



### Three DoDEA Nurses Create Plan for Helping Stressed Students

When adults are under stress they can describe their experience and ask for help. Children are different. They often lack the self-awareness required to articulate their experiences. Children in military families experience unique stressors but face the same difficulty in understanding how to express their needs to others. Students who are feeling frazzled often complain of physical ailments such as stomach aches and headaches. This means that in a school setting, school nurses are the first responders when it comes to supporting the needs of children under stress. Three DoDEA school nurses recently began working on a protocol that they hope will one day provide clear guidelines to help school nurses identify and support these children.

Team leader, Sandy Leipheimer of AFNORTH Elementary School, Cynthia Less of Spangdahlem Elementary, and Robin Harvel, formerly of Aukamm Elementary, teamed up in 2013 to begin working on a nursing module entitled “Building Resilience in Students Living in Military Families.” This intervention module has two goals. It will enable nurses to identify children who come to the school health office showing signs of distress. It will also offer evidence-based interventions nurses can use to support those children within the setting of the school health office.

Last spring the trio were among a handful of applicants awarded a prestigious fellowship with the Johnson and Johnson School Health Leadership Program held annually in association with Rutgers University. Along with the other participants, the nurses learned how to be more effective health advocates and leaders by participating in seminars on leadership, project management, and community health principles to promote change.

The fellowship began with a six-day intensive training held June 21-27, 2013 in Brunswick, New Jersey. Between workshops and meetings with renowned public health leaders, the DoDEA school nurses began outlining their Enduring Change Plan. This was a valuable opportunity because the nurses are geographically dispersed and finding time to work on the project has been a challenge.

“We still have a long way to go,” explained Leipheimer. “But our team feels confident that working together and with other school nurses, we can make a meaningful difference for those students who need support in adapting to the unique life challenges that come from living life as a military child.” ■



*DoDEA School Nurses (left to right) Robin Harvel, Sandy Leipheimer, and Cynthia Less.*

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## A Dangerous Game Goes “Viral”

Adolescents in the United States are playing a dangerous game. It involves restricting the flow of blood to the brain by choking themselves. Most commonly referred to as “the Choking Game,” the activity is not a new phenomenon. When asked, many adults claim to have played the game in childhood, know someone who played the game, or have heard of this deadly behavior. Now, thanks to the popularity of video sharing on the Internet, more teenagers than ever before are exposed to, and playing, the Choking Game.

Previously, teens learned about the Choking Game through word of mouth, for example, at a slumber party. Today, the Internet has increased the rate at which concepts and ideas are spread through young communities or “go viral.” Online videos depicting laughing children playing the Choking Game are now available at the click of a button or the tap of a finger.



Comprehensive data on the number of children who engage in this behavior, or have died as a result, is not available. However, an estimated 30,000 “how to” videos are uploaded onto video sharing Web sites every year. In these videos, children teach viewers how

to choke themselves. For example, in one video two siblings demonstrate how to choke one another. That particular video had been viewed 66,175 times in just over a year. Viewer comments include: “I did it! It worked!”

The Choking Game can lead to brain damage and death. Students have also injured themselves during loss of consciousness. Many students admit they did not realize that the so-called game could harm them. Often,

alerting youth to the dangers of the Choking Game is all it takes to put a stop to it.

Warning signs include both physical symptoms and behavior indicators. Physical signs include marks on the neck from ligatures, or high necked clothing or scarves worn to conceal these marks. The repeated interruption to the oxygen supply can also cause “black eyes” or broken blood vessels beneath the eyes, blood shot eyes, and pin pricks of red in the iris. Other physical evidence might include belts, knotted ropes, or leashes lying around students’ rooms, tied to the closet rack, or in a book bag.

Behavioral warning signs include students spending time alone in their rooms and referring to the game by slang terms including: space monkey, fainting game, and tap out. For more information on the Choking Game, contact [safeschools@csc.com](mailto:safeschools@csc.com). ■

## Teen Dating Violence: New Data

According to a recent report based on data collected by the U.S. Centers for Disease Control and Prevention, four in ten U.S. teens have experienced dating violence. This was defined as “physical, sexual or psychological/emotional violence within a dating relationship.”

