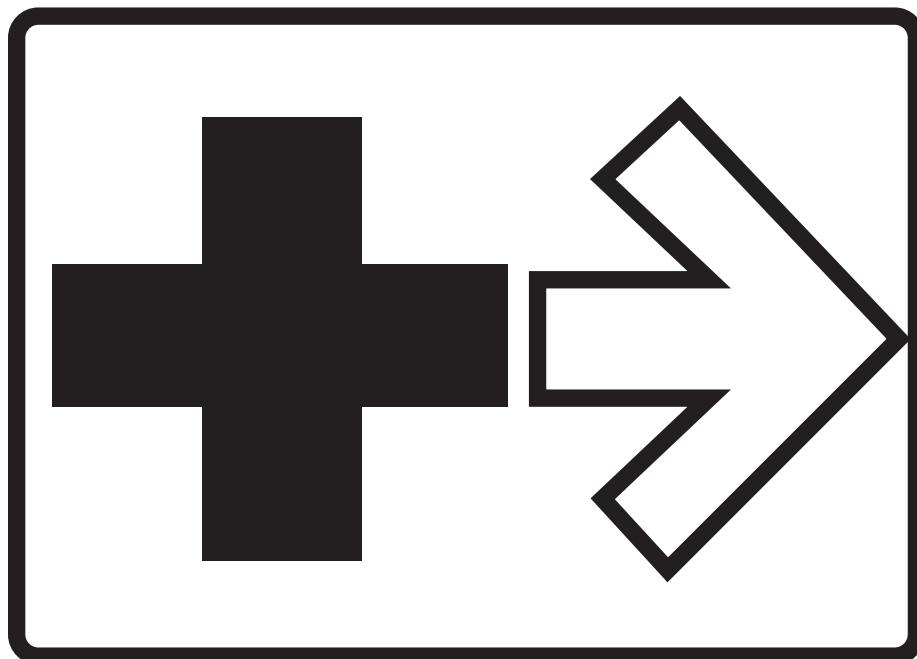

5 *Recovery*

Responding to Trauma & Returning to Learning



5 Recovery



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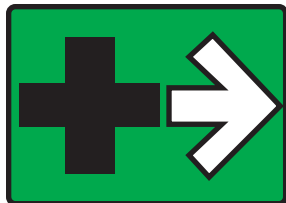
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Recovery ***RESPONDING TO TRAUMA*** ***AND RETURNING TO LEARNING***

The goal of recovery is to return to learning as quickly as possible

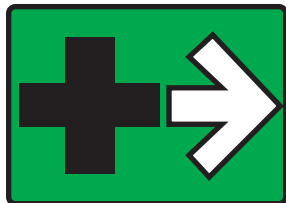
Introduction to Trauma and Crisis Recovery

A fundamental goal of all Santa Cruz County schools is to provide students with the opportunity to learn and achieve to the best of their abilities in school environments that are safe and secure. Physical and psychological security are essential components of school learning environments. This is because a sense of psychological security is a basic human need. When safety and security needs are met, students are free to explore, engage in learning, and actualize their full potential. This is what we mean by “safe and effective learning environments” for every child, every day.

Sometimes serious danger threatens a school, whether it is a natural disaster such as a flood or earthquake, or a person-caused event such as a school shooting or gang violence. Exposure to danger (e.g., gang violence), life-threatening experiences (e.g., a school bus accident), and traumatic events (e.g., a suicide) impact our sense of psychological security and challenge our ability to cope.

This Crisis Recovery section of the ERCM manual will

- Provide information about the impact of trauma on students and schools**
- Describe the District Crisis Recovery Team (DCRT)**
- Describe School Crisis Recovery Teams (SCRT)**
- Provide the Site Administrator and the School Crisis Recovery Team Coordinator with resources to share with parents and students**
- Assist the Site Administrator and the School Crisis Recovery Team Coordinator in managing the crisis recovery phase of a traumatic event with the goal of returning to learning as quickly as possible**



Recovery: EFFECTS OF TRAUMA

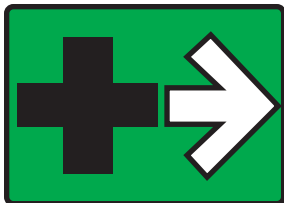
The Effects of Trauma on Students and Learning

Trauma impacts learning. For students, a traumatic experience may cause ongoing feelings of concern for their own safety and the safety of others. Students may become preoccupied with thoughts about their actions during the event, often times experiencing guilt or shame over what they did or did not do at the time. They might engage in constant retelling of the traumatic event, or may describe being overwhelmed by feelings of fear or sadness. When children are preoccupied with concerns about their well-being or the well-being of others, they are not able to focus their energies on learning. Students traumatized by exposure to violence have been shown to have lower grade point averages, more negative remarks in their cumulative records and more reported absences from school than other students.

