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## V – RECOVERY

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## General Recovery Checklist

Recovery activities (such as the restoration of the physical spaces and psychological first aid) are of tremendous value in helping people come to terms with a crisis.

- ❑ DOCUMENT activities.
- ❑ ACKNOWLEDGE the event. The return to school will be one of coming together and identifying experiences and, possibly, losses
- ❑ IDENTIFY those affected. It may take time to understand the full impact on the school community.
- ❑ ASSESS students and staff directly for the emotional impact of the crisis. Student and staff reactions may be immediate or delayed.
- ❑ EMPHASIZE resiliency. Re-instituting control and predictability for the school community enhances equilibrium and coping skills. Routine is reassuring.
- ❑ RESTORE the physical facility.
- ❑ REQUEST assistance as needed from local public safety agencies and providers.
- ❑ IDENTIFY what follow up interventions are available to students and staff.
  - Conduct debriefings with staff; support their concerns and emotions.
  - Provide classroom assistance, if needed.
  - Outline schedule for the day; modify day's schedule if needed.
  - Identify resources available to teachers and students.
  - Provide access to these support resources.
- ❑ COORDINATE announcements, press releases and other communications to the school community, media and local community. Distribute information releases to all school staff.
- ❑ ESTABLISH contact with parents/family members of affected students to offer support, determine assistance needed, and acquire information regarding hospital visitation and/ or funeral arrangements.
- ❑ CONTROL rumors; provide regular updates of information to various groups.
- ❑ DEVELOP a long-term recovery plan.
- ❑ CONSIDER curricular activities that address the crisis.
- ❑ ALLOCATE appropriate time for recovery.
- ❑ PREPARE a post-incident after action report that includes recommended improvements to emergency plans.
- ❑ CAPTURE "lessons learned" and incorporate them into revisions and trainings.
- ❑ PLAN how anniversaries of events will be commemorated.

# Recovery Strategies for Emergencies/Critical Incidents

The following information may be useful in the days and weeks after an emergency.

## THE DAY AFTER: WORKDAY TWO OF EMERGENCY MANAGEMENT

- Convene a District Crisis Response Team to assist with debriefing:
  - Assess system-wide support needs, and intervention strategies
  - Schedule and provide student, family and staff Critical Incident Stress Management services
  - Discuss successes and problems
  - Discuss things to do differently next time
- Convene with staff to provide updates on additional information and procedures.
- Identify students and staff in need of follow-up support and assign staff members to monitor vulnerable students:
  - Coordinate counseling opportunities for students
  - Announce ongoing support for students with place, time, and staff facilitator
  - Provide parents with a list of community resources available to students and their families
- In case of death, provide funeral/visitation information
- Allow staff opportunity to discuss feelings and reactions and provide list of suggested readings to teachers, parents and students

## RESUMPTION OF CLASSES

- **Re-entry into the facility.** After consulting with the district office the principal/site administrator is the individual responsible for authorizing re-entry into the school facility. A damage assessment team should:
  - survey the school after a disaster
  - report findings to the principal/site administrator
  - ensure that timely and accurate data is received. **Only after the principal/site administrator has been assured by public safety officials and/or local contractors that the safety of the school has been restored should re-entry occur.**
- **Relocation.** In the event the school is damaged to the extent that all or a portion of it is uninhabitable until repairs are made, plans must be developed to address the relocation of educational services and staff to alternate facilities until repairs are made or the school is rebuilt.

## LONG-TERM FOLLOW-UP AND EVALUATION

- Write thank-you notes to people who provided support during the emergency.
- Be alert to anniversaries and holidays. Often students and staff will experience an “anniversary” trigger reaction the following month(s) or year(s) on the date of the emergency, or when similar crises occur.
- Amend emergency management protocols, if needed.

