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Zukeran Toucans “Soar” during Successful Evacuation

While most DoDEA schools practice drills and exercises in October, students at Zukeran Elementary School, in Okinawa, had an additional opportunity to fine-tune their evacuation techniques last fall. According to Principal Cindy Templeton, two teachers arrived one morning to find graffiti on the school, a rare occurrence for a DoDEA school. Military Police were called to investigate. While the MPs were reviewing the scene, they noticed two mysterious gas canisters sitting on the roof. “We suspected they had been left by a maintenance worker,” Ms. Templeton explained, “but we still needed to evacuate the school.”

Within minutes, the entire student body was lined up at the evacuation location and the staff had accounted for all students. Because it was a warm day in sub-tropical Okinawa, the school administrative team decided to move the students to an alternate indoor evacuation site to ensure investigators had ample time to search the school. “We gave the order and students and staff moved calmly over a bridge and across base,” Ms. Templeton explained. First responders arrived and military dogs were used to search the building. She added, “The whole process took two hours.”

Administrators maintained communication with one another using two-way radios and the school liaison officer kept worried parents updated through official base social media. When Ms. Templeton finally received the all-clear from the MPs, the students returned to school and an e-mail notification was sent to parents. “Our parents appreciated that because, of course, everyone knew that something was happening,” Ms. Templeton added, “it’s hard to miss 500 students strolling across the base.”

Despite the disruption to the school day, Templeton noted that student safety is worth the extra effort and that the overall experience was positive. As the crisis management team reviewed the incident response for lessons learned, they recognized that several things went well: for example, they had excellent communication with emergency responders and teachers moved students in an exemplary manner.

The team also identified ways to enhance preparedness. For example, the school has now created additional maps and master keys for responders. “This was a great example of why we do drills and exercises,” noted Templeton. “Even though it turned out to be air conditioning coolant left by maintenance workers, everyone saw the need to leave promptly. The safety and well-being of our students always comes first.”
Suicide in Young Children: Know the Risk Factors

When people think of youth suicide, they usually think of high school and middle school students. Suicide in the elementary years is less commonly discussed, but a new study conducted at the University of Washington found that a significant proportion of teens who attempt suicide in high school had already made a previous attempt during the middle school years, and some teenagers in that study said they had actually attempted suicide during elementary school.

For most caring adults, it is unthinkable that any child could wish to take his or her own life. In fact, many psychologists have previously argued that self-inflicted deaths prior to puberty are in fact accidental deaths because children of that age cannot yet grasp the permanence of death. New research seems to prove otherwise. According to data available from the Centers for Disease Control and Prevention (CDC) 68 children under the age of 12 took their own lives. Five of those children were nine years old.

Researchers at the University of Ohio conducted a meta-study in which they examined child suicides over thirty years. According to the findings, the following risk factors, when linked to suicidal ideation or talk of self harm, should prompt further screening no matter how young the child:

- Presence of psychiatric disorders and psychopathology.
- Preoccupation with death.
- Family history of psychopathology and suicidal behavior.
- “Environmental/contextual and demographic factors” (abuse and neglect were common among the children in the study).

Gender was also found to be a risk factor in the study. Previously, boys were far more likely to harm themselves than girls; however, that is no longer the case. In 2007, the CDC reported that suicide rates among 10 to 14 year old girls rose sharply in recent years.

While pre-pubescent suicide is still extremely rare, elementary school counselors and administrators should be mindful of the issue. The Office of the Secretary of Defense distributed the evidence-based suicide prevention program Signs of Suicide (SOS) to all DoDEA middle and high schools. For further information, or to request a copy of the program, contact your Area Pupil Personnel Services Specialist or safeschools@csc.com.

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Applying NIMS/ICS Principles to Crisis Management in Schools

Although Department of Defense Instruction (DoDI) 6055.17 requires all Defense Agencies to adopt the National Incident Management System/Incident Command System (NIMS/ICS), it is sometimes tough to understand how to implement NIMS practices, particularly in OCONUS installations where host nation agencies provide emergency response services. Fortunately, other organizations have already struggled with similar issues. Understanding some basic vocabulary and the foundational concepts allows members of school crisis management teams to begin internal planning and enhance coordination with emergency responders.

The NIMS and ICS concepts are based on sound management principles that can be applied in any crisis situation. Following is a brief overview of six NIMS concepts applicable to schools:

**Common Terminology** – NIMS uses common terminology to ensure individuals from different backgrounds can understand each other when coordinating response procedures. Typical terms cover individual roles and organizational functions (who will do what, to whom), resource descriptions (how to refer to personnel, equipment, and locations), and incident facilities (designated areas such as “command post” or “staging area”).

**Modular Organization** – The secret to the widespread applicability of the ICS is the flexible, modular command system. Responders do not need to establish an elaborate organization for a minor incident, but by using a modular organization, the Incident Commander can rapidly expand the effort as the complexity of the incident grows.

