Responding to School Crises: Psychological Crisis Response

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Preface

The need for a “school” crisis intervention model/training program

- As outside providers enter the school setting specifically to provide mental health services, a clear understanding of the school structure and culture is warranted (Brown & Bobrow, 2004, p. 212).
Preface

The importance of being prepared to intervene with children

- It is generally accepted now that children represent a highly vulnerable population, for whom levels of symptoms may often be higher than for adults.
- Recent literature also suggests that childhood trauma can have a lasting impact on child cognitive, moral, and personality development, and coping abilities (Barenbaum et al., 2004, p. 42).
Presentation Goals

1. Facilitate the development of UUSD School Crisis Response Teams.
2. Clarify school crisis intervention roles and responsibilities.
3. Consider how the draft UUSD Psychological Crisis Response Manual fits into a model of school crisis intervention.
Presentation Outline

1. Introduction
   a) Crisis event characteristics and level of response
   b) Goals of school crisis intervention
   c) The Incident Command Structure (ICS)
   d) The Crisis Response Planning and Procedural Checklists
   e) P·R·E·PαR·E: Crisis Intervention and Recovery
Presentation Outline

2. Prevent and Prepare for crisis
3. Reaffirm physical health and perceptions of security and safety
4. Evaluate psychological trauma risk
5. Provide interventions and Respond to student needs
6. Examine the effectiveness of crisis prevention and intervention
Introduction

Crisis event characteristics and level of response.

- Variables that affect traumatic potential
  - Type of disaster
  - Source of physical threat and/or injury
  - Presence of fatalities

- Level of crisis intervention response
  - No response
  - School site level response
  - District level response
  - Regional level response
Introduction

What are the goals of school crisis intervention?

Discuss this in small groups and be prepared to share with the rest of the group.

NOTE: These are the variables we will use to evaluate the school crisis intervention.
Introduction

SCT membership can be defined by making use of the SEMS/NIMS and the organizational structure of the Incident Command System (ICS).

SEMS is traditionally used to centralize, organize, and coordinate the emergency response to a critical incident, but can also be used to structure other SCT activities (i.e., prevention, preparedness, and recovery).

This is the same system used by most emergency responders (e.g., fire departments, law enforcement, emergency medical technicians, disaster responders).

Thus, use of SEMS/NIMS helps to ensure that the SCT and other emergency responders are speaking the same language.
Introduction

The crisis intervention team and the Incident Command System

- Incident Command (the managers)
- Intelligence Section (the thinkers)
- Operations Section (the doers)
- Logistics Section (the getters)
- Finance Section (the payers)
Introduction

Emergency Operations Center Director/School Incident Commander

Crisis Management Team
- Public Information Officer
- Safety Officer
- Liaison Officer

(Thinkers) Intelligence Section
(Doers) Operations Section
(Getters) Logistics Section
(Payers) Finance Section

Security and Safety
Student Care
Emergency Medical
Translation

Facilities
Supplies and Equipment
Staff & Community Volunteer Assignment
Communications

Supp. Handout p. 3
Introduction

(Doers)
School Operations Section Chief

School Security and Safety Coordinator
Facilities & Grounds Specialist
Search, Rescue & Accounting Specialist
Crowd Management Specialist
Traffic Safety Specialist

School Student Care Coordinator
Crisis Intervention Specialist
Student Assembly & Release Specialist
Shelter, Food, Water & Supplies Specialist

School Emergency Medical Coordinator
First Aid Specialist
Student Assembly & Release Specialist
Shelter, Food, Water & Supplies Specialist

School Translation Coordinator

Supp. Handout p. 5
Introduction

The Crisis Response Planning and Procedural Checklists

Supp. Handout pp. 6-10
Introduction

**P·R·E·P̀R·E**

Crisis Intervention and Recovery: The Roles of the School-Based Mental Health Professional

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

Supp. Handout p. 11
Prevent/Prepare for Psychological Trauma

- Prevent Crises
- Prepare for Crises
- Foster Student Resiliency
- Keep Students Safe
- Avoid Crisis Scenes and Images
Prevent/Prepare for Psychological Trauma

Prevent Crises

- What are some ways in which school crisis teams can prevent crises?
- Who is responsible for these activities?
- How does the UUSD Psychological Crisis Response Manual address these tasks?
Prevent/Prepare for Psychological Trauma

Prepare for Crises

- District & School Crisis Response Team Checklists
- Who is responsible for these checklists?
- How does the UUSD Psychological Crisis Response Manual address these tasks?
Prevent/Prepare for Psychological Trauma

Foster Student Resiliency

Internal Resiliency Variables

- 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
- Others????
Prevent/Prepare for Psychological Trauma

- Foster Student Resiliency
  - External Resiliency Variables
    - Support families (i.e., provide parent education and appropriate social services)
    - Facilitate peer relationships
    - Provide access to positive adult role models
    - Ensure connections with pro-social institutions
    - Others???
  
