Psychological First Aid (PFA) for Schools, Teachers, and Students

Adult (Staff to Staff) Version

During the World-Wide Pandemic

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Background and Current Application

This Introduction to Psychological First Aid (PFA) for Schools: Listen Protect Connect/Model and Teach is a resource document that provides more background information on the development and use of the “Sample Questions for Each Step: Listen Protect Connect Model and Teach During the World-Wide Pandemic” However, this brief overview does not substitute for in-person training for the PFA LPC-Model and Teach. Information about PFA Training is available through NACTATR.

Historically, Psychological First Aid is a concept that can be traced to an article published by the American Psychiatric Association in 1954 which acknowledged the need for an acute intervention to alleviate human stress “of a severity and quality not generally encountered due to the ‘forces of nature or from enemy attack’.”

Since that time, many researchers, government and health organizations, including the National Institute of Mental Health, the Institute of Medicine, the U.S. Departments of Education, Health and Human Services and Justice, have supported the idea that early, brief and focused intervention can reduce the social and emotional distress of children and adults after traumatic events by establishing feelings of physical and emotional safety.

Listen, Protect, Connect: An Evidence-Informed Model - Modified for Teachers and Other School Staff Helping Each Other

In keeping with best practice guidelines, Psychological First Aid for Schools: Listen Protect Connect - Model and Teach is a model of immediate help focusing on support and assistance provided to students by adults who are employed by a school or school district, specifically, teachers, educational aides, administrators, and staff members. This version is Modified for Teachers and Other School Staff To Help and Support Each Other

PFA: LPC-Model and Teach was designed as a five-step crisis response strategy based on communication skills that educators and school staff use every day. Although initially introduced in response to targeted school violence, such as school shootings and other acts of violence on a school campus, the goals of Psychological First Aid for Schools – Listen Protect Connect/Model and Teach have relevance to the COVID-19 pandemic which has seriously disrupted the daily lives of children and adults all over the world. The closure of schools, and businesses add to the health risks faced by all which contribute to the stresses that students and adults face under orders of physical distancing, stay at home directives or quarantine conditions. We know that being at home doesn’t have to mean being cut off from peer and friends. However, we must acknowledge that educators are facing additional stresses of multi-tasking during each day and managing all personal and professional roles and responsibilities within the space of their homes alone, or with the constant presence and pressure of family members.
In an original Helpful Hints article published by the Readiness and Emergency Management for Schools (REMS) Technical Assistance Center of the U.S. Department of Education, Vol. 3, Issue 3, 2008, Psychological First Aid for Educators and School Staff “Listen, Protect, Connect—Model & Teach” (PFA: LPC-Model and Teach) was introduced as a stress reduction, crisis response strategy. Authored by Drs. Marleen Wong, Merritt Schreiber and Robin Gurwitch, the main goals of PFA are to help to fulfill the mission of education during times of crises, man-made and natural disasters with adults in the school helping students:

1) To remove the social and emotional barriers to learning after a crisis
2) To keep students actively engaged in learning by reducing fears, stress and worry
3) To help students find new ways of coping and adapting to a ‘new normal’

In this document, PFA: LPC-Model and Teach has been modified to an adult peer to adult peer model, exploring how faculty and staff can help and support each other as they confront the challenges of returning to school after a crisis – and specifically after the COVID 19 limitations have been relaxed to allow schools to reopen. The new context for adult suggests modified but closely related goals:

1) To remove the personal social and emotional barriers to teaching and resuming all school operations
2) To keep faculty and staff actively engaged with students and each other by reducing fears, stress and worry
3) To help each other find new ways of coping and adapting to ‘a new normal’.

CORE ELEMENTS OF PSYCHOLOGICAL FIRST AID (PFA) FOR ADULTS -TEACHERS and STAFF: LISTEN, PROTECT, CONNECT—MODEL & TEACH

In this modification PFA: LPC-Model and Teach is a five-step program that provides school employees guidelines on how to speak with each other after an emergency event or disaster that has disrupted the learning environment. Each step is formulated to help teachers reduce distress and facilitate the adult responsibilities of keeping a school running in the classroom on campus or online. The steps are based on a model of cognitive learning and behavior that helps people put their experiences and feelings into words, provides support and encouragement, engages users in practical problem solving, models calm and optimistic behavior, and teaches others about how traumatic stress affects human behavior.

The “Sample Questions for Each Step: Listen Protect Connect Model and Teach During the World-Wide Pandemic” are modified in this peer to peer adaptation as follows:
Listen: School administrators should set aside time to give adults in the school an opportunity to share their experiences and express feelings of worry, anxiety, fear, or other concerns about their safety as they contemplate returning to the bricks and mortar classroom. Establishing rapport and trust as quickly as possible is always a good start with a caveat that confidentiality is more important than ever. Your intent in listening to the person speaking to you about his or her crisis is that you want to convey your interest and your empathy. The teacher, administrator or school staff member can open the discussion by acknowledging what has happened and letting a peer know that it is okay to share their experiences and that anything that is discussed will be respected as confidential.