A traumatic event at school can seriously interrupt the school routine and the processes of teaching and learning. There may be high levels of emotional upset, potential for disruptive behavior or loss of student attendance unless efforts are made to reach out to students and staff with supportive information and services.

Occasionally, a traumatic event at one school has ripple effects that affect other schools. For example, a violent incident at a high school may create anxiety among students at nearby elementary or middle schools. The response of a school is critical in supporting students through the emotional challenges they may face following an exposure to a traumatic event.

It is a certainty that traumatic reactions among students will vary. Some students will become quiet and withdrawn, others angry, and still others emotionally distraught. Each student's response will be related to many factors, including individual differences in personality and temperament, a history of trauma or loss, and/or mental health issues such as depression, anxiety or behavior problems. All of these are viable ways of coping and each child will find his or her own way. Despite individual differences, there are some commonalities in children's developmental response to trauma that allow us to plan for appropriate supports and interventions.



Recovery: EFFECTS OF TRAUMA

Effects of Trauma on Preschool Students

Preschool students may lose recently acquired developmental milestones and may increase behaviors such as bedwetting, thumb-sucking, and regress to simpler speech. They may become more “clingy” to their parents and worry about their parents’ safety and return. These young students may also become more irritable, have temper tantrums, and experience difficulty calming down. A few students may show the reverse behavior and become very withdrawn, subdued, or even mute after a traumatic event. These students may have difficulties falling or staying asleep or have nightmares about the event or other bad dreams. These students may process the event through post-traumatic play.

Effects of Trauma on Elementary School Students

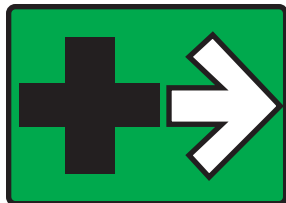
Elementary students may show signs of distress through somatic complaints such as stomachaches, headaches, and pains. These students may display a change in behavior, such as increased irritability, aggression, and anger. Their behaviors may be inconsistent. These students may show a change in school performance and have impaired attention and concentration and more school absences. Late elementary students may talk excessively and ask persistent questions about the event.

Effects of Trauma on Middle and High School Students

Middle and High School students exposed to a traumatic event feel self-conscious about their emotional responses to the event. They often experience feelings of shame and guilt about the traumatic event and may express fantasies about revenge and retribution. A traumatic event for adolescents may foster a radical shift in the way these students think about the world. Some of these adolescents may begin to engage in self-destructive, accident-prone, and/or reckless behaviors. There may be a shift in their interpersonal relationships with family members, teachers, and classmates. These students may show a change in their school performance, attendance, and behavior.

Variations among Students

In spite of our ability to predict general responses at the developmental level, there is still tremendous variability among students regarding post-traumatic symptoms and the extent to which learning and school behavior may be disrupted. The variety of individual responses to trauma is related to many factors, including a student’s prior history of trauma or loss, prior or current mental health issues such as depression, anxiety, or behavior problems, and individual differences in temperament.



Recovery: EFFECTS OF TRAUMA

The Effects of Trauma on Teachers & Staff

Traumatic events also affect school administrators, teachers and staff. During the early stages of most crises, teachers and staff are called on to account for students and provide for their physical safety. After the crisis is contained, teachers may be asked to talk to students to reassure them and provide emotional support. However, teachers themselves may have been impacted by the crisis, and it may be difficult for them to talk to students while trying to manage their own feelings.

Like students, teachers need support during and after a crisis. It is hoped that teachers will recognize that traumatic reactions are normal and seek support if they have difficulty coping. Each district and the SCCOE provides support to administrators, teachers and staff through an Employee Assistance Program (EAP). School staff are likely to feel comfortable talking to an EAP counselor about their own experiences as supportive services are provided in a confidential manner. The District's EAP counselor joins the District Crisis Recovery Team (DCRT) in responding to a crisis at a school. Information about how to contact the Employee Assistance Program is available through Human Resources or by calling 800-777-WELL.