- Who is responsible for these activities?

- How does the UUSD Psychological Crisis Response Manual address these tasks?
Prevent/Prepare for Psychological Trauma

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).

- Who is responsible for this?
- How does the UUSD Psychological Crisis Response Manual address these tasks?
Prevent/Prepare for Psychological Trauma

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
- Who is responsible for this?
- How does the UUSD Psychological Crisis Response Manual address these tasks?
Reaffirm Physical Health, and Perceptions of Safety and Security

- Meet basic physical needs
- Facilitate perceptions of safety
Reaffirm Physical Health, and Perceptions of Safety and Security

Meet basic physical needs

- Provide
  - Shelter
  - Food and water
  - Clothing

- Other health and welfare needs?
- Who is responsible for these activities?
- How does the UUSD Psychological Crisis Response Manual address these tasks?
Reaffirm Physical Health, and Perceptions of Safety and Security

Facilitate perceptions of safety

- Adult behavior in response to the crisis is key
- Security and safety measures may need to be concrete and visible

Who is responsible for this?

How does the UUSD Psychological Crisis Response Manual address these tasks?
Reaffirm Physical Health, and Perceptions of Safety and Security

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 (Barenbaum et al., 2004, p. 49).
Evaluate Psychological Trauma

Definition of, and Rational for, Assessment

Assessment Variables

- Crisis Exposure
- Threat Perceptions
- Crisis Reactions
- Personal Vulnerabilities

Conducting Psychological Triage
Evaluate Psychological Trauma

Definition of, and Rational for, Assessment

Psychological Triage: The process of evaluating and sorting victims by immediacy of treatment needed and directing them to immediate or delayed treatment. The goal of triage is to do the greatest good for the greatest number of victims (NIMH, 2002, p. 27).
Evaluate Psychological Trauma

Definition of, and Rational for, Assessment
- Why conduct assessment for psychological trauma?
- Not all individuals will be equally affected by a crisis.
  - One size does not fit all
  - Some will need intensive intervention
  - Others will need very little, if any intervention.
Evaluate Psychological Trauma

Definition of, and Rational for, Assessment

- Why conduct assessment for psychological trauma?
- Recovery from crisis exposure is the norm
  - Crisis intervention should be offered in response to demonstrated need.
  - “Not everyone exposed to trauma either needs or wants professional help” (McNally et al., 2003, p. 73).
  - EXCEPTION: Students with pre-existing psychopathology
Evaluate Psychological Trauma

Definition of, and Rational for, Assessment

Why conduct assessment for psychological trauma?

- There is a need to identify those who will recover relatively independently
- Crisis intervention may cause harm if not truly needed
  - It may increase crisis exposure
  - It may reduce perceptions of independent problem solving
  - It may generate self-fulfilling prophecies
Evaluate Psychological Trauma

Assessment Variables

- Crisis Exposure
  - Physical an Emotional Proximity
Evaluate Psychological Trauma

Assessment Variables

- Threat Perceptions
  - Subjective impressions can be more important than actual crisis exposure
  - Adult reactions are important influences of student threat perceptions
Evaluate Psychological Trauma

Assessment Variables

- Crisis Reactions
  - Common Crisis Reactions
    - Emotional
    - Cognitive
    - Physical
    - Interpersonal/Behavioral
  - Subjective appraisal of crisis reactions appears to be important

Supp. Handout pp. 12-14
Evaluate Psychological Trauma

Assessment Variables

• Crisis Reactions
  • Crisis Reactions Indicating need for Mental Health Referral
    ♦ Peritraumatic Dissociation
    ♦ Peritraumatic Hyperarousal
    ♦ Persistent Reexperiencing of the Crisis Event
    ♦ Persistent Avoidance of Crisis Reminders
    ♦ Significant Depression
    ♦ Psychotic Symptoms

Supp. Handout pp. 12-14
Evaluate Psychological Trauma

Assessment Variables

- Crisis Reactions
  - Crisis Reactions Indicating need for Mental Health Referral
    - Common crisis reactions that do not dissipate after a week or two might also be considered indicative of the need for a mental health referral
    - Subjective impressions of difficulty managing common reactions independently should also trigger a mental health referral

