

Debriefing Criticized TLC's Response

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For the past 20 years, TLC has always stated that any intervention used inappropriately is a dangerous intervention. Debriefing is no exception and in our direct experiences following major traumatic incidents like 9/11, Katrina and Rita, the shooting and killing of coach in front of students in Parkersburg, Iowa, the killing of a teacher in a school in Texas and so on, debriefing is often misused.

First, we make it very clear that debriefing must be voluntary. We must allow those who need to process their experience in their own way and in their own time frame to do so. Second, formal debriefing in schools must not occur until at least the third day following the incident. This gives people time to adjust. Furthermore, this formal debriefing is only for the most exposed. Those who were not direct witnesses must not be in the same group with those who were direct witnesses. Their experiences are quite different and the non-witnesses may be activated by the details provided by witnesses. Third, it must be made clear that feelings are not to be processed, only normalized. Many debriefers transition to a traditional clinical therapeutic approach and attempt to facilitate emotional elaboration, which is not the purpose of debriefing and increases potential risk. People's reactions and experiences need to be acknowledged and normalized and then their thoughts shifted to how they can manage the next several days and weeks.

As you also know, the TLC Debriefing Model does not propose formal debriefing initially. We begin with Classroom Presentations, the objectives of which are quite different from debriefing. We then recommend an end of day Operational Debriefing for all staff, not to process feelings but to identify what is working, not working, what concerns staff have regarding themselves or students and what is needed the following day to make it a bit easier for all. And, finally, we recommend that traditional crisis intervention be provided the first few days to meet the basic needs of students as they present those needs.

Debriefing, we have found, is an excellent intervention when used appropriately in a structured and timely manner. For example, the research clearly shows that survivors of physical injuries caused by a traumatic event are most concerned about their physical condition and what that means regarding adjustments, costs, time off work, etc. Emotional concerns are not a priority yet interveners want to rush in and debrief leaving survivors confused, frustrated and feeling as if they may not be normal because they have other priorities.

Giving people time and a choice as to how they will manage, providing basic crisis intervention and the simple, yet powerful, normalization of all they may experience through education is good trauma-informed care. Safety of the environment is paramount, as you know, as well as continuing with day-to-day routines. For example, not ignoring the crisis staff and students may be in, but giving them options to stay in class or be with friends and crisis team members.

We know that following critical incidents, some students and even staff will, in fact, experience a range of PTSD reactions six to eight weeks and beyond. This is when TLC recommends use of its school-based trauma interventions (evidence-based) like the *I Feel Better Now* program. It takes time to heal and

recover and the majority will recover when in a supportive, safe environment which offers them choices of help. We know many will do well. However, some will need more trauma-specific intervention after the initial crisis passes.

In essence, to assume that everyone needs debriefing immediately following exposure puts people at-risk of "over-intervention." To conduct mandatory debriefing is to ignore the needs of each individual and places people at-risk from exposure they would have otherwise avoided. To allow the processing of feelings to take place in debriefing turns debriefing into an at-risk therapeutic intervention at a time when people are most vulnerable and need to experience that they can manage their many emotions without having to "explore" them or elaborate on them. TLC's model of debriefing, when used as taught, accomplishes this.

Finally, just as any intervention can become an at-risk intervention when used inappropriately, there is no one intervention that fits every situation. This is why TLC's model proposes several interventions, debriefing being only one and not the primary intervention, but one that can be beneficial when initial interventions have not been helpful.

I hope this helps and please feel free to contact us anytime.