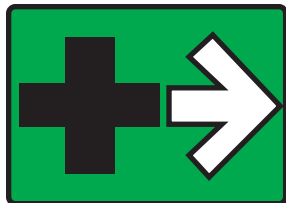
The impact of a crisis has the potential to reverberate through a school, a community, a state, and even a nation or the world community. The ripple effects of a critical event or trauma depends on the connections we each have to students, friends, loved ones, schools and our communities.

Immediate reactions:

- Numbness, shock and/or difficulty believing what has occurred**
- Slow or confused mental reactions**
- Uncertainty or difficulty with decision making, even with small judgment calls**

Ongoing reactions may include:

- Loss of appetite, difficulty sleeping, loss of interest or pleasure in everyday activities**
- Desire to get away from everyone, even family and friends**
- Emotional liability or becoming irritable or upset more quickly than usual**
- Feelings of fatigue, hopelessness and/or helplessness**
- Feelings of anger or rage**



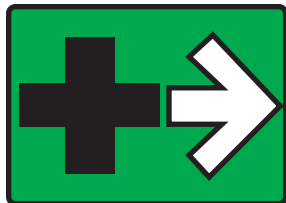
Recovery: EFFECTS OF TRAUMA

Trauma's Impact Depends on Physical and Emotional Proximity

In general, a crisis will have its greatest impact on those who have the closest physical, psychological and emotional proximity to the critical event. There are immense ripple impacts in a crisis situation where a drunk driver kills two students in a crosswalk and seriously injures three students. Students suffer the loss of their friends. Parents and family members suffer the unimaginable loss of a child, while other parents may struggle to cope with the uncertainty of injuries sustained by their children. Students, teachers and family members near the crosswalk who witnessed the event may sustain shock and post-traumatic stress at the visual and auditory memories (e.g., their friends getting hit by the car and screaming). Crossing guards may experience guilt that they might have prevented the tragedy. Other students who hear about the incident may experience vicarious trauma or strong emotions, and the community may experience outrage and the immense loss of students they know as volunteers, soccer players or youth group members.

Understanding the ripple impacts of a trauma is essential to planning an appropriate and effective crisis recovery response. This model allows Site Administrators and crisis team members to think through the potential impacts of a trauma and prepare to offer supportive interventions to those impacted in different ways.





Recovery: CRISIS RECOVERY TEAMS

District Crisis Recovery Team and School Crisis Recovery Teams

The Santa Cruz County Safe Schools Consortia supports the short- and long-term recovery of students and schools after a traumatic incident through our District Crisis Recovery Team and School Crisis Recovery Teams.

District Crisis Recovery Team

The District Crisis Recovery Team is an on-call, volunteer team that is staffed by professional staff and community partners who have extensive experience in crisis recovery.

The District Crisis Recovery Team (DCRT) provides support to schools to help manage and address the emotional impact of a crisis. District Crisis Recovery Team members will help teachers talk to their students, provide direct services to students, support parents in addressing concerns about their children, and make referrals to treatment resources in the community. The DCRT will provide support to a school when invited by the Site Administrator (Principal) or when directed by the Superintendent. The District Crisis Recovery Team always coordinates its response and services with the Site Administrator and the School Crisis Recovery Team (SCRT).

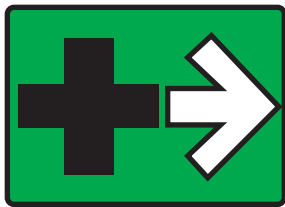
The DCRT supports schools, staff, students and families by providing assessment services, interventions and linkages to resources in the community.

School Crisis Recovery Team

The Site Administrator establishes a School Crisis Recovery Team at the beginning of each school year when the school's Emergency Management Plan is developed. As part of the School's "E-Team," the School Crisis Recovery Team Coordinator is responsible for coordinating the school's response to a traumatic event, assessing its psychological impact on students and staff, identifying needed resources, and providing assessment and intervention as indicated. School Crisis Recovery Teams are staffed by specialized services staff (e.g., School Psychologists, Social Workers and/or Nurses) and other building staff with mental health training (e.g., School Counselors and School Based Health Center staff). Site Administrators should take care to select staff who have high credibility, display a sense of responsibility, think and act well under stress, maintain confidentiality and work well with students and families.