Supp. Handout pp. 12-14
Evaluate Psychological Trauma

Assessment Variables

- Crisis Reactions
  - Crisis Reactions Indicating need for Mental Health Referral
    - Maladaptive Coping Behaviors
      - Suicidal and/or homicidal ideation
      - Abuse of others
      - Extreme substance abuse and/or self-mediation
      - Extreme rumination and/or avoidance behavior
      - Taking excessive precautions

Supp. Handout pp. 12-14
Evaluate Psychological Trauma

Assessment Variables

- Personal Vulnerabilities
  - Internal Vulnerability Variables
  - External Vulnerability Variables
Evaluate Psychological Trauma

Assessment Variables

- Personal Vulnerabilities
  - Internal Vulnerability Variables
    - Avoidance coping style
    - Pre-existing mental illness
    - Poor self regulation of emotion
    - Low developmental level and poor problem solving skills
    - History of prior psychological trauma
    - Self efficacy and external locus of control
Evaluate Psychological Trauma

Assessment Variables

- Personal Vulnerabilities
  - External Vulnerability Variables
  - Family resources
    - Not living with nuclear family
    - Ineffective & uncaring parenting
    - Family dysfunction (e.g., alcoholism, violence, child maltreatment, mental illness)
  - Parental PTSD/Maladaptive coping with the stressor
  - Poverty/Financial Stress
- Social resources
  - Social isolation
  - Lack of perceived social support
Evaluate Psychological Trauma

Crisis Event

Crisis Exposure

Psychological Trauma

Threat Perceptions

Crisis Reactions

Personal Vulnerability
Evaluate Psychological Trauma

Conducting Psychological Triage

- Traumatized youths do not generally seek professional assistance, and recruiting school personnel to refer trauma-exposed students to school counselors can also leave many of these students unidentified (Saltzman et al., 2001, p. 292).

- These findings suggest that a more comprehensive assessment of exposure parameters, associated distress, and impairment in functioning is needed to make informed treatment decisions, especially given the possibility of inaccuracies in child and adolescent reports of the degree of exposure and the great variability in responses to similar traumatic events observed among survivors (Saltzman et al., 2001, p. 292).
Evaluate Psychological Trauma

Conducting Psychological Triage

- Identify mental-health and other community support resources
- Develop/obtain psychological assessment screening tools
- Develop crisis intervention referral forms
Evaluate Psychological Trauma

Conducting Psychological Triage: A dynamic process

- Levels of Triage
  - Primary Assessment of Psychological Trauma
    - Crisis exposure (physical and emotional proximity)
    - Personal vulnerabilities
  - Secondary Assessment of Psychological Trauma
    - Use of parent, teacher, and self-referral procedures/forms
    - Administering individual and/or group screening measures
  - Tertiary Assessment of Psychological Trauma
    - Screening for psychiatric disturbances (e.g., PTSD)

- What elements of the UUSD Psychological Crisis Response Manual address this assessment?

- Who is responsible for this activity?
Linking the Evaluation to School Crisis interventions

1. A Crisis Event Occurs
2. Reaffirm Physical Health
3. Ensure Perceptions of Safety & Security
4. Evaluate Psychological Trauma

- Low Risk for Psychological Trauma
  - Re-establish Social Support
  - Psycho-education (Caregiver Training)

- Moderate Risk for Psychological Trauma
  - Re-establish Social Support
  - Psycho-education (Caregiver Training & Psycho-educational Groups)
  - Immediate Psychological First Aid

- High Risk for Psychological Trauma
  - Re-establish Social Support
  - Psycho-education (Caregiver training & Psycho-educational Groups)
  - Immediate Psychological First Aid
  - Longer Term Psycho-therapy

Supp. Handouts pp. 16-17
Produce Interventions and Respond to Student Needs

- Re-establish Social Support Systems
- Psycho-education: Empower Survivors and Their Caregivers

Psychological Intervention
- Immediate Interventions
  - Group Psychological First Aid
  - Individual Psychological First Aid
- Long Term Interventions
Provide Interventions and Respond to Student Needs

Re-establish Social Support Systems (The Primary Crisis Intervention)

- *Being with and sharing crisis experiences with positive social supports facilitates recovery from trauma* (Litz et al., 2002).

- *The level of such support is a strong predictor of PTSD* (Caffo & Belaise, 2003; Ozer et al., 2003).

- *This support is especially important to the recovery of children* (Barenbaum et al., 2004).