In an effort to stem this disturbing trend, the National Center on Safe Supportive Learning Environments recently released a training module to help school administrators identify and respond appropriately to signs of teen dating abuse. To learn about the “Get Smart, Get Help, Get Safe” module, go to <http://safesupportivelearning.ed.gov/get-smart-get-help-get-safe-teenage-dating-abuse-training-specialized-instructional-support>. For information on teen dating violence, visit the Department of Education at [www.ed.gov/about/offices/list/oese/oshs/news.html](http://www.ed.gov/about/offices/list/oese/oshs/news.html). Scroll down to the “Fact Sheets” heading, select the Teen Dating Violence Fact Sheet (Word doc). ■

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## Three Security Crisis Management Preparedness Priorities

Administrators considering where to emphasize their crisis management planning efforts can start by coordinating with their District Safety and Security Officer and Area Security Manager to learn the priorities they want to emphasize. As Pacific Security Manager David Edenfield explained on a recent crisis management conference call, it is important to understand and to practice the crisis management plans that schools already have in place. Additionally, it is important to coordinate the response with the installation so school personnel, emergency responders, and installation officials know what to expect.



*David Edenfield,  
Area Security  
Manager, DoDDS-  
Pacific.*

DoDDS-Europe Area Security Manager Bill Heiges also recently summarized three priorities that guide his Crisis Management Preparedness efforts in protecting DoDEA students and staff members in the European Area:

- 1) Ensuring we have the means to communicate the threat. That includes:
  - ▶ Ensuring the technical mechanisms work: Public Address system, e-mail and phone notifications, indoor and outdoor audio systems such as “big voice” and “little voice.”
  - ▶ Practicing response procedures so that everyone, including administrators, teachers, and staff members, knows how to effectively warn others about a threat.
- 2) Understanding what to do in response to a threat.
  - ▶ Ensuring response procedures are practiced, and coordinated with local responders.
  - ▶ Rehearsing plans so that school staff members feel proficient in their duties.
- 3) Ensuring we know how to help the students, school staff members, and families of military personnel recover from an incident psychologically and emotionally.



*Bill Heiges, Area  
Security Manager,  
DoDDS-Europe.*

Mr. Heiges concluded that the mental health component is a critical piece of crisis management and response planning. “We can work on physical security measures to prevent intruders outside the school from getting to our students,” he noted. “But we depend on the school psychologists, counselors, and mental health professionals to help us identify and support students who are already inside, but need help and reassurance.” ■

## How to Respond to a Death in the School Community

Most school districts throughout the United States encounter at least one death of a student, staff member, or parent/sponsor sometime during the school year. In many cases, mental health professionals wind up implementing their procedures for notifying each other, coordinating notification to the school, and monitoring students and staff members impacted by the news to identify who might need additional support. Ideally, the entire crisis management team should be aware of the procedures for responding to the death of a student or staff member.

DoDEA offers a wealth of resources available to assist crisis management teams in responding to death, many of which were originally developed by DoDEA professionals. The DoDEA Crisis Management Guide and other resources can be found on the DoDEA website at [www.dodea.edu/crisis/cmteams.cfm](http://www.dodea.edu/crisis/cmteams.cfm). ■

## Teenagers with Autism: Frequent Targets of Bullying

Many people think of bullying as a middle school problem. New research confirms, however, what educators and parents of special needs children have long known. When it comes to social aggression, students with autism spectrum disorder (ASD) are frequently the targets of bullies and the bullying often continues well into high school.

The study, published in the November 2012 issue of the *Archives of Pediatric and Adolescent Medicine*, found that 46 percent of adolescents with ASD had been bullied at school. This is more than double the rate of bullying (20 percent) experienced by high school students nationwide, according to the Centers for Disease Control and Prevention. By surveying parents and educators of adolescents with ASD, researchers found that the most likely targets of bullying were students with ASD who were sufficiently high-functioning to participate in mainstream educational programs, had lower social or conversational skills than their peers, and had what is known as a co-morbid condition, specifically Attention Deficit Hyperactivity Disorder (ADHD).