The purposes of these teams are to:

- Assist with coping and understanding of reactions to danger and traumatic stress
- Support the emotional stabilization of students, teachers and parents and restore psychological security
- Restore a safe and effective learning environment



Recovery: CRISIS RECOVERY TEAMS

Santa Cruz County Mental Health School Emergency Response Planning (SERP) Committee

Santa Cruz County Mental Health School Emergency Response Planning (SERP) is responsible for establishing, training and overseeing the District Crisis Recovery Teams's (DCRT) use of the County Mental Health Response

Responsibilities

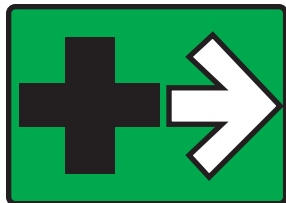
- Establishes procedures to guide the work of the DCRT
- Maintains linkages to partner agencies that support a crisis recovery response (i.e., mental health)
- Maintains a list of appropriate mental health resources in the community
- Maintains letters and handouts for students, teachers and parents regarding trauma and recovery
- Organizes crisis recovery training opportunities
- Notifies all members of the on-call DCRT when there is an emergency
- Notifies appropriate offices and personnel (i.e., Superintendents, Facilities, PIO, etc.) as indicated
- Ensures that team members debrief after each crisis recovery response
- Receives a written summary from DCRT Team Leaders about response to a critical event
- Sends a brief summary report to the County Board of Education through the Assistant Superintendent of Student Services

Each DCRT is comprised of about six (6) members

- **A responder from the Employee Assistance Program may join the DCRT on every crisis call to provide support to team members and school personnel**
- **School Principals release volunteer members of DCRT from their assigned school whenever there is a need for a crisis recovery response**

District Crisis Recovery Team Membership

The District Crisis Recovery Team is an on-call, volunteer team that is primarily composed of School Psychologists, Social Workers and Nurses, but includes volunteers from other disciplines as appropriate.



Recovery: CRISIS RECOVERY TEAMS

To Mobilize the DCRT

In the event of a serious emergency, the Site Administrator will notify dispatch; dispatch will notify the County Mental Health School Emergency Response Team Coordinator

When the traumatic event is not an emergency (e.g., the loss of a teacher to cancer), the Site Administrator District Mental Health Liaison may contact the County Mental Health School Emergency Response Team Coordinator directly for DCRT support

The County Mental Health School Emergency Response Team Coordinator will contact team members of the on-call District Crisis Recovery Team, and notify the Superintendent and other departments, as appropriate

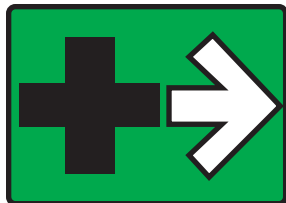
Mobilizing the District Crisis Recovery Team

Site Administrators may request the District Crisis Recovery Team by contacting the District Santa Cruz County Mental Health School Emergency Response Planning (SERP) Mental Health Liaison.

How the District Crisis Recovery Team Works

The District Crisis Recovery Team follows procedures established by the County SERP. The DCRT works closely with Site Administrators to develop an appropriate recovery plan for each school.

- District Crisis Recovery Team Responsibilities**
- The County Mental Health School Emergency Response Team Coordinator will contact the Team Leader who will contact members of the District Crisis Recovery Team**
- The DCRT Team Leader will contact the Site Administrator to gather preliminary information including:**
 - ▶ **Factual information**
 - ▶ **History of incident (if applicable)**
 - ▶ **Family information (e.g., siblings, etc.) and requests**
 - ▶ **Community knowledge of incident, current rumors**
 - ▶ **Current needs of students, staff, parents and community**
- The DCRT Team Leader, the Site Administrator, and the School Crisis Recovery Coordinator will set a meeting time at the school to plan the specific response at the school**
- All on-call DCRT members will attend the school planning meeting and implement a crisis recovery response**
- The DCRT Team Leader will maintain communication with the County Mental Health School Emergency Response Team Coordinator and relevant departments as appropriate**
- The DCRT Team Leader will submit a written report to the County Mental Health School Emergency Response Team Coordinator regarding the crisis recovery response at the school and needed follow-up**



Recovery: CRISIS RECOVERY TEAMS

School Crisis Recovery Teams

As part of his/her emergency management planning, the Site Administrator establishes a School Crisis Recovery Team at the beginning of each school year. This occurs when the Site Administrator designates roles for the School Emergency Response Team – the “E-Team”. As part of this process, the Site Administrator must designate a **School Crisis Recovery Team Coordinator** and assist him/her in carrying out the following responsibilities:

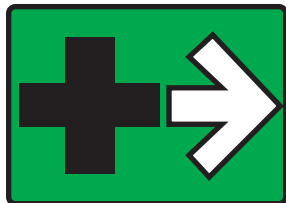
Establishing a School Crisis Recovery Team

