackson et al. (1997); Monahan (1993); Nadler & Munt (2002); Silverman & La Greca (2002); Vogel & Vemberg (1993); Yule (1998)

Basic Assumptions

Activity:
The Positive Consequences of Crisis Events
1. In small groups identify some of the positive outcomes (or the opportunities) that may result from crisis exposure.
2. Identify potential positive outcomes for both (a) individual students and (b) school or school systems.
Seminar in Preventive Psychological Intervention  
School Crisis Intervention

Basic Assumptions

School Crisis Intervention
- Facilitate adaptive coping
  - Restore basic problem-solving abilities.
  - Begin to return to precrisis levels of functioning

Sources: Moos & Billings (1984); Sandoval & Brock (2009)

Basic Assumptions

Prevent and Prepare for psychological trauma
- Reaffirm physical health and perceptions of security and safety
- Evaluate psychological trauma risk
- Provide interventions and Respond to psychological needs
- Examine the effectiveness of crisis prevention and intervention

The Relationship Between Phases of a Crisis, the PREPaRE Model, and Levels of Crisis Prevention/Intervention

Pre-Impact
- The period before crisis

Impact
- When crisis occurs

Recoil
- Immediately after crisis threats end

Post-Impact
- Days/weeks after the crisis
- Recovery/Reconstruction
- Months/years after crisis

Preparation & Planning
- Threat & Warning

PREPaRE:
- School Crisis Prevention & Intervention Training
- Curriculum

Prevent & prepare for psychological trauma risk
- Prevent/Prepare for crisis
- Foster student resiliency
- Keep students safe
- Avoid crisis scenes and images

Reaffirm physical health, and ensure perceptions of security & safety
- Meet basic physical needs (water, shelter, food, clothing)
- Facilitate perceptions of safety

Evaluate psychological trauma
- Evaluate crisis exposure and reactions
- Evaluate internal and external resources
- Make psychotherapeutic treatment referrals

Provide interventions and Respond to psychological needs
- Re-establish social support systems
- Provide psycho-education: Empower survivors and their caregivers
- Provide immediate crisis intervention
- Provide/Refer for longer term crisis intervention

Level of Prevention (Caplan, 1964)
- Primary
- Primary & Secondary
- Tertiary

Level of Preventive Intervention (Gordon, 1983)
- Universal
- Universal & Selected
- Selected & Indicated

Level of Violence Prevention (Dwyer & Osher, 2000)
- Schoolwide
- Schoolwide & Early Intervention
- Schoolwide, Early, & Intensive Interventions
- Early & Intensive Interventions

- Crisis Prevention/Mitigation
- Crisis Response and Recovery
Basic Assumptions

The Incident Command System (ICS)

1. Incident Command (the managers)
2. Planning/Intelligence Section (the thinkers)
3. Operations Section (the doers).
   a) Student Care
5. Logistics Section (the getters).
6. Finance Section (the payers).
Prevent and Prepare for Psychological Trauma
- Prevent Crises
- Prepare for Crisis Intervention
- Foster Student Resiliency
- Prevent Trauma Exposure

Reaffirm Health and Safety
Evaluate Psychological Trauma
Provide Interventions and Respond to Student Psychological Needs
Examine the Effectiveness of Crisis Prevention and Intervention

The PREPaRE Model

Prevent & Prepare for Psychological Trauma

Prevent Crises
- Ensure physical safety
  - School building secured
    1. Natural surveillance
    2. Natural access control
    3. Territoriality
  - Multihazard needs assessment

Source: Reeves et al. (2006)

Prevent Crises
- Ensure psychological safety
  - School-wide positive behavioral supports
  - Universal, targeted, and intensive academic/social-emotional interventions and supports
  - Identification/monitoring of self & other directed violence threats
  - Student guidance services

Source: Reeves et al. (2006)
Prevent & Prepare for Psychological Trauma

Preparing for crisis intervention
- Develop immediate crisis intervention resources
- Identify longer term psychotherapeutic resources

Source: Brock et al. (2009)

Prevent & Prepare for Psychological Trauma

Foster Internal Student Resiliency
- Promote active (or approach oriented) coping styles.
- Promote student mental health.
- Teach students how to better regulate their emotions.
- Develop problem-solving skills.
- Promote self-confidence and self-esteem.
- Promote internal locus of control.
- Validate the importance of faith and belief systems.
- Nurture positive emotions
- Foster academic self-determination & feelings of competence

Sources: Brock (2002d); Smith-Harvey (2007)

Prevent & Prepare for Psychological Trauma

Foster External Student Resiliency
- Support families.
- Facilitate peer relationships.
- Provide access to positive adult role models.
- Ensure connections with pro-social institutions.
- Provide a caring, supportive learning environment
- Encourage volunteerism
- Teach peace-building skills

Sources: Brock (2002d); Smith-Harvey (2007)
Prevent & Prepare for Psychological Trauma

**Prevent Trauma Exposure: Keep Students Safe**
- Remove students from dangerous or harmful situations.
- Implement disaster/crisis response procedures (e.g., evacuations, lockdowns, etc.).
  - “The immediate response following a crisis is to ensure safety by removing children and families from continued threat of danger” (Joshi & Lewin, 2004, p. 715).
  - “To begin the healing process, discontinuation of existing stressors is of immediate importance” (Barenbaum et al., 2004, p. 48).

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**Prevent & Prepare for Psychological Trauma**

**Prevent Trauma Exposure: Avoid Crisis Scenes and Images**
- Direct ambulatory students away from the crisis site.
- Do not allow students to view medical triage.
- Restrict and/or monitor television viewing.

