DISASTER IN HAITI

AWARENESS BUILDING

GUIDELINES FOR THE SCHOOL SITE PERSONNEL

Mental Health and Crisis Management
Crisis Management and Support Strategies: Working with Students Impacted by the Disaster in Haiti

Mental Health and Crisis Management Services
Welcome

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Rationale and Objectives

• All children are impacted.
• Provide cultural context to assist in supporting our Haitian American students and families
• Provide an introduction of psychological first aid
• Provide an overview of behavioral signals that may indicate the need for counseling intervention.
• Provide an overview of positive behavior strategies to manage behavior
Haiti and Cultural Competence

6.1 aftershock rattles Haiti, panicking residents

PORT-AU-PRINCE -- Authorities in Haiti scrambled to assess the damage caused by a powerful aftershock that rocked Haiti Wednesday morning, shaking unstable buildings and sending panicked people running into the streets only eight days after the country’s capital was devastated by a previous, stronger quake.

The U.S. Geological Survey said Wednesday's 6.1-magnitude temblor hit at 6:03 a.m. about 35 miles west of the capital, near the town of Petit-Goave. It struck at a depth of 13.7 miles but was located too far inland to generate any tidal waves in the Caribbean.

Reports of damage in Petit-Goave were unclear, but the aftershock was felt strongly in the capital where buildings swayed and dropped chunks of concrete.
• Familiarity with cultural beliefs can positively impact our relationships with students and their families.

• **Use information provided as a general framework – every family is unique. Please do not generalize regarding family values.**
French has always been the language of business, and **Creole, the language of the people.** (Creole made official language in 1987)

**Creole is spoken by the majority of Haitians**, while only about 10% of the population can communicate in French. However, French is still valued by all Haitians and is an indicator of social class.

To suggest that someone only speaks Creole, even if they do only speak Creole, **can be construed as an insult.**

Creole is seldom written. Not until 1979 was there a Creole spelling system recognized by the government.
• When speaking with friends, people of Haitian descent will use direct eye contact and an active tone of voice. **Eye contact is usually avoided with people of a higher socioeconomic status or position of authority.**
• Tone reflects emotion. Speech is usually accompanied by hand gestures. **Speech may get loud, but this does not necessarily mean there is anger.**
• People of Haitian descent, without formal education, may present as timid and prefer to keep to themselves.
• When in informal situations, touch is accepted, like embracing or kissing. In formal situations, a stern handshake is the accepted greeting.
• People of Haitian descent require much less personal space than Americans, so they may position themselves close to another in communication.
• It is not considered rude to be late to appointments. However, if punctuality is stressed, being on time will then be a priority.
Haitian women may assume prominent roles within the family system; however, quite often men are responsible for familial leadership. In homes with two parents, the roles appear to follow gender lines. Children are viewed as a gift from God and must be well cared for to fulfill God's blessing. The whole family and, sometimes the community, feel responsible for raising the child. Discipline of children can be considered swift and physical by American standards. Education is highly valued in the Haitian culture.
Behaviors for Children and Adolescents

• Toilet training, independent feeding, and dressing are expected later than in American culture. In fact, many children of Haitian descent would be labeled "delayed" by Denver Developmental testing.
• In contrast, children are encouraged to be independent and self-reliant from an earlier age than American children.
• Children of Haitian descent are socialized to be obedient, quiet, and subordinate to their parents.
• Education is valued and children are expected to be high achievers – high emphasis on grades.
• Lack of discipline and respect for authority are taboo.
• Discussion of sex is to be with parents or family only.
• Parents may not be accustomed to actively being involved in their child's school.
There are two prominent religions that people of Haitian descent practice; they can be practiced simultaneously.

