

WS2 Handout 23 (Slide 118): A Lesson Plan for Use by a Crisis Intervention Team Member When Conducting a Student Psychoeducational Group

1. Introduction

- a. Introduce yourself to the adult caregiver (typically the teacher) who is responsible for group supervision and explain why you are there.
- b. Introduce yourself to the students who are a part of the group (e.g., state your name, position, where you typically work).
- c. Explain to students that you are on the crisis team and why you are there.
- d. Briefly share your understanding of the crisis event. If possible, have a script prepared by the ICS's Planning (AKA Intelligence) Section.
- e. Explain group rules. Say that if the students have questions, they will need to raise their hand and wait their turn. Depending on the nature of the event and the characteristics of the group, it may also be appropriate to tell students that some questions may need to be addressed individually after the group has ended.
- f. Explain that attendance in the group is voluntary and that they will be allowed to leave if they do not want to participate in the group. Identify for students a safe, nonthreatening area on school grounds that they will be brought to if they choose not to participate.
- g. Make use of a sign-in sheet for secondary classrooms.
- h. Obtain a copy of the teacher's attendance sheet in primary classrooms.

2. Answer Questions About the Crisis and Dispel Rumors

- a. When judged to be helpful, use carefully prescreened newspaper or video accounts of the crisis event. Ensure that such depictions are accurate and minimize the risk of further vicarious trauma.
- b. Ask the students if they have any questions about the crisis event. Be sensitive to developmental level and realize that developmentally immature students are most likely to have a distorted view of the event and its consequences.
- c. Answer students' questions about the event. Be prepared to repeat facts several times. Crises are often overwhelming events and difficult for students to understand (in particular developmentally immature students).
- d. If some crisis facts are confidential, say so, and share what facts you can. Remember to tell students the truth! Do not give inaccurate information (e.g., if crisis-related dangers are still present, acknowledge this reality and let students know what they can do to be safe).
- e. Be prepared to say, "I don't know."
- f. Make the distinction between crisis facts, inaccurate crisis rumors, yet-to-be-answered questions about the crisis event, and information that needs to remain confidential. Especially when working with adolescents, be sure to give a logical rationale for why some crisis details will need to be kept confidential.

3. Prepare for Crisis Reactions

- a. Describe common crisis reactions. Acknowledge that people experience and thus react to crises differently. Encourage students to respect a range of crisis reactions (both their own and their classmates' reactions). For example, some students may be angry, some may cry, and still others will display nervous laughter. See handouts 8 and 9 to help with this group element. A list of common reactions is provided in the table below.
- b. Describe the warning signs of severe crisis reactions (e.g., significant and impairing dissociation, hyperarousal, reliving of the crisis event, phobic avoidance of crisis reminders, severe depression, psychotic symptoms, suicidal and homicidal ideation, substance abuse of others and self, or extreme inappropriate anger toward others).

- c. Acknowledge that severe reactions, while possible and understandable, are rare. Most students can anticipate their reactions not being that acute.
- d. Describe how to get help in addressing crisis reactions, both in school and in the community. Such guidance should always include enlisting the assistance of a caregiving adult.
- e. Express optimism that, with time and talk, most (if not all students) will feel better soon. Though they will always remember the event, their crisis reactions will lessen.

Common Initial Crisis Reactions			
Emotional		Cognitive	
Shock Anger Despair Emotional numbing Terror/fear Guilt Phobias Grief	Depression or sadness Irritability Hypersensitivity Helplessness Hopelessness Loss of pleasure Dissociation ^a	Impaired concentration Impaired decision-making ability Memory impairment Disbelief Confusion Distortion	Decreased self-esteem Decreased self-efficacy Self-blame Intrusive thoughts or memories (e.g., reenactment play among children) Worry Nightmares
Physical		Interpersonal and Behavioral	
Fatigue Insomnia Sleep disturbance Hyperarousal Somatic complaints	Impaired immune response Headaches Gastrointestinal problems Decreased appetite Decreased libido Heightened startle response	Alienation Social withdrawal or isolation Increased relationship conflict Vocational impairment Refusal to go to school School performance impairment	Avoidance of reminders Crying easily Change in eating patterns Regression in behavior Risk taking Aggression

Note. From Speier (2000); Young, Ford, Ruzek, Friedman, & Gusman (1998).

^aExamples include perceptual experience, such as “dreamlike,” “tunnel vision,” “spacey,” or “on automatic pilot.”

4. Teach Students How to Manage and Cope With Crisis Reactions

- a. Discuss stress management techniques. See handout 21.
- b. Encourage students to talk with other people about their crisis reactions and feelings. List people that students can talk to (e.g., parents, teachers, counselors, friends).
- c. Remind students of the mental health resources that are available in their school.
- d. Discuss how returning to a normal routine is a positive coping strategy after a crisis. Discuss how coming to school helps manage crisis reactions.

5. Close the Lesson

- a. Give a brief summary of what was discussed.
- b. Reiterate available mental health resources.
- c. Consider assigning (with the teacher’s permission) a homework assignment wherein students would write out their own personal stress management plan.
- d. Thank the students (and the teacher) for the opportunity to be with them.

References

Speier, A. H. (2000). *Psychosocial issues for children and adolescents in disasters* (2nd ed.). Washington, DC: U.S. Department of Health and Human Services.

Young, B. H., Ford, J. D., Ruzek, J. I., Friedman, M., & Gusman, F. D. (1998). *Disaster mental health services: A guide for clinicians and administrators*. Palo Alto, CA: National Center for Post Traumatic Stress Disorder.

Note. Adapted from "Psychoeducational Group Cheat Sheet: A Lesson Plan for Mental Health Response Team Members Only," by C. Conolly-Wilson, Waukegan, IL: Waukegan Public Schools. Adapted with permission.