- Social support systems include parents, peers, teachers and the broader community caregiving environment.
Provide Interventions and Respond to Student Needs

Re-establish Social Support Systems (The Primary Crisis Intervention)

Limitations

- Extremely violent and life-threatening crisis events (e.g., mass violence)
- Chronic crisis exposure
- Caregivers significantly affected by the crisis
- The presence of psychopathology
Provide Interventions and Respond to Student Needs

Re-establish Social Support Systems (The Primary Crisis Intervention)

- Specific Techniques
  - Reunite students with their caregivers
  - Reunite students with their close friends, teachers and classmates
  - Return to familiar school environments and routines
  - Facilitate community connections
  - Empower with caregiving/recovery knowledge

- Who is responsible for these activities?
- How does the UUSD Psychological Crisis Response Manual address these tasks?
Provide Interventions and Respond to Student Needs

Psycho-education: Empower Survivors and Their Caregivers

Psycho-education is designed to provide students, staff and caregivers with knowledge that will assist in understanding, preparing for, and responding to the crisis event, and the problems and reactions it generates (both in oneself and among others).
Provide Interventions and Respond to Student Needs

Psycho-education: Empower Survivors and Their Caregivers

Rationale

- Children often have incorrect beliefs about crises
- Children are more likely than adults to use avoidance coping
- Facilitates a sense of control over recovery process
- Capitalizes on strengths/promotes self confidence
- Provides connections to/with mental health resources (without stigma)
Provide Interventions and Respond to Student Needs

- Psycho-education: Empower Survivors and Their Caregivers
  - Limitations
    - Not sufficient for the more severely traumatized
    - Must be paired with other psychological interventions and professional mental health treatment
    - Limited of research
Provide Interventions and Respond to Student Needs

Psycho-education: Empower Survivors and Their Caregivers

- Specific Techniques
  - Psycho-educational Groups
  - Caregiver Trainings
  - Informational bulletins/flyers
    - See Supplemental Handout out page 18 and http://www.nasponline.org/NEAT/crisismain.html for examples

Who is responsible for these activities?

What elements of the UUSD Psychological Crisis Response Manual would help with psycho-education?
Provide Interventions and Respond to Student Needs

Psychological Intervention

- Immediate Interventions
  - Group Psychological First Aid
  - Individual Psychological First Aid
- Long Term Interventions
Provide Interventions and Respond to Student Needs

Psychological Intervention

- Immediate Interventions
  - Group Psychological First Aid
  - Individual Psychological First Aid

- Goals
  - Reestablishment of adaptive coping behaviors
  - Connection to helping resources

- Who is responsible for these activities?
- What elements of the UUSD Psychological Crisis Response Manual will facilitate the meeting of student needs?
Provide Interventions and Respond to Student Needs

Psychological Intervention

Long Term Interventions
- Cognitive-Behavioral Approaches
  - a) Imaginal and In Vivo Exposure
  - b) Eye-Movement Desensitization and Reprocessing (EMDR)
  - c) Anxiety-Management Training
  - d) Group-Delivered Cognitive-Behavioral Interventions

Goals
- Treatment of psychopathology

What are the school’s responsibilities when it comes to the long term treatment of psychological trauma?

What elements of the UUSD Psychological Crisis Response Manual will facilitate this treatment?
Levels of School Crisis interventions

- **Indicated**
  - Psycho-therapy

- **Selected**
  - Psycho-educational Groups
  - Psychological First Aid

- **Universal**
  - Prevention Psychological Trauma
  - Reaffirm Physical Health
  - Ensure Perceptions of Security & Safety
  - Evaluate Psychological Trauma
  - Re-establish Social Support Systems
  - Caregiver Trainings

Supp. Handout p. 19
Examine the Effectiveness of Crisis Prevention and Intervention

The school crisis response can be concluded when all individuals have obtained the knowledge and/or support they need to cope with crisis-generated problems.
Examine the Effectiveness of Crisis Prevention and Intervention

Outcomes that reflect crisis intervention effectiveness

- Crisis interventions indicated by psychological triage have been provided
- Individuals with a psychopathology have been provided appropriate treatment
- Individuals with maladaptive coping behaviors (e.g., suicide, homicide) have been referred to the appropriate professional(s) and lethality has been reduced

Supp. Handouts pp. 20-22
Examine the Effectiveness of Crisis Prevention and Intervention

Outcomes that reflect crisis intervention effectiveness

- Students attend school at or above pre-crisis attendance rates
- School behavior problems (i.e., aggressive, delinquent, and criminal behavior) occur at or below pre-crisis levels
- Student academic functioning is at or above pre-crisis levels
  - Students with learning challenges (e.g., special education students) return to pre-crisis levels of academic functioning.

Supp. Handouts pp. 20-22
Concluding Discussion & Questions

- Further Development of UUSD Crisis Teams?
- Suggestions for the UUSD Psychological Crisis Response Manual?

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