- Identify the School Crisis Recovery Team Coordinator**
- This person will coordinate the in-school crisis recovery response and interface with the DCRT when they are involved**
- Identify additional School Crisis Recovery Team members with mental health or counseling training. These individuals will provide support to students, staff and parents**
- Provide orientation for School Crisis Recovery Team members and discuss how to coordinate with the District Crisis Recovery Team
The team needs to know what to expect before a crisis**
- Review the District Crisis Recovery Team Protocol
Each School Crisis Recovery Team needs to know how to interface with the DCRT**

Deciding if District Crisis Recovery Team Support is Needed

The most urgent priority during a crisis is to provide for safety and account for all students. The work of crisis recovery begins as soon as students are safe and accounted for.

The Site Administrator must initially decide if the crisis recovery response can be managed by the School Crisis Recovery Team or if the expertise of the District Crisis Recovery Team is needed. This decision is a judgment call and it is always best practice to consult with the District Mental Health Liaison in making this decision. The District Crisis Recovery Team will provide different types of assistance depending on the nature of the emergency or crisis. The DCRT will provide a range of support services for individual crises and school-wide emergencies. In the event of a large scale crisis that would overwhelm District resources, the District Crisis Recovery Team will provide support services in partnership with County, City and State agencies. The County Mental Health School Emergency Response Team Coordinator, and the DCRT will coordinate crisis recovery efforts in a large scale emergency.



Recovery: CRISIS RECOVERY TEAMS

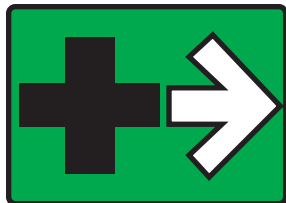
Key Factors in the Decision to Request the DCRT

School Crisis Recovery Team Manages the Crisis if...

- The emergency or crisis is relatively small scale (e.g., a student breaks an arm; a teacher is in a car accident)
- The emergency or crisis involves one student or a few students (e.g., a student who previously attended the school dies; a teacher has a death in the family)
- The impact of the emergency or crisis is limited (e.g., a student with a broken arm is transported to the hospital; a lost student is found)

Call the District Crisis Recovery Team if...

- The emergency or crisis is very serious and moderate to large scale (e.g., a student may have been abducted; a student is hit by a car; a student dies on school grounds)
- The emergency is serious and/or involves multiple students (e.g., a student commits suicide; two students are killed in their neighborhood in a shooting incident)
- The emergency or crisis affects the school and/or community and may take time to resolve (e.g., an earthquake at a school, a car careens into a playground and injures multiple students; students witness a tragic event)



Recovery: CRISIS

Working with County and Community Agencies

The Santa Cruz County Safe Schools Consortia maintains partnerships with the following agencies to support crisis recovery in the event of an emergency:

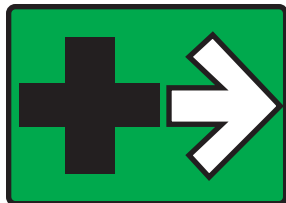
- Santa Cruz County Human Services Department
- Santa Cruz County Health Services Agency
- Santa Cruz County Mental Health Disaster/Trauma Coordinator
- Santa Cruz County Mental Health School Emergency Response Team Coordinator
- Center for Grief and Loss of Hospice Caring Project
- American Red Cross Disaster Mental Health Coordinator
- American Psychological Association
- National Association of School Psychologists

Responding to a Crisis

Making a plan is the first step to beginning the recovery process. If the crisis is managed by the School Crisis Recovery Team, then the SCRT will develop a plan. If the District Crisis Recovery Team is involved, the DCRT will work together with the Site Administrator and the SCRT to develop a recovery plan. The work of crisis recovery begins as soon as students are accounted for and safe.

Recommendations for Responding to a Crisis

- Decide if you need the support of the District Crisis Recovery Team
- Use the District Crisis Recovery Team/ Mental Health Response Protocol to develop a recovery response. See page 5.13 for protocol
- The Site Administrator will make this plan with the SCRT if the SCRT will manage crisis recovery
- The Site Administrator must be present to make this plan with the DCRT if the District Team will be involved
- Contact the School Crisis Recovery Team Coordinator and all mental health specialists (e.g., school psychologists, Social Workers, Nurses) if they are out of the building on the day of the crisis
- If practical, consult with the District Crisis Recovery Team before making any announcements to students
- Consider who should contact families of impacted students to obtain information and/or to determine their wishes regarding the release of information
- Identify students or staff who may be in need of services
- Implement the crisis recovery plan (e.g., letters to parents, interventions for students, etc.)
- Plan for follow-up with impacted students and staff as indicated