### Why This Is Happening

According to the National Institutes of Health, the hallmark of ASD is impaired social interaction. Experts suspect that children with ASD are more frequently bullied because they have difficulty understanding social cues. Teenagers are often less tolerant of differences in peers. In complex social situations, such as a noisy lunch room, the behaviors exhibited by students with autism (rocking, hand flapping, humming) can make them easy targets for bullies.

In addition, students with ASD frequently have fewer friends than their non-autistic peers. Friendship is a well known insulating factor against bullying. Even one friend can make a difference for a child who is being bullied. Another contributing factor may have to do with communication skills. Students with autism and ADHD may find it challenging to respond to bullying in an appropriate fashion. Many parents in the study reported that their children had been disciplined for “blowing up” or fighting back against bullies.

### What Can Be Done

Bullying of autistic children results in real harm. Seventy percent of autistic children who were bullied experienced emotional trauma. Many experienced a decrease in grades and academic success after being bullied. Most schools are working hard to prevent bullying by teaching tolerance and compassion. Experts recommend that educators also work individually with adolescents with ASD to help them develop the conversational and social skills that can enhance their abilities to make friends and deflect unwanted attention from bullies. Some children with autism do not even recognize when they are being bullied.

Most bullying prevention programs give students the tools and language to identify and respond to bullying. Because communication is a challenge for people with ASD, these students may benefit from additional reminders from caring adults about how to respond to bullies and whom to tell when they observe or experience bullying at school. ■



### Teen Autism by the Numbers:

- ◆ Number of Americans living with an autism spectrum disorder: 1 to 1.5 million.
- ◆ Number of U.S. military dependents living with autism: 8,500.
- ◆ Nationally, 20 percent of all high school students are bullied; among students with autism, this percentage increases to 46 percent.
- ◆ National percentage of students with autism who finish high school: 56 percent.

## Federal Government Opens App Store

In the words of the USA.gov website, another effort to make government “easy, convenient, and accessible” comes in the form of an application store ([www.usa.gov/Mobile/AppsGallery/FAQs.shtml](http://www.usa.gov/Mobile/AppsGallery/FAQs.shtml)). The new app gallery provides hundreds of free apps made by various U.S. government agencies. For example, “Smart Traveler,” designed by the Department of State, allows users to access official country information, travel alerts, travel warnings, and U.S. embassy locations. App users can also create personal travel itineraries on mobile devices. The Department of Veterans Affairs released “PTSD Coach” on the gallery website, an app which provides education, information about professional care, a self-assessment, and more tools “that can help users manage the stresses of daily life with PTSD.” The majority of the applications are “Web-friendly” which means they can be accessed from any brand of mobile device. To view and download any of these useful apps or for further information, visit <http://apps.usa.gov>. ■



## Three Cybersecurity Tips for Holiday Travel

Over the holiday season, thousands of travelers will use online technology to book travel itineraries, navigate foreign cities, and print electronic boarding passes, while staying connected to friends and family back home. For even the most seasoned of travelers, however, a few moments spent reviewing the following three cybersecurity travel tips could pay huge dividends while on the road:

### 1. Check Travel Warnings

It is always advisable to review standard travel safety tips and information at [www.travel.state.gov/](http://www.travel.state.gov/) or using the “Smart Traveler” app mentioned above, before departure and during the journey. Every traveler should take a moment to learn about potential threats at their travel destination by conducting an Internet search on relevant topics. Some of these may have only recently caught the attention of the media and government authorities so it is worth looking at a variety of sources.

### 2. Be Careful of Public Wi-Fi

Most people think twice before connecting to public Wi-Fi hotspots in hotels or airports, but during times of stress and transition, such as trying to make a flight connection, it is easy to deprioritize cybersecurity. Non-secure public networks may provide hackers and identity thieves access to sensitive personal data. As a general rule, device users should only connect to networks that require a password or login credentials. If possible, check the access agreement to see whether the network being accessed encrypts transmitted data. Encrypted files make it more difficult for identity thieves to steal important information.