Protect: To avoid any possibility of re-traumatization, school staff members should try to reestablish feelings of both physical and emotional safety. This can be done in many ways, including providing a calm routine or offering information about events surrounding the emergency event, such as what is being done in the community and the school to keep everyone safe. In order to understand what the greatest impediment to returning to the school building may be, the Protect question most salient to gaining that understanding is, “What is the most difficulty thing you are dealing with now?”

Connect: In this step, we help peers re-establish normal social relationships and stay connected to other adults in order to experience social support within the school. One of the most common reactions to trauma or fear is emotional and social isolation and the sense of loss of social supports. Restoring and building connections even in the online learning environment promotes stability, recovery, and predictability in people’s lives. Who were their closest colleagues and friends? Have they had the opportunity to stay in touch? How can those individuals be of help in the face of the specific fears and anxieties identified in the Protect phase?

Model Calm and Optimistic Behavior: Teachers and other school personnel who are affected by an emergency event may not know exactly how they will navigate the process of recovery, but they can acknowledge the disruption to school and many other aspects of daily life. School and district leaders play a pivotal role when they can acknowledge the personal needs of teachers and other adults in the schools rather than focus solely on a campaign to ‘get back to normal’. Through their example, they demonstrate that adults can effectively cope with the stress despite the fear or loss they experience.

In an article published online by the Global Leadership Network in April 2020, author DeeAnn Turner wrote about 5 things great leaders do in a crisis which is summarized below:

1. They embrace reality and translate it into a vision by looking forward, recognizing the seriousness and dire needs of the present, but at the same time projecting and balancing hope, positivity and optimism toward an improved future state.
2. **They prioritize the issues quickly and reprioritize as often as necessary.** They understand that in a crisis, circumstances can change quickly, and they have to be prepared to pivot to a new priority adjusting their strategies with additional information and insight.

3. **They communicate to their employees and customers with clarity.** They are transparent and provide people with the information they need to know, and they are confident enough to admit what they don’t know. They speak truth with encouragement and grace.

4. **They focus on the concerns of others above themselves.** These leaders are skilled at empathy, and they gravitate to an attitude of “how can I help you,” they recognize that others are suffering just as much or more than they are. They don’t use their position to take advantage of others or to focus on self-preservation.

5. **They lead from the front.** These leaders don’t ask their team members to do anything they are not willing to do themselves. They reach out constantly and listen to the concerns of those serving the organization and serving their ‘clients.’ They remain as visible and accessible as possible, even if only virtually.

In short, Ms. Turner wrote: The call to leadership is often greatest in a crisis. As goes the leader so goes the organization.

Natural leaders and informal leaders within a school are role models for their peers as well.

**Teach:** All adults in a school can educate themselves about common reactions to the emergency event or disaster, such as the fact that children and youth may have more difficulty with learning during and after the crisis and that adults can have personal challenges that make it difficult to return. They can help each other become familiar with the range of normal reactions that can occur immediately after a traumatic event or disaster and discuss constructive ways of adapting and coping to new challenges and changes. The following are common reactions among adults that may cause them anxiety and distress. The number of people in their families and the number of responsibilities they bear are important factors to consider.

**Emotional Reactions**
- Increased worries or fears about the health and safety of self or others
- Worries or fears about separation and/or loss
- Financial Worries or fears about reoccurrence of event, job loss
- Feelings of guilt or blame
- Feelings of helplessness
Behavioral Reactions
- Changes in showing up for work or decreased work performance
- Decreased concentration
- Decreased attention
- Changes in sleep
- Changes in appetite
- Changes in mood (swings)
- Increased irritability
- Increased anger outbursts or temper tantrums
- Increased withdrawal

Cognitive Reactions
- Inability to concentrate on work or frequently forgetting important work details
- Obsessive discussions about event or refusal to discuss the crisis at all
- Misunderstandings and misperceptions about the event
- Excessive interest in media coverage
- Trauma reminders (those things that are similar to sights, thoughts, sounds, tastes, smells, etc. that were present at the time of the traumatic event)
- Overwhelming feelings of grief or anxiety

Physiological Reactions
- Increased sensitivity to sound
- Increased startle response
- Increased somatic complaints including: headaches, stomachaches, fatigue, vague aches and pains

How to Implement PFA for Teachers and Adults

PFA: LPC-Model and Teach is not intended as a single session in which the adult simply recites their experiences, but an interactive process by which teachers and staff can identify potential psychological and emotional roadblocks to resuming school operations over time. Adults, like students, may need to tell their stories at different times and in different settings (online or in person) during or after significant events that cause them stress and distress, remind them of loss, the trauma or the anniversary of a tragedy. It’s important to keep in mind that the challenges can be different at different points in time. What causes a distress immediately after a crisis may be different at different points in time over the course of weeks, months or years.