• Christianity
  – Catholicism was the first Christian religion to be introduced to the people of Haiti; the religion of 80% of the population in Haiti.
  – Many people of Haitian descent in the U.S. are very active in their churches
  – Religion may help to maintain cultural identity
  – Many devout Christian Haitians will denounce Voodoo.
• Voodoo (also spelled Voudou, Vodoun, or Vodon)
  – The word Voodoo comes from an African word meaning spirit.
  – Religion specific to Haiti.
  – Voodoo has been cited as the national religion of Haiti; however, that is not the case
  – Voodoo does not have an organized hierarchy or a specific theology.
• In Voodoo, there is a belief in one central God called Bondye or Bon Dieu.
• Central tenet of Voodoo is healing people from sickness.
• The ministers of Voodoo include the houngan (priest) and the mambo (priestess).
Cultural Norms: The Expression of Grief

- When death is impending, the entire family is likely to gather, pray, cry, and use religious medallions or other spiritual artifacts.
- When a person dies, the entire extended family is affected. The oldest family member makes all the arrangements and notifies the family. The body is kept until the entire family can gather.
- Mourning practices include *veye*, *dernier priye*, and *prise de deuil*. *Veye* are preburial activities. *Dernier priye* is a 7 day home based ritual consisting of 7 days of prayer. This process is to help the soul pass into the next world. *Prise de deuil* takes place on the 7th day and is similar to a funeral.
Healthcare

• People of Haitian descent are often private and modest.
• Illnesses can be thought to have either natural or supernatural causes.
  – Natural illnesses are believed to be of short duration.
  – Supernatural illnesses are caused by God or the loas and usually appear suddenly, without any warning.
  – Natural illnesses can also be caused by sympathetic magic.
• Home remedies may be used first before seeking help.
Mental Health

• **Mental illness:** Mental illness may not be recognized in the Haitian culture and mental health services may not be sought.
  • Due to more prominent physical illnesses, unless mental illness causes a major social disruption, it may go unnoticed.
  • Mental illness can be believed to have supernatural causes such as a hex.
  • A person of Haitian descent, who is suffering from depression, may not admit to it, since it carries such a stigma in Haitian culture.
  • A person of Haitian descent who seeks care from a biomedical practitioner such as a psychiatrist may not think he was treated unless there was evidence that a physical exam was done.
References

Information adapted from a variety of resources:

1. http://www.trauma research natural disaster\Haitian Cultural Competence.mht


YOUR ROLE IN HELPING STUDENTS
Psychological First Aid

Steps:
• Listen
• Protect
• Connect
• Model
• Teach

Schreiber, M., Gurwitch, R., & Wong, M., 2006
Listen, Protect, and Connect-Model and Teach
Observe and note:

- Changes in behavior and/or mood
- Changes in school performance
- Changes in relationships with classmates and teachers
- Changes at school-based activities
- Changes that parents discuss with you
Psychological First Aid: Listen

Questions to ponder:

• What might be preventing a student from coming to school?
• What might be preventing a student from paying attention in class or doing homework?
• What might be preventing a student from returning to other school-based activities?
Psychological First Aid: Protect

- Answer questions simply and honestly using age-appropriate responses.
- Let students know that they are not alone.
- Provide students opportunities to express themselves (e.g. talk, draw, play).
- Talk to students about what is being done to keep them safe from harm.
- Watch for anything in the environment that may re-traumatize students.
Psychological First Aid: Protect

- Maintain classroom routines, activities and structure with clear expectations and consistent enforcement of rules.
- Limit student access to television and internet coverage of the incident or disaster.
- Find ways for your students to feel helpful in the classroom, school and community.
Psychological First Aid: Connect

- “Check in” with students on a regular basis.
- Find resources that can offer support to your students and classroom.
- Keep communication open with other caregivers; e.g., parents, siblings, other teachers, etc.
- Encourage student involvement in interactive school activities; e.g., sports, club meetings, student-community projects, etc.
- Empathize with students by temporarily postponing exams, and giving more time to learn new material.
Psychological First Aid: Model

- How you cope and behave after an event will influence how your students cope and behave. Your students will be watching you for verbal and non-verbal cues.
- Monitor conversations that students may hear.
- Acknowledge the difficulty of the situation, but emphasize that people can learn to cope with the worst of situations.
Psychological First Aid: Teach

- Explain that children and adults understand and react differently to critical incidents and disasters; some need more time than others to cope.
- Encourage students to identify and use positive coping strategies.
- Help your students to problem solve.
- Remind and reassure students that in time things will get better.
Helping Children After Disaster: Recommendations

- Meet and greet students
- Remain calm and reassuring
- Acknowledge and normalize feelings/reactions
- Emphasize children’s resiliency
- Refrain from discussing disturbing details related to the disaster with other staff members in the presence of students
Helping Children After Disaster: Recommendations