## REPAIRS AND RESTORATION

- **Repairs or Construction on Disaster Sites.** Any repairs and rebuilding of damage wrought by school violence or natural disaster must carefully consider the input and feelings of the victims and their families. There is a strong and significant psychological connection to death sites that must run its full course and should never be discounted or ignored. Making changes and reconstruction in and around death and injury sites requires a delicate balance with the need to resume normal activities. The construction must be the result of careful and deliberate consultation with students, parents and school staff. Action should never be rushed. Families may not be ready for change and pressure may only delay or impair healing.
- **Post-Disaster Mitigation.** To break the repetitive loss cycle and create a higher level of disaster resistance, a recovery plan should specify mitigation projects that could be completed in the process of incident recovery, repair and restoration. This may mean adapting the facility for seismic retrofitting (e.g., bolting shelves and TVs to walls, file cabinets to each other, security light fixtures, etc). It also may mean changes to the social, economic and environmental factors that can affect a school’s vulnerability to the impact of hazards. Damages and injuries that occurred during the most recent crisis should be reviewed to identify preventive measures that could be taken now to mitigate the recurrence of similar damage or injuries in future incidents. Prioritize mitigation measures by degree of life safety, cost, frequency of identified potential hazard and potential number of people exposed.

## Emotional Trauma and Post Traumatic Stress

**Post Traumatic Stress:** A disaster is a devastating, catastrophic event that can be life threatening and produce injuries and deaths. Post Traumatic Stress is an anxiety disorder that can develop in children, adolescents or adults when individuals survive disaster-related experiences. The range of human responses to a catastrophic event may include physical, cognitive and emotional symptoms such as nausea, sleep disturbance, slowed thinking, troubled memories, regressed behavior, anxiety, guilt, depression, anger and a host of other responses.

**Retraumatization:** Anniversary dates, media coverage, the filing of lawsuits, or similar events in other regions can “retraumatize” a community, contributing to further depression. Some people also have feelings of inadequacy about dealing with the ongoing tragedy. For some trauma victims, these adverse effects fade with emotional support and the passage of time. Others are more deeply affected and experience long-term consequences. These reactions are normal responses to an abnormal event. Although no one can predict who will experience the most severe reaction to trauma, the more direct the exposure to the event, the higher the risk for emotional harm.

Trauma is an acute stress response that an individual experiences when confronted with sudden, unexpected, unusual human experience. Here are some common signals of a stress reaction to trauma:

PHYSICAL	MENTAL	EMOTIONAL	BEHAVIORAL
Chest pain*	Confusion/blaming	Anxiety	Alcohol/drug use
Chills	Disturbed thinking	Depression	Change in speech
Difficulty breathing*	Indecision	Fear	Helplessness
Dizziness	Insomnia	Grief	Increased appetite
Fainting	Loss of time/place	Guilt	Intense startle reflex
Grinding Teeth	Nightmares	Intense anger	Isolation
Headaches	Poor concentration	Irritability	Loss of appetite
Heart races	Poor memory	Mood swings	Misbehavior
Muscle shakes	Poor problem-solving	Nervousness	Outbursts
Nausea	Poor/hyper alertness	Overwhelmed	Pacing
Prolonged staring	Strange images	Panic	Restlessness
Severe sweating	Unable to identify	Shock	Suspicious
Thirst	familiar people/things	Uncertainty	Withdrawal
Twitches			
Vomiting			
Weakness			

*\*Needs medical evaluation--contact a physician.*

## Effects of Trauma on Children

Emergencies hit children hard. It is difficult for them to understand and accept that there are events in their lives that cannot be predicted or controlled. They learn that adults cannot fix a disaster and cannot keep it from happening again.

As a result of traumatic experiences some children will show a variety of symptoms of distress. The teacher must first know a child's baseline ("usual") behavior and cultural/ethnic responses before he/she can identify "unusual" or problem behavior in a child.