One adult does not have to consistently be the individual who provides PFA but each phase and component and the overall process should be adhered to with fidelity. If a school worker
(teacher or staff member) wishes to speak to different adults, he or she may do so. This is not a ‘one and done’ process. Truly working through or processing a disruptive or traumatic experience takes time, reflection and work.

**Risk Factors That May Indicate the Need for a Counseling Referral**

Psychological First Aid is effective for most students and adults. It has been suggested that up to 75 of students and adults are able to adapt to new challenges with early support from an important person. However, if a teacher or staff member has any of the following experiences you may wish to consider referring him or her to your school psychologist, counselor or social worker or local community mental health agency.

- Loss of a family member, schoolmate or friend
- Fear for their lives, observing serious injury or the death of another person
- Getting sick or becoming hurt due to the event
- Home loss, family moves, changes in neighborhoods, changes in schools or loss of belongings
- Being unable to evacuate quickly or quarantine quickly enough
- Past traumatic experiences or losses
- Pet loss
- Past history of trauma, anxiety, depression or behavioral disorders coupled with any of the above

The timeline for recovery is not fixed and depends on many factors. It is normal for children and adults to experience heightened upset and distress for a few weeks immediately after a crisis occurs. However, if the child continues to have difficulty with eating, sleeping, regulating emotions or failing to adapt after six to eight weeks, a referral is indicated.

An immediate referral must be made if the adult continues

- Feeling hopeless, trapped, or like there's no way out
- Having persistent or worsening trouble sleeping or eating
- Feeling anxious or agitated
- Feeling intense psychological pain like there is no reason to live
- Feeling rage or anger
- Engaging in risky activities without thinking of the consequences
- Increasing alcohol or drug misuse
- Withdrawing from family and friends

In this situation of cumulative and growing levels of stress, help the adult connect with The National Suicide Prevention Lifeline, a national network of local crisis centers that provides
free and confidential emotional support to people in suicidal crisis or emotional distress 24 hours a day, 7 days a week.

In the US  800-273-TALK (8255) In Canada 1-800-232-7288

Portions of this document were excerpted from 2 publications:


2. **10 Tips for Teaching the Psychological First Aid Model** for K-12 Education Agencies (2019)s, Readiness and Emergency Management for Schools (REMS) Technical Assistance Center of the U.S. Department of Education
Listen

• Tell me how you have been affected by the stay at home orders during the Corona Virus?

• What’s your schedule like from Monday through Friday?

• How do you spend your weekends?

• I am ready to listen when you are ready to share.

Protect

• Are you worried about your safety? Or the safety of your family or others?

• What are you most worried about right now?

• What’s the most difficult thing you have to deal with?
Connect

• Have you ever had to confront a situation like this - when you couldn’t leave or go outside your home when you wanted to?
• What can the school do to help?
• What can other teachers do to help?
• What can I do to help?
• What do you think you will make things better?
• What has been helpful to you in the past when you’ve faced a crisis?

Model

• This has been hard for all of us...for all people around the country. Thank you for sharing your concerns with me. It takes a lot of trust and courage for any of us to talk about our problems.
• Let’s talk about some things you can do to re-connect with other teachers and staff at school or friends outside your home while you continue to protect yourself from this disease.
• Let’s brainstorm some of the ways that other teachers and others like health care and emergency workers, are coping.
Teach

• What you experienced is very stressful. It’s a health crisis that everyone across the world is facing. Sometimes people feel like they are ‘going crazy’ because they can’t leave their homes, go to school or see friends and colleagues. But during quarantine conditions when all family members have to keep at a distance from others, it’s normal to have a difficult time creating a new schedule such as regular times for sleeping, eating or concentrating or even controlling emotions. Are you experiencing any of these common changes? (EDUCATIONAL HANDOUT CAN BE PROVIDED about COMMON REACTIONS)

• Until the stay at home orders are ended and you can return to school, creating a new normal or ‘regular’ routine is the best thing you can do. It will take extra effort and some self-discipline but it will pay off in relieving your stress.
Teach (cont’d)

For example, on ‘school days’:

1. Go to sleep and get up at the same time.

2. Get dressed, eat breakfast and brush your teeth as you would on a regular school day.

3. Teach your online classes on time. Build in ‘recess’ time when you and students can take a break at least every 90 minutes. Build in a regular 45 minute to 1-hour lunch.

4. Try to stay off your phone and don’t engage in social media during break time.

5. Spend dinner time and television time with your family.

6. Eat healthy and exercise – maybe with your family members for 20 to 30 minutes every day.
Ending PFA Statement

Just know that there are people here who care about you and who want to help. I want to support you any time you want to talk.

(Provide information about official school online meetings, departmental or grade level chat rooms, Telehealth counseling services, etc.,)

I really look forward to seeing you when we all return to the school. Take good care of you and your family.