

## **Trauma Debriefing: Structuring Larger Groups** **William Steele, MSW, PsyD and Tricia Trimble, MEd, LPC, CTS**

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At times, traumatic incidents occur that involve a large number of people who could benefit from debriefing in small groups of eight to ten participants, but situations only allow for meeting in larger numbers of twenty to thirty plus participants at one time. Obviously, the debriefing process must be adjusted to accommodate the larger numbers.

Trauma specialists may only be provided with one opportunity to meet with this large group. It is our belief that you cannot properly debrief more than eight people in a group setting, as it takes close to two hours for all participants to have the opportunity to tell their stories. Also, we do not encourage debriefing to go past two hours because of the risk of participants becoming overwhelmed and too exhausted to protect their emotional “self.” So, what can trauma specialists do?

The National Institute has learned over the past eleven years that some intervention is better than no intervention for trauma victims. We have, in the past, often been asked to debrief groups of twenty or more professionals. We will provide two examples and discuss how they were approached. One group (Group A) consisted of teachers, social workers, counselors, and administrators in a school setting combined with mental health professionals called in to assist school personnel. The other group (Group B) was made up of law enforcement personnel. Both situations involved a shooting death; the one of a student inside the school, the other of an officer in the community.

### **Most vs. Least Exposed**

When first called, we were informed that there were approximately twenty to thirty participants who wanted us to meet with them, including those who were at the scene during the traumatic incident and therefore, most exposed at the visual and the sensory level. Attempts to persuade (educate) the administrators to allow us to debrief no more than eight participants in multiple sessions, conducted simultaneously, failed. Efforts to initially meet with the most exposed separately, apart from the others also failed. This necessitated the “rescripting” of the debriefing process, especially the opening statements.

### **Structuring Opening Statements**

In the larger format, it is very important to immediately readjust expectations of the group as to what can be accomplished in a large group. It is also important to say that additional help may be needed because the group size prohibits you from addressing all the questions used in a formal debriefing.

After introducing yourselves to the group, briefly mention that experience has taught you that debriefing can be helpful and can accelerate the healing process. Follow this brief opening with the following structuring statements:

“Debriefing is usually conducted with no more than eight persons in a group to give each person an opportunity to tell their complete story, their thoughts, the ways the situation has impacted them. This is not possible with your group so we have selected just a few questions of the many we normally ask. Because this will be an abbreviated debriefing, some of you may want an additional session to give yourselves the opportunity to get relief from some of the issues we may not be able to address today.

“There are, as you know, those of you here today who were on the scene when \_\_\_\_\_ happened or there immediately after, and those who were there much later and therefore, not exposed to the same elements. Those of you who were there please feel free not to answer our questions. It is perfectly okay, especially in a large group like this. Not everyone will have a lot to say or much to say today, but listening to your colleagues and peers will be helpful to you.”

### **Order**

Group A (teachers, social workers, counselors, and administrators along with mental health professionals) was directed to raise their hands if they wished to respond to the question posed above. A final check was made before going on to the next question to see if anyone wished to add anything. A visual scan should be made from one end of the semi circle to the other end in order to make sure that all participants have acknowledged the questions. In Group B, the law enforcement group, those on the scene were asked to respond first followed by other participants in a sequential order that was then continued. Both methods worked well. Ms. Trimble, one of the debriefers of the law enforcement group, was familiar with the team members, but the only member not in law enforcement. Only three of the twenty some participants in Group A were familiar to Mr. Steele. Confidentiality and other ground rules were established at this point.

### **Gaining Credibility**

Ms. Trimble was introduced by an officer in Group B who was on the debriefing team. Because other team members had not previously conducted a debriefing, they asked Ms. Trimble to start the process. Knowing that law enforcement and other “first responders” often feel out of control and helpless, especially when one of their own has died, she took a few minutes to address how these reactions could leave them not wanting to talk. She also acknowledged that they might be cautious about what they did say, because this process was new to them and, because she herself was not in law enforcement. She then indicated that the process is generally very helpful, and that they would benefit in some way. Following this she thanked them for allowing her “in” to help.

Mr. Steele initiated similar comments with Group A and especially directed his attention to the concern that school personnel might have with responding in a group with non-school personnel. The same applied to non-school personnel. He invited participants to call him anytime should there be things they would like to talk or ask about following the debriefing.