- Unusual complaints of illness, stomach cramps, chest pain
- Difficulty concentrating, cannot focus
- "Feisty" or hyperactive, silly, giddy
- Any emotional display; crying, "regressed" behavior (less than age appropriate)
- Lethargic, apathetic
- Easily startled, jumpy; sense of fear or worry
- Lack of emotional expression
- Cannot tolerate change; cannot move to next task
- Staying isolated from the group
- Child seems so pressured, anxious that he/she somehow dominates, has to distract others, or is otherwise "needy"
- No eye contact (Note: In some cultures, making eye contact with adults is "defiant behavior")
- Resistance to talking and opening up (however, child might just be shy, may have language or cultural barrier)

## Tips for Teachers to Help Distressed Children

Usually a child's emotional response to a disaster will not last long, but some problems may be present or recur for many months afterward and require the services of professionals skilled in talking with people experiencing disaster-related problems. The following may be helpful in working with distressed children:

- ❑ COPE with personal feelings of helplessness, fear or anger. This is an essential first step to being able to effectively help the children.
- ❑ LEARN to recognize the signs and symptoms of distress and post traumatic stress reactions.
- ❑ IDENTIFY children who may need crisis intervention and referral to mental health professionals or other helpers.
- ❑ PUT the emergency or critical incident in context; provide a perspective
- ❑ COMMUNICATE a positive not helpless attitude.
- ❑ OFFER to spend time with the child or write a note. This lets the child know that he or she is in your thoughts.

- TALK about personal feelings and listen to those of the child.

### **Tips for Teachers to Help Distressed Children cont.**

- TALK with the students about the event or the anniversary of the event, as a class activity.
- ENCOURAGE older children, adolescents in particular not to try numbing or changing their feelings with alcohol or drugs.
- Children need close physical contact during times of stress to help them reestablish a sense of identity. Games involving physical touch in a structured environment that can be helpful include *London Bridge* and *Duck, Duck Goose*.
- INVITE the children or adolescents to create a mural on the topic of the traumatic event. It is recommended that this be done in small groups followed by discussion.
- INVOLVE the children in a group discussion about disaster related experiences. It is important to share your feelings and fears. This helps to legitimize their feelings, helping them feel less isolated.
- COORDINATE information between home and school. It is important for teachers to know about discussions that take place at home, in particular with fears or concerns that the child has mentioned.
- RESPOND to the children in a direct, supportive, and consistent manner.

### **When to refer students for additional assistance**

With caring and support from the school community and families, most students will recover from the effects of a crisis. Use the following guidelines to determine whether a student should be referred to a school counselor for further assistance:

- Students who continue to demonstrate an elevated emotional response (crying, worry, anxious) after their peers have discontinued to show these signs
- Students who are withdrawn or appear depressed
- Students who appear distracted and are unable to engage in classroom assignments and activities after an ample amount of time has passed
- Students who present behavior of a threatening nature to themselves or to others or intentionally hurt themselves
- Students who exhibit significant behavioral change from their normal behavior, i.e., poor academic performance, weight loss, poor hygiene, distrust of others, suspected drug/alcohol use, etc.

## **Classroom Activities Following A Tragic Event**

The following pages provide suggested questions or themes, which may be effective to use in a class after a critical incident, and specific techniques to follow. Be sure the questions are “open-ended,” which means that they cannot be answered by a simple “Yes” or “No”. Open-ended questions serve to facilitate verbal discussion. For some children, talking is not helpful. Drawing is another means of expression of feelings. Allow a full range of expression: some kids draw recognizable “things”, others draw “abstracts”. Emphasize to the children that their work will not be judged, graded or necessarily shown to others. The student is the best source for what’s going on behind the drawing. Ask him or her about it.

### **Suggested questions to ask/themes to represent:**

1. Where were you when it (the disaster/event) happened?
2. What were you doing?
3. Where were your friends? Where was your family?
4. What was your first thought when it happened?
5. What did you see? What did you hear?
6. What sound did it make? What did you smell?
7. How did you feel?
8. What did other people around you do (during, after)?
9. What was the silliest thing you did?
10. Were you or anyone else you know injured?
11. What happened to pets or other animals around you?
12. What dreams did you have after it?
13. What reminds you of it? When do you think about it?
14. What do you do differently since the event?
15. How do you feel now? What makes you feel better?
16. How have you gotten through rough times before?
17. What would you do differently if it happened again?
18. How did you help others? How would you help next time?
19. What can you do now to help others?