### 3. Recharge Carefully

More recently, mobile device users on the go may have noticed new public charging stations appearing in malls, airports, and city sidewalks. While these mobile device oases are convenient, charging stations need to be viewed with a wary eye. Security experts have reported that hackers can take control of mobile devices through these chargers. Just as they do over public wireless networks, identity thieves would be able to download banking information and other personal data in less than one minute.

Remember, it is difficult to ensure 100 percent cybersecurity when online. Threats to cybersecurity evolve just as quickly as advancements in technology, so it is important to stay updated on new trends and dangers. ■

## “Molly” is Not Your Friend

Short for “molecule,” Molly is the street name for the powder or crystal form of MDMA, the chemical used in the illegal synthetic drug Ecstasy. According to several prominent media outlets, the drug is gaining popularity at clubs and music festivals. Many users are under the mistaken impression that because this drug is in powder form, it is not dangerous. Nothing could be further from the truth; The Drug Enforcement Agency (DEA) classifies Molly as an addictive drug that has no pharmaceutical value. In fact, this drug has been associated with at least four U.S. deaths in recent months.

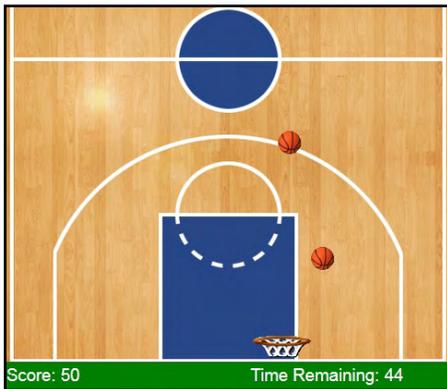
Emergency department physicians across the country have reported an increase in visits from young people suffering from the common side effects of Molly. These include teeth grinding, dehydration, anxiety, insomnia, loss of appetite, and fever. According to the DEA, taking Molly can also lead to seizures, increases in blood pressure, and prolonged changes in mood.



Educators who hear of students discussing Molly should take the discussions seriously. For more information on how to talk with teens about drug use, go to [www.teens.drugabuse.gov/drug-facts/mdma-ecstasy-or-molly](http://www.teens.drugabuse.gov/drug-facts/mdma-ecstasy-or-molly). ■

## Got Stress? Try “Moving Forward”

When faced with challenges, human beings typically react in one of three possible ways. They avoid problems, they respond impulsively in an effort to “just do something,” or they think carefully about the problem and find ways to solve it strategically. Teaching military families this final approach is at the heart of “Moving Forward,” a new interactive online educational and life coaching program developed by the Department of Defense (DoD) and Department of Veterans Affairs, that is available from the DoD National Center for Telehealth and Technology.



*The program uses tools and games to show users how the brain operates under stress.*

Life coaching uses a variety of tools and techniques from other disciplines including sociology, psychology, positive adult development, and career counseling. The goal of life coaching is to help people identify and achieve their personal and professional goals. Unfortunately, the cost of life coaching can be prohibitive for many people who would otherwise benefit from learning new approaches to problem solving and stress reduction. Moving Forward offers military personnel and their families an opportunity to experience the potential benefits of life coaching at no cost and in the privacy of their own homes. Individuals can take part in the program anonymously.

This program teaches users to combine a positive attitude with strategic thinking, something the program refers to as “planful” problem solving. Planful problem solving involves learning four tasks: 1) screen out unrealistic options, 2) list proposed solutions, 3) weigh the pros and cons, and 4) develop an action plan based on one of the solutions. The program also devotes a significant portion of time to helping users recognize how stress affects problem solving. Later program components teach specific skills such as goal setting. One module lays the groundwork for a thoughtful problem solving approach by teaching individuals how to manage and avoid the “brain overload” that can accompany too much multi-tasking and rumination about problems.

The Moving Forward program also contains a message that many self-help materials omit: some problems simply cannot be solved. Military family members learn to identify which problems can realistically be solved, and which problems require an individual to adapt his or her way of thinking about the problem, or seek professional help. To learn more about Moving Forward, go to [www.startmovingforward.org](http://www.startmovingforward.org). ■