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**The PREPaRE Model**

- Prevent and Prepare for Psychological Trauma
- Reaffirm Health and Safety
  - Reaffirm objective physical health and safety
  - Reaffirm perceptions of safety and security
- Evaluate Psychological Trauma
- Provide Interventions and Respond to Student Psychological Needs
- Examine the Effectiveness of Crisis Prevention and Intervention
Reaffirm Health & Safety

"The first step following a disaster is to ensure the safety, shelter, and sustenance of children and their caregivers. In our experience, mental health interventions are secondary. Once these basic needs are met, there is a role for mental health professionals."


Reaffirm Health & Safety

Reaffirm Objective Physical Health & Safety

1. General vs. special needs populations
   - Refer to Handout 5
2. Responding to acute needs
   - Refer to Handout 6

Reaffirm Health & Safety

Reaffirm Objective Physical Health & Safety

3. Ensuring physical comfort
4. Providing accurate reassurances
Reaffirm Health & Safety

Reaffirm Perceptions of Safety and Security
1. Adult reactions and behaviors
2. Minimizing crisis exposure
3. Reuniting/Locating caregivers and significant others

Reaffirm Health & Safety

Reaffirm Perceptions of Safety and Security
4. Providing facts and adaptive interpretations
5. Returning students to a safe school environment
6. Providing opportunities to take action

Reaffirm Health & Safety

“Once traumatic events have stopped or been eliminated, the process of restoration begins. Non-psychiatric interventions, such as provision of basic needs, food, shelter and clothing, help provide the stability required to ascertain the numbers of youth needing specialized psychiatric care.”

Source: Barenbaum et al. (2004, p. 49).
Care for the Caregiver

Consequences of responding to school crises

- **Cognitive**
  - Recurrent/intrusive crisis thoughts, or distressing dreams
  - Constant replaying of the event though not actually present
  - Confusion, lack of attention, and difficulty making decisions
- **Somatic**
  - Hypervigilance or heightened startle response
  - Chronic fatigue, exhaustion
  - Disturbance in sleep and eating habits


Caring for the Caregiver

Warning Signs of the Overextended Crisis Intervention Worker

- **Affective**
  - Compassion fatigue: demoralization, alienation, resignation
  - Numbing, depersonalization
  - Extreme anger at coworkers or loved ones
  - Extreme depression accompanied by hopelessness and suicidal thoughts
  - Excessive anxiety about crisis victims


Caring for the Caregiver

Warning Signs of the Overextended Crisis Intervention Worker

• Behavioral
  • Serious difficulties in interpersonal relationships with loved ones (domestic violence); withdrawal from contact
  • Attempts to overcontrol in professional situations at work or to act out a rescuer complex; compulsion to be part of every crisis situation
  • Self-injury, reliance on substances and alcohol, or unnecessary risk-taking


Caring for the Caregiver

Warning Signs of the Overextended Crisis Intervention Worker

• Exacerbating variables
  • Heavier prior trauma caseload; long assignments
  • Less professional experience within educational system
  • More time with child clients who have suffered physical injury as a result of physical/sexual trauma, witnessed death or threat to physical well-being of self or loved one, or discussed morbid details of the event
  • Recent loss, family strife, or secondary media wounds

Caring for the Caregiver

Prevention Strategies for administrators

1. Identify enough crisis interveners
2. Supervision, case conferencing, and staff appreciation
3. Training in secondary traumatic stress and stress management
4. Peer partners and consultation
5. Alliances with employee assistance providers
6. Circumstances wherein staff may need to be removed from caregiving
7. How to remove staff from inappropriate caregiving

Sources: Brymer et al. (2006); Figley (2002).
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Caring for the Caregiver

Intervention Strategies for administrators
1. Limit shifts
2. Rotate responders
3. Monitor responders who meet high-risk criteria:
   a) Survivor of crisis or disaster
   b) Those having regular exposure to severely affected individuals
   c) Those with preexisting conditions
   d) Those who have responded to many crises

Sources: Brymer et al. (2006), Figley (2002)

Caring for the Caregiver

Ethical Principles of Self-Care
- Self-monitoring
- Obtaining supervision
- Obtaining intervention and support
- Respecting the dignity and worth of oneself
- Acknowledging the relationship between self-care and duty to perform


Caring for the Caregiver

Personal Self-Care Practice
Physical
   a) Get adequate sleep and avoid extended periods of work
   b) Ensure proper nutrition
   c) Exercise regularly
   d) Regularly use stress management techniques

Psychological
   a) Self-monitor
   b) Seek professional assistance if secondary traumatic stress lasts longer than 2-3 weeks
   c) Seek help with own trauma history
   d) Develop assertiveness, time management, cognitive reframing, and interpersonal communication

Sources: Brymer et al. (2006), Figley (2002)
Caring for the Caregiver

**Personal Self-Care Practice**

*Social/Interpersonal*

- a) Plan for family and home safety,
- b) Identify social supports
- c) Engage in social activism and advocacy
- d) Practice your religious faith and spirituality,
- e) Creative self-expression
- f) Humor

Sources: Brymer et al. (2006), Figley (2002)

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**Exercise**

- In small groups discuss your reactions to the two questions listed below. Record your thoughts and be prepared to share them with the larger group.

1. "What are some reactions you have had (or expect to have) as a consequence of crisis intervention work?"
2. "What have been some of the things that have helped you cope?"

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**Next Meeting**

- Read:
  - Brock et al. (2016), Chapters 13 & 14
- Activity:
  - Conducting Psychological Triage