### **Special Considerations:**

- Allow for silence for some with low language skills, shyness, discomfort, etc. Encourage peer support for these children.
- The teacher should accommodate the child.
- If a child has low English skills, consider asking for a translator or a peer to help the child express in words.
- Create a chance for verbal expression in any language, but allow students who may not want to participate the “right to pass”.



## **Effects of Trauma on Adults**

### **First Reactions May Include:**

- Numbness, shock, difficulty believing what has occurred or is in the process of occurring
- Slow or confused physical and mental reactions
- Difficulty in decision making; uncertainty about things; it may be difficult to choose a course of action or to make even 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/friends
- Emotional lability; becoming irritable or upset more quickly than usual
- Feelings of fatigue, hopelessness, helplessness
- Digestive problems; headaches or backaches
- Difficulty accepting that the emergency has had an impact or difficulty accepting support from friends and the community

### **Tips for distressed adults:**

- Take time to relax and do things that are pleasant; positive change such as getting away for a few hours with close friends can be helpful
- Get regular exercise or participate in a sport; activity soothes anxiety and helps with relaxation
- Keep days as simple as possible; avoid taking on any additional responsibilities or new projects
- Tap sources of assistance with the workload - ask students, instructional assistants, or volunteers to help grade papers, take care of copying, or help with other time-consuming tasks.

# When Someone Dies

Children may experience a number of powerful feelings when confronted with the death of a classmate or another individual. The following describes an interactive process used to facilitate a student's expression of the feelings and reactions following a death that affects the school community. This process is most effective when the focus follows a sequence of five phases:

(1) Introductory (2) Fact (3) Feeling (4) Reaction/Teaching (5) Closure

This process should conclude with quiet, reflective time.

## 1. Introductory Phase

- Introduce team members or helpers to discuss why they have been assembled and what is hoped to accomplish.
- Stress the need for confidentiality and ask for a verbal agreement to keep what is said confidential.

## 2. Fact Phase

- Provide all known relevant facts about the death/incident.
- Confirm the student's understanding of what happened
- Ask if anyone has or wants additional information about the death/incident
- Ask how they learned about it.
- Ask where were they when they first heard about it.
- Ask if anyone is missing from the meeting who needs to attend.

## 3. Feeling Phase (include everyone in the discussion)

- Ask what were their first thoughts when they heard about the death/incident.
- Ask how they are feeling now.
- Ask students to tell the class about the individual(s) who died.
- Ask for some memories of him/her/them.
- Ask how do the students think he/she/they would like to be remembered.

## 4. Reaction/Teaching Phase

- Explore the physical, emotional and cognitive stress reactions of the group members
- Ask what are some things students usually do when they are really upset or down?
- Take this opportunity to teach a little about the grief process, if appropriate.
- Talk about effective coping techniques.
- Determine if each student has someone else to talk to.

## 5. Closure Phase

- Provide information about memorial service/funeral if available
- Support creative activities such as writing cards, taking a collection.
- Encourage students to support one another,
- Remind them that it may take a long time before they will feel settled and explain that is normal
- Encourage them to talk with someone in their family about their sadness

**Support long-term healing** by charting a course that offers support and anticipates the needs of victims and the entire community. Continued healing requires open and responsive communication lines among victims, victims' families and the school.

**Support memorials and donations** by creating meaningful, inclusive and healing activities and by setting parameters for media coverage to allow privacy for grieving staff and students.

**Manage benchmark dates**— Anticipate and prepare for anniversaries and benchmark dates and establish clear parameters for media coverage.

**Handle physical reminders carefully**— Any repairs and rebuilding of damage wrought by violence or natural disaster must carefully consider the input feelings of the victims and their families.

**Prepare the class**— The following section is designed to assist the teacher or counselor in preparing the class to help a student who has experienced a tragedy such as the death of a friend or family member prior to his/her return to the class.