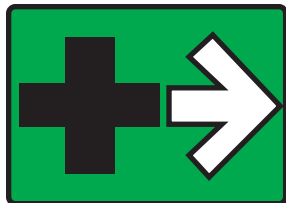


Recovery: CRISIS

Working with County and Community Agencies

The Santa Cruz County Safe Schools Consortia maintains partnerships with the following agencies to support crisis recovery in the event of an emergency:

- Santa Cruz County Human Services Department**
- Santa Cruz County Health Services Agency**
- Santa Cruz County Mental Health Disaster/Trauma Coordinator**
- Santa Cruz County Mental Health School
Emergency Response Team Coordinator**
- Center for Grief and Loss of Hospice Caring Project**
- American Red Cross Disaster Mental Health Coordinator**
- American Psychological Association**
- National Association of School Psychologists**
- National Institute of Mental Health**
- Suicide Prevention**
- Santa Cruz Community Counseling Center—Youth Services**
- Santa Cruz County Sheriff Department**
- Santa Cruz County Office of Emergency Services**
- California Office of Emergency Services**
- All School Districts**
- Santa Cruz County Office of Education**



Recovery: CRISIS

**Excerpt
from Santa Cruz
County School
Emergency Mental
Health Response
Protocol binder**

Santa Cruz County School Emergency Mental Health Response Protocol (SERP)

Purpose

To establish a procedure for school personnel to request mental health services following a critical incident which impacts the school community beyond the ability of the school and its district to provide these services in an effective and timely manner.

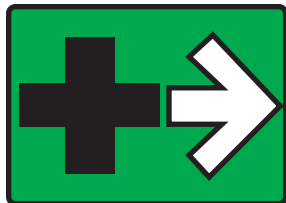
Critical incidents of this magnitude include school shootings, homicides and suicides of school community members, sudden deaths and life threatening injuries, violent acts resulting in trauma, natural disasters and school site emergencies.

This protocol describes a procedure for principals or designees to request mental health services for the school community following such a critical incident or event.

Procedure

- STEP 1** Principal or designee notifies school district office of the critical incident.
- STEP 2** School district Superintendent or designee determines whether or not the incident can be adequately responded to with school and district resources.
- STEP 3** If the school district Superintendent and district Mental Health liaison determine that the critical incident is, indeed, beyond the school and the district's capacity to provide an adequate mental health response, the liaison contacts the County's Mental Health (MH) School Emergency Response Team Coordinator or the County's MH Disaster/Trauma Coordinator, requests services, provides details of the incident, specifies where MH staff are to report and a school or district contact for Mental Health to coordinate with on-site (See page 1.9 of this Manual for contacts)

In the event of a school shooting or other incident requiring school evacuation, the liaison will specify the time and location of the school's "release site" where students will be reunited with family members.



Recovery: **CRISIS**

Santa Cruz County School Emergency Mental Health Response Protocol (SERP) continued

Procedure STEP 4

In addition to requesting assistance from the County's Mental Health School Emergency Response Team Coordinator, the school or district's Mental Health liaison will notify the County Superintendent of Schools of the critical incident. When the incident is likely to significantly impact many individuals in the school community, written materials should be immediately distributed to parents, staff, teachers and students. Such materials may be requested from the Santa Cruz County Office of Education as needed.

STEP 5

Once the County's MH School Emergency Response Team Coordinator or MH Disaster/Trauma Coordinator has received a call from the school district liaison, she/he will notify members of the School Emergency Response Team, as needed, to report to the school or to the release site.

The School Emergency Response Team is an inter-agency effort comprised of mental health clinicians from the County's Children's Mental Health program, Center for Grief & Loss of Hospice Caring Project, youth Services, the Santa Cruz American Red Cross Disaster MH Response Team and the Monterey Bay Psychological Association Disaster Response Team.

STEP 6

Once School Emergency Response Team members arrive at the designated site, they will report individually to a Team manager and, then, as a group to the school or district's Mental Health Liaison to be briefed regarding the incident and to receive their initial assignment in responding to the incident.

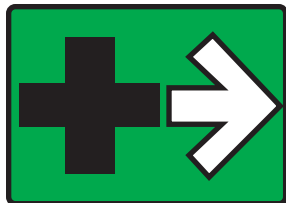
Each Team member will arrive on site in possession of his/her agency photo identification badge.

