Stabilizing and Grounding Students with

Extreme Agitation and Disorientation

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| Signs of the emotionally overwhelmed adult, adolescent, or school-age youth |
| * Appearing disconnected (e.g., numb; startlingly unaffected by the event)
* Confusion (e.g., not able to understand what is happening around them; not making sense)
* Panic (e.g., extremely anxious; unable to settle; their eyes wide and darting)
* Hysterical (e.g., sobbing uncontrollably; hyperventilating; rocking)
* Excessively preoccupied (e.g., unable to think about anything else)
 | * Aimless, disorganized behavior
* Denial (e.g., refusing to accept that the event took place)
* Physical shock (e.g., not being able to move; frozen); appearing glassy-eyed and staring vacantly (e.g., unresponsive to verbal questions or commands)
* Exhibiting frantic searching behavior
* Incapacitated by worry
* Risky activities
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| Signs of the emotionally overwhelmed younger child |
| * Staring blankly
* Unresponsive
* Regressive behaviors (e.g., urinating in inappropriate places, sucking a thumb)
* Screaming; crying or sobbing uncontrollably
 | * Hyperventilating
* Moving in an agitated way (thrashing, pushing away)
* Hiding (in a corner or under a table)
* Clinging excessively
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If you see these displayed by a student or staff member then consider doing the following grounding activities to stabilize the individual.

1. **Contact.** Get at eye level and prompt the student to be aware of you.

State: *Can you please look at my eyes?*

[**Caution**: Consider culture. Eye contact in many non-Western cultures (e.g., Middle Eastern, Asian) is less common and considered less appropriate, and sometimes aggressive and disrespectful. In these instances consider asking the student to look at a neutral object in your hand.]

1. **Hear.** Request that the student listen to you.

State: *Can you hear me? Are you able to listen to what I am saying? Is it OK if I talk to you?*

1. ****Orient.** Ask questions to help the student orient to person, place, and setting.

State: *What is your name? Can you tell me where we are right now?*

1. **Describe**. Ask the student to describe the surroundings and to identify where you both are.

State: *Let me see if we can help you focus on what is happening right now. Can you tell me what you see in this room (or area)? Can you tell me where both of us are right now?*

1. ****Touch.** With younger children, consider (**but never force**) a protective arm across the shoulders.

State: *Would you like a hug?*

[**Caution**: Consider culture. In some cultures any form of physical contact between opposite sexes is considered inappropriate.]

1. **Distract.** Ask carefully chosen safe or neutral questions about the person’s interests.

State: *Let’s try to think about things you enjoy. What are three things you really like to do after school?*

To further distract, consider asking the student to hold an ice cube, giving them a wet face cloth, holding their hands under cold water, or other physical experience.

[**Caution**: Be careful not to activate memories of preferred activities with a deceased classmate.]

1. **Social Support.** Identify and mobilize primary social support providers.

State: *Who are the people that you really like to have around when you are upset? Who helps you feel comforted and cared for?*

Engage the identified caregivers in helping to reassure the student that they are safe.

[**Caution:** Make certain that caregivers are calm and not emotionally overwhelmed themselves**.**]

1. **Reassure**. Let the student know that you understand he or she is overwhelmed by strong emotions, but that in this moment they are cared for and are safe.

State: *You seem very* [state emotion(s)] *right now. Is this how you are feeling?* [Ensure you have accurately identified the emotional state.] *I understand that what happened has created some overwhelming feelings. But in this moment, right now, you are safe, and surrounded by caring people.*

1. **Ground**. Consider facilitating a grounding activity if initial actions are not sufficient.

State: *After a frightening experience, you may be very upset or angry or unable to stop thinking about what happened. It can be like a movie playing over and over again in your head. I can help you feel less overwhelmed by teaching you about something called “grounding.” Grounding works by having you focus on the things you see and hear around you, instead of all the thoughts you’re having (or the movie playing in your head). In other words, it is like stepping outside of a movie theater and no longer looking at the movie screening. Would you like to try it?*

* If yes, move to #10.
* If the student says no, remain with the student and give the student more time. After a short time, try to reengage in the grounding process. If unable to continue, move the student to a safe place with adult supervision and/or call a primary caregiver to seek additional support.
1. If the student agrees, speak in a calm, quiet voice and ground the student by stating the following:



1. State: *Please sit in a comfortable position with your legs and arms uncrossed*.
2. **State: *Now I want you to take a very deep breath through your nose to the count of 4, and a long breath out through your mouth to the count of 8*.

[Note: 4 x 4 or 4 x 6 breathing is acceptable if the student does not understand, or is unable to engage in, 4 x 8 breathing.]

1. Repeat this instruction three times, prompting three deep breaths.



1. Verbally praise the student’s ability to follow the breathing instructions.
2. **State: *Now I would like you to tell me three things you are noticing right now that your body is feeling, such as the chair supporting you, the solidness of the floor underneath your feet, or the temperature of the air in the room.*

[**Caution**: Make certain you are in an environment with no external environmental sensory stimuli (e.g., the smell of smoke) that will be distressing if identified.]

1. **Verbally praise the student’s ability to identify these physical sensations and then repeat the breathing instructions again, prompting another three deep breaths.



1. Verbally praise the student’s ability to follow the breathing instructions.
2. **State: *Now let’s move outside of our what our body is sensing. Look around this room (or area) and also listen for sounds in this room (or area). I would like you to tell me three things you hear or see in this room (or area)*.

[**Caution**: If the student selects distressing sounds or sights, gently interrupt them, and suggest they pick an object that is not upsetting.]

1. **Verbally praise the student’s ability to identify these sensations and then repeat the breathing instructions again, prompting three more deep breaths.



1. Verbally praise the student’s ability to follow the breathing instructions.
2. **State: *Now let’s move outside of this room (or area). I would like you to tell me three things you hear going on outside of this room (or area)*.

[**Caution**: If the student selects distressing sounds, gently interrupt them, and suggest they pick an object that is not upsetting.]

1. **Verbally praise the student’s ability to identify these sensations and then repeat the breathing instructions again, prompting three more deep breaths.
2. **If necessary, continue this activity by returning the student’s focus to the immediate area where the student is sitting and then back to his or her body, alternating such instruction with deep breathing.
3. If the student again appears to be able to regulate his or her emotions, then compliment them on their ability to do so and inquire if they have any basic needs that are currently unmet. Continue in a calm voice with a low tone.

State: *Well done. I am so impressed with your ability to regulate your body and your feelings.*

1. State: *How do you feel now? Do you need anything or do you have any questions?*



1. Reiterate the previously offered reassurances that they are cared for and that adults who will make sure they are safe surround them.

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*Note.* From *Psychological First Aid for Schools: Field Operations Guide* (2nd ed., pp. 39-40), by M. Brymer, M. Taylor et al., 2012, Rockville, MD: National Child Traumatic Stress Network and National Center for PTSD. Adapted with permission PENDING; Melnick & Bassuk (2000).