Debriefers of both groups found that participants were appreciative of their honesty, sensitivity to these issues, and directness. Many reported afterward that they needed to hear these comments from the debriefers in order to feel comfortable with participating.

### **Questions**

Both group debriefings took place approximately one week after the incident, after the victim's funeral. Debriefers of both groups began by first asking who the participants were and their relationship to the victim. This gave each participant the opportunity to respond regardless of the nature of their exposure. "Where were you when it happened, or when you first found out, and what did you do?" was the next question. This led to participants identifying different details related to varied aspects of the events that followed that day and that week. The one question not asked in both groups was, "What do you remember seeing and hearing?" There was concern that if those who were witnesses went into too much detail as to what they saw (the sensory), that it might make it more difficult for the non-witnesses to process their existing reactions.

The next question asked was, "What one thought stands out the most for you since this happened?" In both cases participants talked about their own reactions to different parts of all that happened. The issues of "should haves" or "I could haves" at the funeral and, even having to be in the group, were some of the issues that emerged. These questions, in both situations, set the stage for those who were initially reluctant to participate (reported by participants before leaving). It made it far easier for them to respond later.

When asked, "What was the worst part?" both group participants identified events following the incident such as the funeral, the media issues, community members, parent reactions; specific factors reminding them of what happened and difficulties they experienced in trying to help the most exposed. Personal reactions as well as system issues were discussed.

When asked, "Of all the thoughts or reactions you had, what one reaction or thought surprised you the most?" participants detailed more personal reactions, e.g. disbelief, denial, not being able to think clearly, being numb, confused, moving in slow motion, freezing, and not able to perform simple tasks such as dialing frequently called phone numbers. In the law enforcement group (Group B), those who apprehended the killer of the officer some seven hours later talked about being surprised at their being able to properly treat the killer. In Group A, several talked about how difficult it was for them to get past the disbelief that this young child had actually shot and killed a classmate, even though they were looking at the girl's body on the floor. This question allowed some of the participants who had said little to identify their personal reactions.

In Group A, the next question of “Where are you experiencing this the most in your body?” further helped to build a “shared connectedness” among participants, as each could easily relate their physical response to all that happened; many had similar reactions. Those unable to identify earlier reactions could relate to the physical reactions they were experiencing, which helped develop that “connectedness” with other members. The result was the same in the law enforcement group.

### **Time**

Group A was completed in two hours while Group B ran an hour and a half. After a break, officers at the scene and the dispatchers returned for additional debriefing of the details and personal reactions which they did not wish to talk about in the larger group. This was very beneficial for those most exposed individuals. The most exposed members in the education group did not want to return. The offer was again made one week later with no reply. This was unfortunate, as we have found that, among the most exposed, many do need the smaller, more personal and thorough debriefing.

### **Summary**

Two different groups using the same approach shared similar reactions, but also unique reactions. The law enforcement group was more a “family” than the education group which was comprised of different school district team members, county team members, and school personnel. Those most exposed in the law enforcement group were more open to additional debriefing; this was not the case with the education group members. The law enforcement group was one operating system, whereas, the education group were multiple systems which may have been more effectively helped if allowed to debrief separately. Despite the issues that prohibited a formal debriefing, the majority of members from both groups did express that the process was helpful.

Situations will continue that will not allow a formal debriefing to be conducted; yet some education and processing for survivors is still very helpful. Even though each situation will be unique structure remains important. The fact that debriefers went into each of these situations with predetermined questions and a structured opening was calming for the participants as well as the debriefers.

Ms. Trimble wrote after her debriefing, “It would have been a disaster had we not altered the ‘debriefing’ format and predetermined the questions we were going to ask. In order to minimize their anxiety and enhance my credibility with these officers, I was introduced by an officer who had worked with me in previous debriefings and acknowledged that my brother, a State Trooper, was one of the team members. I felt that it was critical, in my opening statements, to assure the participants that this was a structured and controlled procedure. The positive feedback we received following the session reinforced the vital importance of the debriefing.

“I continue to be amazed at how this process helps the participants relax and ‘give in’ to the grief and trauma. As they tell their stories, you can see the body language change as the process takes over. The healing has begun. What a rewarding feeling.”