STEP 7

Subsequent to the initial provision of mental health services, the school or district's Mental Health Liaison will meet with School Emergency Response Team managers to review the activation process as well as discuss the need for additional mental health services which Team members might provide to the school community.



See the **SERP BINDER** for School Administrators for additional support resources.

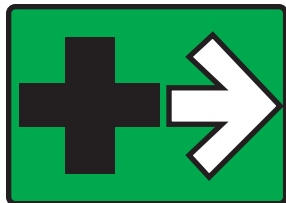


Recovery: TYPES OF CRISIS RECOVERY ASSISTANCE

Types of Crisis Recovery Assistance

Intervention after a crisis must take into account the range of current and/or anticipated reactions of students, parents and staff. For example, given a particular crisis, there may be a need to stabilize emotionally distraught students, assess and counsel others, refer specific students for treatment and provide information on stress and coping to others. Interventions must be selected with regard to the needs of individual students, staff, parents and the community. The District Crisis Recovery Team routinely helps Site Administrators assess student, staff, and community needs and develop intervention plans to meet them. Interventions are firmly grounded in assessment and an understanding of school needs.

There are a number of possible best practice crisis recovery interventions that range from Psychological First aid to intensive evidence based treatments. The District and School Crisis Recovery Teams primarily provide services to stabilize students and restore a sense of psychological safety and security for those impacted by the crisis. Students in need of intensive services are generally referred to partner agencies for ongoing or intensive support/treatment (e.g., mental health centers, hospitals, etc.). The most common intervention requested by principals and provided by District and School Crisis Recovery Teams is some form of Psychological First Aid.



Recovery: TYPES OF CRISIS RECOVERY ASSISTANCE

Providing Information:

Providing accurate information helps dispel rumors and reduce anxiety. Crisis team members provide students with accurate information in a developmentally appropriate and professionally competent manner. Key messages are carefully prepared beforehand with the school principal as appropriate. Students are generally provided with basic facts in a non-sensational manner and given an opportunity to ask questions.

Talking About Emotions:

Students experience a variety of reactions in response to a crisis. Crisis team members may talk with students, staff and parents about possible emotional reactions in order to normalize feelings and help students anticipate what they might experience.

Restorative Activities:

Crisis team members may engage students in a variety of activities to promote effective expression and positive coping. For example, students might write letters of support to a classmate in a hospital or make a memory book for parents of a classmate who died. Each activity is thoughtfully planned and student participation is voluntary.

Psychological First Aid

Psychological First Aid refers to an array of interventions that provide students, teachers and parents with information, emotional support and activities to cope with a crisis. The manner in which psychological first aid will be provided depends on the nature of the crisis. The District and School Crisis Recovery Teams generally provide Psychological First Aid through classroom, small group interventions and individual counseling. The County School Emergency Mental Health Planning Committee maintains crisis recovery team expertise in Critical Incident Stress Management (CISM) and Cognitive Behavioral Intervention for Trauma in Schools (CBITS).

Classroom Interventions

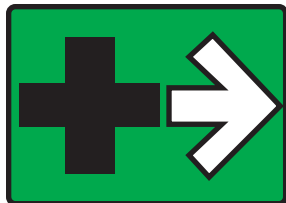
Classroom interventions are delivered to groups of about 15-30 students at a time often in their school classroom. Activities may vary, but the goal of interventions is to provide accurate information, assess coping, and help restore psychological security.

Small Group Interventions

District and School Crisis Recovery Teams may provide support and counseling to small groups of students. Small group counseling allows students time to talk about and work through traumatic experiences. School Psychologists, Social Workers and Counselors may direct students into small groups when they are similarly impacted by a crisis (e.g., witnessed it firsthand), display needs for more intensive support or react in ways that might upset other students, such as when a student cries inconsolably in a classroom intervention. Small group interventions may include education, supportive counseling, and consultation with parents of children who display difficulty coping.

Individual Counseling

Short-term individual counseling is generally provided when a student is significantly impacted by a crisis and displays difficulty recovering. The focus of these services is to work through experiences that hinder a student's ability to engage with school activities and learning. For example, a School Psychologist may counsel a child who becomes anxious and avoids the school playground where they witnessed a friend fall from the play equipment and become paralyzed. Individual counseling will be provided by professional staff who have experience in working with grief and trauma and students will be referred for private counseling as appropriate.