- Provide opportunities for children to share their concerns.
- Involve children in activities that allow them to make choices and resume a sense of control over their environment.
- Incorporate information about the disaster into related subject areas, as appropriate.
- Listen to and observe student behaviors.
- Be sensitive to the disruption that relocation may cause.
- Consider the developmental level and unique experiences of each child.
- Involve students in recovery-related activities/projects.
Helping Children After Disaster: Recommendations

• For displaced children, investigate resources to allow a return to activities they previously enjoyed.
• Talk to displaced children about how they would like to handle questions from new friends about their disaster experience.
• Displaced adolescents may want to reconnect with extracurricular activities (sports, dance, band, etc.).
• College bound students may have some special concerns following relocation.
• Maintain normalcy, routine, and stability.
Helping Children Cope with Loss, Death, and Grief

- Give the children an opportunity to tell their story.
- Understand that children deal with grief in their own unique way.
- Understand that grief is a process, not an event.
- Be honest with children, but avoid discussing any disturbing details.
- Encourage children to ask questions.
- Remember that grief work is hard.

National Association of School Psychologists, 2003
Helping Children Cope with Loss, Death, and Grief

• Be sensitive to diverse cultural and religious traditions regarding tragedy and loss.
• Offer necessary reassurance and support.
• Remember that the grieving child will need long-term support.
• Be aware of your own need to grieve.

National Association of School Psychologists, 2003
INFORM A SCHOOL COUNSELING PROFESSIONAL IF YOU OBSERVE ANY OF THE FOLLOWING BEHAVIORS
Trauma Reactions: Preschool-Age Children

- Re-enact experience
- Generalized fears
- Withdrawal
- Anxiety
- General behavioral problems
- Behavioral regression; thumb sucking, bedwetting
- Clinging to parents
- Sleep disturbances
- Loss of appetite
Trauma Reactions: Elementary-Age Children

- Extreme withdrawal
- Disaster-related fears
- Disruptive behavior
- Difficulty paying attention
- Outburst of anger
- Stomach aches
- Headaches
- Depression
- Anxiety
Trauma Reactions: Elementary-Age Children

- Emotional numbing
- Fears
  - Of dark
  - Of being left alone
  - Of being separated from family; school avoidance
  - That something bad will happen to family
  - That they caused some part of the disaster
  - Irritability and aggression
Trauma Reactions: Middle and High School Students

- Sleeping and eating disturbances
- Agitation
- Irritability
- Delinquency
- Physical complaints
- Poor concentration
- Depression
Look for Warning Signs…

How do I know if a student may need help?
What should I be looking for?

- Bizarre behavior (behavior does not match social context) – “over the top”
- Aggressive or violent behavior
- Threats of self-harm or threats against others
- Out of control behavior
- Risk taking behaviors
- Substance Use/Abuse
- Changes in personality or behavior
- Isolation
- Concerns regarding peer associations
- Drops in academic performance
- No longer engaging in previously loved activities
What should I be looking for?

- Changes in sleeping or eating habits
- Moodiness
- Crying Spells
- Self – Injury
- Hallucinations (seeing or hearing things that are not really there)
- Bizarre thoughts
- Paranoia
- Hopelessness
- Trust your instincts – err on getting help
Action Steps

- Immediately notify your counseling professional (TRUST Counselor, Guidance Counselor, School Social Worker, or School Psychologist)
- Err on the side of safety and communicate with the counseling professional and administrator if appropriate.
- Maintain adult supervision of the student at all times.
It is our goal to create a nurturing, safe, supportive learning environment for all students where they are expected to succeed and are provided with the resources to succeed. Our school and classroom can be an oasis to our students and families.

Positive Behavior Support Strategies
What type of support will our students benefit from?

- Directly teach students behavioral expectations and classroom procedures as you would any other lesson.
- Positively state rules – what do you want students to do? Instead of, “Don’t…”
- Model behavioral expectations
- Routine is essential in assisting vulnerable students lower anxiety.
- Be flexible with assignments have a backup. Difficulty concentrating is a symptom of anxiety and trauma.
- Create a safe, quiet space in the classroom. (Must keep supervision)
- Utilize stress management exercises with the whole class.
What type of support will our students benefit from?