- Explain what is known of the loss.
- Ask if other students have experienced the death of a friend or family member.
- Are there things people said or did that made you feel better?
- How do you think our classmate might be feeling?
- That could you say that might help him/her know you care? This is your chance to guide student's responses to helpful comments as you guide them away from less helpful comments.
- What would you want someone to say to you if you experienced the death of someone close?
- Are there things you could do that may help them feel better?
- We can take our cues from the person that will guide our actions. What might some of those cues be?

**Assist the student**—Talk with the student before returning to class. Discuss what to share with the class and who should tell them.

- Allow the student to leave class if upset and where the student can go.
- Arrange for a person to meet with the student during the school day if he/she needs someone to talk to.
- Help the student to understand that he/she doesn't have to answer questions or discuss the death if he/she doesn't feel like it.
- Encourage journal writing for older students, provide drawing materials for younger children.
- As a teacher, be willing to negotiate homework or class expectations during the first days after returning to school.

- ❑ Avoid cliché statements (e.g., “I know how you feel” when nobody knows the unique relationship the student had with the deceased).

### **Assist the student cont.**

- ❑ Don’t expect the student to snap back into the “old self”.
- ❑ If a student seems unaffected by the loss, remember that everybody has his/her own way of grieving.
- ❑ Even if the student seems to be adjusting to school again, don’t assume the grieving has stopped, nor the need for assurance and comfort.

**Memorials.** When anyone from the school community dies, people will often want to find ways to memorialize the student or staff member. Parents and loved ones especially want to know people miss the person and that there is great sadness with the loss. It is important to carefully think through the type of tribute that would be appropriate for the person who has died.

- ❑ Check with family members to see what kind of memorial they would prefer.
- ❑ Memorials should focus on the life lived, rather than on the death.
- ❑ Yearbook memorials should be a regular-sized picture with a simple statement such as “We’ll miss you”
- ❑ Creating a permanent or lasting school memorial for one person sets a precedent
- ❑ Public sympathy may balloon into a spontaneous memorial of artwork and symbolic expressions of loss. There may be a need to develop and implement a system for displaying the public generosity and grief.
- ❑ There are many other ways to support family and friends of the deceased. Examples include: cards, food, kind words, work parties for relatives, scholarship funds, contributions to a favorite charity and planting a tree.

**Suicide Response.** A school’s general response to a suicide does not differ markedly from a response to any death emergency. However, some issues exclusive to suicide require specific attention.

- ❑ Acknowledge the suicide as a tragic loss of life
- ❑ Allow students to attend funeral services and to grieve the loss of a peer without glorifying the method of death
- ❑ Do not close school for the funeral
- ❑ Provide counseling support for students profoundly affected by the death
- ❑ Do not organize school assemblies to honor the deceased student or allow memorials
- ❑ Be cautious about discussing suicide as the cause of death of students even if it is apparent. Police will likely conduct an investigation that may result in days or weeks of uncertainty.
- ❑ Consult with a surviving parent before disclosing sensitive details. Parents and family members may be reluctant to accept or acknowledge suicide as the cause or there may be family members who do not know the “apparent” cause of death.

A suicide in the school community can heighten the likelihood, in the subsequent weeks, of “copycat” suicide attempts and threats. Traumatic events can trigger extreme feelings of helplessness and hopelessness long after the initial trauma occurs. These feelings may also lead to thoughts of suicide or suicide attempts. Sometimes a new trauma will leave a survivor or family member with the feeling that they can’t handle the tragedy as well as they think people expect them to. In order to prevent further tragedies, students considered to be especially susceptible to depression/suicide must be carefully monitored and appropriate action taken if they are identified as high risk.

### **THE “NEW NORMAL”**

Victims of a crisis experience have a real need to return to normal. However, “normal” as they once experienced it is forever gone and changed. For many, the recognition that such a “normal” is unattainable can be debilitating. As a result, counselors and crisis survivors find the concept of a “New Normal” to be very reassuring and accurate. While they recognize that things will never be the same, they also come to realize that a new stasis or equilibrium has arrived to replace the former “normal.” For students and staff alike, the sooner this is recognized, the better.