Recovery: TYPES OF CRISIS RECOVERY ASSISTANCE

Critical Incident Stress Management

Critical Incident Stress Management (CISM) refers to a comprehensive, systematic and integrated approach to managing traumatic stress after critical events. CISM and related approaches use a structured small-group process to mitigate and resolve the psychological distress associated with a traumatic event. These approaches begin the process of recovery by assisting students, staff and parents in making sense of thoughts and feelings related to the crisis. The District Crisis Recovery Team maintains expertise in several methods of critical incident stress defusing/debriefing.

Mitchell Model

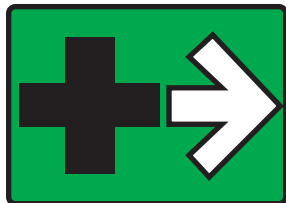
The Mitchell model of critical incident stress debriefing uses a structured eight-phase process to help participants relieve the stress related to traumatic events (Everly & Mitchell, 1999). The process includes introducing oneself, talking about what each person saw and heard, how they reacted and what symptoms they experienced, teaching about stress responses, discussing coping strategies, and making referrals if appropriate. The Mitchell model of critical incident stress debriefing takes about 1.5 to 2 hours and may be used with groups of adolescents and adults. The District and School Crisis Recovery Teams will conduct critical incident stress defusings/debriefings only as appropriate given each unique situation.

Sanford Model

The Sanford model is similar to the Mitchell model but designed for use in schools. During the structured small group process, each person is given about 1-2 minutes to answer each of four questions. The group takes turns answering the same question until everyone has had a chance to respond. If a person chooses not to use his/her 1-2 minute response time, the group sits in silence until the next person's turn begins. The four questions consist of a Fact Question, a Thought Question, a Feeling Question and an Assessment Question. The District and School Crisis Recovery Teams will conduct Sanford model defusings as indicated by the situation.

National Organization of Victim's Assistance (NOVA)

The National Organization of Victim's Assistance provides certification in group crisis intervention. The NOVA model is designed to mitigate the impact of traumatic events and has overlap with the Mitchell and Sanford models of group crisis intervention. The intervention may be used with small or large groups of adolescents and adults. Participants move through a structured process in a psychologically safe environment where they respond to questions and receive emotional support.



Recovery: TYPES OF CRISIS RECOVERY ASSISTANCE

Early Intervention and Treatment

At times, individuals impacted by post-traumatic stress require intensive early intervention and treatment.

Cognitive Behavioral Intervention for Trauma in Schools (CBITS)

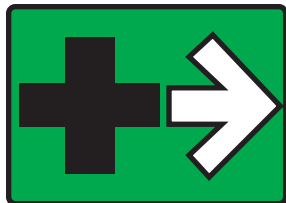
CBITS is a short-term, evidence-based intervention for students who have been impacted by a traumatic event. The intervention is appropriate for students who have experienced a traumatic event that is impacting their age-appropriate development and learning. CBITS was designed for delivery in a school setting but the trauma need not have occurred in a school setting. For example, a student who lost a parent in a serious car accident and displays PTSD symptoms may be appropriate for participation in a CBITS group.

Resources Available Through Psychological Services

Psychological Services maintains a number of resources to assist schools and individuals with the crisis recovery process. These resources may be obtained by contacting Psychological Services.

Psychological Services Resources

- Handouts for parents
- Handouts for teachers
- Sample letter to parents and the community
- Books for children and adolescents about coping with grief and loss
- Grief kits
- Referral list to community resources



Recovery: Types of Crisis Recovery Assistance

Memorials

School memorials promote the healing process for students and staff by providing opportunities to join together and participate in a ritual. Memorials take many forms and may include memorial services, tree plantings, plaques and/or honorary donations to the school or community. Caution should be used when planning memorials or when memorializing certain events. For example, public memorials are not advised when a suicide has occurred. In all cases, the family should be consulted regarding their wishes and participation in the memorial. Additional information regarding planning memorials is available from Psychological Services or District Crisis Recovery Team members.

Resiliency in the Face of Trauma

The human spirit is incredibly resilient in the face of trauma. Although some individuals may experience post-traumatic stress disorder (PTSD) following a traumatic event, the vast majority will begin a process of healing and eventually recover with limited intervention. Survivors may have memories of specific events or continue to experience a sense of loss, but these experiences come to be better understood and lose their power to dominate one's life. Indeed, when written in Chinese, the word 'crisis' is composed of two characters, one representing danger and the other opportunity.

The goal of crisis recovery efforts is to create opportunity. As educators and mental health specialists, we do this by providing the supportive conditions needed to help students and staff begin the process of healing and return to the limitless world of learning.