- Set up classroom reinforcement for compliance to procedures, behavioral expectations, or rewarding any behavior that you would like repeated.
- When an infraction occurs, re-teach the expectation. The concept or instruction may not have been understood.
- Keep in mind behavioral infractions may be an indication of severe distress.
- If behavior is displayed and repeated, analyze the behavior pattern. (ABC)
- Analyze the potential function of the behavior and teach and reinforce a replacement behavior.
Classroom Strategies

- Planned Ignoring
- Proximity Control
- Signal Interference
- Removing Distracting Objects
- Peer Reinforcement
- Modeling
- Interest Boosting
- Humor
- Hurdle Help (Verbal clarification)
Classroom Strategies

- Restructuring
- Changing the Scheduled Activity
- Support from Routine
- Direct Appeal to Values
- Anti-septic Bouncing
- Problem-solving
- Differential Reinforcement
- Positive Correction
- Time-out from the Activity

Managing Surface Behavior of Children in School by Nicholas Long and Ruth G. Neuman
– JKM Training
Positive Correction

- Begin with a positive comment on previous behavior
- State nature of present problem
- Clearly state the expectation
- Ask student to repeat/affirm expectation
- Immediately recognize positive to the expectation
Six Guidelines for Avoiding and Defusing Behaviors

• Focus on the Behavior, **NOT** the Student
• Take Charge of Negative Emotions
• Avoid Escalating the Situation
• Discuss Misbehavior Later
• Allow Students to Save Face
• Model Non-aggressive Behaviors
De-escalation Skills

• Assume a Calm Demeanor
  – Your posture should be relaxed
  – Speak slowly
  – Make eye contact

• Listen
  – Listen actively
  – Pay attention to student’s verbal and non-verbal communication
De-escalation Skills (Con’t)

Do’s and Don’ts

Don’t lead with the rules
Don’t lead with the consequences
Don’t begin statements with the word, YOU

Do use positive expectations
Do use “I” statements
Do reflect the emotion you hear
Do use non-verbal affirmation
Do try to direct the student into a problem solving mode

JKM Training, Inc
De-escalation Skills (Con’t)

• Remain Alert and Beware of:
  – Escalating volume and sarcastic tones
  – Dilating pupils
  – Clenched fists and muscle constriction
  – Flushed appearance and angry looks
  – Crouched posture and the invasion of personal space
  – Rapid and deep breathing
Classroom Reward System Guidelines

- Keep it simple
- Reward frequently in the beginning
- Reward contingent on desired behavior
- Refrain from threatening the loss of rewards/taking earned items away as a strategy for motivating desired behaviors
- Students are ALWAYS eligible to earn rewards
- Keep ratios of reinforcement to correction high (4:1)
• All children will be welcomed regardless of age verification, transcripts, and address verification. Students will be issued a temporary ID to facilitate screening and testing while immunization is completed.

• Counseling professionals must link with the School Registrar so that they are notified of any new students and can appropriately screen and coordinate services.
Websites

- Websites for Teachers (about 650)
  www.sitesforteachers.com
- Classroom Management
  www.busyteacherscafe.com
- Behavior Management
  www.gigglepotz.com
- Daily Teaching Tips on Different Topics
  www.glencoe.com
Community Resources

FAMN Ayisen Nan Miyam, Inc
8322 NE 2nd Avenue Ste. 100
Miami, FL 33130
305-756-3310
www.fanm.org

Haitian Neighborhood Center, Inc. (Sant La)
5000 Biscayne Blvd. Ste 110
Miami, FL 33137
305-573-4871
www.santla.org

Haitian Organization for Women
1005 N. Krome Avenue #101-113
Homestead, FL 33030
www.haitianamericanwomen.org
Community Resources

Switchboard of Miami, Inc
24/7 Information and Referral and Crisis Counseling,
Available English, Spanish and Creole
305-358 HELP(4357)
www.switchboardmiami.org

Red Cross – Emergency Disaster Services
305-644-1200

Operation Helping Hands
For disaster volunteer and donation efforts
1-800-226-3320
Question and Answers
Questions?

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