

# **Responding to a Student in Crisis: Psychological First Aid**

(http://smhp.psych.ucla.edu/pdfdocs/practicenotes/respondcrisis.pdf)

School and community shootings, natural disasters, death of a family member or a friend, bullying – students and their families (and school staff) clearly are exposed to traumatic events. Schools must prepare to play a role in providing assistance. Psychological first aid for students/staff/parents is as important as medical aid.

As formulated by Pynoos and Nader (1988), psychological first aid is administered during and in the immediate aftermath of a crisis. The first objective is to help individuals deal with troubling psychological reactions. Below we highlight steps in the process, and the Exhibit on the next page outlines some general principles for crisis response.

First: *Manage the situation* – A student who is upset can produce a form of emotional contagion. To counter this, staff must

- present a calm, reassuring demeanor
- clarify for classmates and others that the student is upset
- if possible indicate why (correct rumors and distorted information)
- state what can and will be done to help the student.

Second: *Mobilize Support* – The student needs support and guidance. Ways in which staff can help are to

- engage the student in a problem-solving dialogue >normalize the reaction as much as feasible
  - >facilitate emotional expression (e.g., through use of empathy, warmth, and genuineness)
  - >facilitate cognitive understanding by providing information
  - >facilitate personal action by the student (e.g., help the individual do something to reduce the emotional upset and minimize threats to competence, self-determination, and relatedness)
- encourage the student's buddies to provide social support
- contact the student's home to discuss what's wrong and what to do
- refer the student to a specific counseling resource.

Third: *Follow-up* – Over the following days (sometimes longer), check on how things are progressing.

- Has the student gotten the necessary support and guidance?
- Does the student need help in connecting with a referral resource?
- Is the student feeling better? If not, what additional support is needed and how can you help make certain that the student receives it?

Another form of "first aid" involves helping students and families connect with emergency services. This includes agencies that provide emergency food, clothing, housing, transportation, and so forth. Such basic needs constitute ongoing crises for many students and are significant mental health concerns and fundamental barriers to learning and performing and even to getting to school.

## A Few General Principles Related to Responding to Crises

### **Immediate Response -- Focused on Restoring Equilibrium**

When responding, do the following:

- Be calm, direct, informative, authoritative, nurturing, and problem-solving oriented.
- Counter denial, by encouraging students to deal with facts of the event; give accurate information and explanations of what happened and what to expect -- never give unrealistic or false assurances.
- Talk with students about their emotional reactions and encourage them to deal with such reactions as another facet of countering denial and other defenses that interfere with restoring equilibrium.
- Convey a sense hope and positive expectation B that while crises change things, there are ways to deal with the impact.

#### Move the Student from Victim to Actor

- Plan with the student promising, realistic, and appropriate actions they will pursue when they leave you.
- Build on coping strategies the student has displayed.
- If feasible, involve the student in assisting with efforts to restore equilibrium.

### Connect the Student with Immediate Social Support

• Peer buddies, other staff, family -- to provide immediate support, guidance, and other forms of immediate assistance.

#### **Take Care of the Caretakers**

- Be certain that support systems are in place for staff in general
- Be certain that support (debriefing) systems are in place for all crisis response personnel.

### **Provide for Aftermath Interventions**

• Be certain that individuals needing follow-up assistance receive it.

Before schools respond to an individual after a crisis that affects the whole school, a school-wide response takes place. Such a response reflects emergency planning and usually prevention strategies. For example, in planning for events such as a campus shooting, schools enhance security and violence prevention. This produces a dilemma: How to make the school more secure without too much cost to a positive school climate and to the mental health of students.

One facet of this dilemma is reflected in the following request sent to our Center:

"I am the coordinator of all crisis work in our school district. As part of this responsibility I am charged with making sure that school practices the district's crisis plans and procedures. We have a number of drills during our school year that consist but are not limited to: lock-down, lock-out, severe weather, fire, emergency evacuation etc. We have been doing both announced and unannounced drills to prepare students and staff. I am seeking information, research and advice on the psychological effects, if any, these drills have on children and adolescents."

This is a true dilemma (i.e., no win-win answer is likely, only strategies to balance costs and benefits). Research on the matter is sparse. The evidence is that much more attention is paid to school safety and security (e.g., metal detectors, uniformed security officers, crisis response drills) than to minimizing negative consequences. Significant research is not available on the effectiveness and possible unintended negative effects on students and on school climate.

The dearth of research, of course, is no excuse for not considering matters such as the psychological effects of multiple emergency drills. Indeed, crisis response planners must reflect on such questions as the following:

- Do the frequent drills set a tone in the school of heightened concern about personal safety? Raise anxiety?
- Do frequent drills produce complacency on the part of some staff and students?
- Does the teaching staff resent the loss of time for instruction?
- Does the "excitement" of a drill disinhibit some students and result in deviant behaviors?
- Do some student view drills as an opportunity for disrupting the school day and thus initiate false fire alarms, hoax phone calls regarding bombs, etc.?

For more on this topic, see the Center's online Introductory Packet entitled: *Violence Prevention and Safe Schools* – http://smhp.psych.ucla.edu/pdfdocs/violence/violence.pdf ; also the Online Clearinghouse Quick Find on this topic http://smhp.psych.ucla.edu/qf/p2108\_03.htm

#### ABOUT THE CENTER FOR MENTAL HEALTH IN SCHOOLS at UCLA

The center at UCLA is co-directed by Howard Adelman and Linda Taylor and operates under the auspices of the School Mental Health Project, Dept. Psychology, UCLA. Permission to reproduce this document is granted. Please cite source as the Center for Mental Health in Schools at UCLA.

*Can't find what you need?* Contact us by email at smhp@ucla.edu or call 310/825-3634 (toll free – 866/846-4843) or write Center for Mental Health in Schools, Dept. of Psychology, UCLA, Box 951563, Los Angeles, CA 90095-1563. http://smhp.psych.ucla.edu/