Supporting students and staff after the shooting in Aurora, CO

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Psychological first aid

• Provide broadly to those impacted
• Supportive services to foster normative coping and accelerate natural healing process
• All staff should understand likely reactions and how to help children cope

• Anyone that interacts with children can be a potential source of assistance and support – if unprepared, they can be a source of further distress
Potential symptoms of adjustment reactions

- Sleep problems
- Separation anxiety and school avoidance
- Anxiety and trauma-related fears
- Difficulties with concentration
- Deterioration in academic performance
- Regression
- Depression; Avoidance of previously enjoyed activities
- Substance abuse
- Somatization
Video clip introduction (Clip 1)
Children’s guilt

- Thought processes limited by:
  - Egocentrism
  - Limited understanding of causality
  - Magical thinking

- Results in guilt
  - Reassure children of lack of responsibility
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What to expect in schools in absence of intervention

- ↓ Cognitive functioning and academic achievement (anxiety, ↓ concentration, sleep problems, depression)
- ↑ Absenteeism (school avoidance)
- ↑ Suspensions/expulsions (irritability, social regression, substance abuse)
- → → ↓ Graduation
- Taking time in schools to help children adjust to disaster and aftermath is essential to promote academic achievement
If only the signs were this easy to read.
Video clip on additional reactions (Clip 2)
Parents often underestimate symptoms

- Children may withhold complaints because of concerns they are abnormal, or to protect parents who are upset
- Parents may not think professionals are interested or assume “normal reactions to abnormal event”
- Stigma related to mental illness
Factors that adversely affect adjustment

- Direct victimization or witnessing
- Exposure to horrific scenes (incl. media)
- Family crisis/divorce/domestic violence
- Previous trauma
- Parental challenges in coping
- Lack of supportive family communication style
- Pre-existing mental health problems
- Lack of community resources and support
Adjustment Over Time in Crisis

A = baseline functioning
B = event
C = vulnerable state
D = usual coping mechanisms fail
E = helplessness, hopelessness
F = improved functioning
G = continued impairment
H = return to baseline
I = post-traumatic growth
Identification, monitoring and referral

- Importance of situational awareness over time
- Observation for behavioral changes
- Communication through support network
  - Administrators, mental health and counseling staff, crisis coordinators and facilitators
- Coordinate communication with family
Starting the conversation

• Creating environment where it’s safe to share feelings and concerns
• Reassure students of safety (but allow students to express concerns and own their feelings)
• Open the topic
• Techniques to manage classroom discussion
  – Redirect excess personal sharing to private setting
  – Contain distress
  – Emphasize coping, adjustment and mastery
Maintaining structure with support

- Setting limits with empathy and understanding
- Providing safe outlets to explore issues
- Training and awareness of all staff
Being with someone in distress

• Do not try to “cheer up” survivors
• Do not encourage to be strong or cover emotions
• Express feelings and demonstrate empathy
• Avoid statements such as: “I know exactly what you are going through” (you can’t), “You must be angry” (don’t tell person how to feel), “Both my parents died when I was your age” (don’t compete for sympathy)
• Allow child/family to be upset and tolerate unpleasant affect, without trying to change it. Accept reactions while suspending judgment – intervene only when safety/health is concern
Video clip on grief triggers (Clip 3)
Support for professional staff

• Adults are impacted as well as students
• It can be distressing to witness the distress of others
• Practical supports
• Informal supports
• Employee Assistance Program
  – Horizon Behavioral Services EAP
  – Any type of problem with complete confidentiality, 24 hours a day.
  – Call 1-800-284-1819
In closing (Clip 4)