**Managing by Objectives** – Most educators are already adept at establishing Specific, Measurable, Actionable, Realistic, and Time-bound (SMART) objectives. The NIMS principle of managing by objectives emphasizes the need to establish priorities for the upcoming time period and develop strategies to accomplish the most important actions during a crisis, rather than attempting to do everything.

**Manageable Span of Control** – Decades of studying the aftermath of crisis incidents convinced FEMA that communication and supervision during critical incidents works best if no more than three to seven individuals report to each supervisor, with five considered the optimal number.

**Chain of Command and Unity of Command** – Unity of Command typically means one individual has responsibility for the incident management and each individual reports to one supervisor at the scene of the incident. Information and directions flow down, and responsibility reports up, via the Chain of Command, a term with which all military personnel are intimately familiar.

**Unified Command** – Unified Command maintains the decision making ability of one Incident Commander from the agency with lead responsibility for an incident, yet ensures the Incident Commander has ready access to liaison officers from each of the multiple agencies involved in the incident. In a unified command approach, the Incident Commander would request that a school representative, usually the principal or an assistant principal, come to the Command Post to advise them on school procedures and physical systems. In other words, Unity of Command means “one person in charge,” but Unified Command means “coordinated decision making.”

Familiarization with NIMS concepts provides a starting point for enhancing internal response procedures and coordination with emergency responders. For additional information on NIMS/ICS visit FEMA at www.fema.gov/emergency/nims/ICSpopup.htm. FEMA also offers information about NIMS/ICS, including course modules that can be completed online, at www.fema.gov/emergency/nims/NIMSTrainingCourses.shtm.
Helping Adolescents Adjust to Deployment

DoDEA educators understand the challenges military families confront as they adjust to the deployment of a family member. Recent research conducted for the Department of Defense Quality of Life Office identified strategies for helping adolescents and their parents adjust to all three phases of deployment.

During a presentation to the Military Family Relations Institute, Angela Huebner, Ph.D., from Virginia Polytechnic Institute and State University (Virginia Tech), summarized a series of studies she conducted over the past decade with her colleague, Jay Mancini, Ph.D., from the University of Georgia. The research used surveys, focus groups, qualitative analysis, and rigorous quantitative analysis to identify trends in youth attitudes toward their parent’s deployment. The students surveyed included teens with parents in all branches of the military services, including: Active Duty, National Guard, and Reserve units. Dr. Huebner identified strategies that school administrators, mental health care providers, and installation officials could use that concentrated on supporting the parent/sponsor who remains home, as well as students impacted by deployment.

Pre-Deployment Phase/Preparation

Prior to departure, encourage the deploying parent to take time to explain to the teen the reason for the deployment and why the parent has to leave. Parents can allocate time (often training requirements and mandatory paperwork make the weeks leading up to deployment hectic) and mental health providers can suggest developmentally appropriate language to use in the family conversation. Many teens admitted they had trouble saying good bye. As one teen put it, “I couldn’t show any emotion . . . because I had to be the strong one. I was hiding my emotions.”

During Deployment/Separation

With today’s ever present technology and enhanced means of communication, it is still important to remember the military service member’s need to focus on the mission. Learn to rely on yourself. Empower teens to pitch in at home. For example, teens can use the months to develop age-appropriate skills so that they can help with household responsibilities. Based on her interviews with teens, Dr. Huebner recommends adolescents learn how to cook, work on cars, help with budgeting, or care for the lawn.

Post Deployment/Reintegration

Dr. Huebner acknowledged that following the normally happy homecomings, many families experience conflict as they readjust to new roles. After a separation, families undergo a period of reintegration that involves adjusting expectations about family roles, behavior, and boundaries. Returning service members should be prepared for a period of rebalancing as families adapt to a new household routine.

Dr. Huebner explained that the military offers numerous support programs for youth and family members, “but sometimes, teens just don’t want to take advantage of them.” The strategies above were developed to be simple so school administrators, care givers, and installation officials could share them with families through multiple communication opportunities. For additional information on talking to teens about deployment visit the National Military Family Association at www.militaryfamily.org/get-info/deployment/preparing-and-managing/talking-to-kids.html – scroll down to “Tips During Deployment for Teens.”

Seven year old proudly displays a picture of his father who is deployed to Afghanistan.

Photo courtesy U.S. Army
Critical Thinking Skills Help Students Make Informed Choices Online

A recent survey conducted by the Kaiser Family Foundation measuring children’s daily media exposure found that students ages eight to 18 spend an average of seven hours and thirty-eight minutes per day watching television programs and movies, listening to music, playing video games, and surfing the Internet. The study, *Generation M²: Media in the Lives of 8- to 18-Year-Olds*, found that about a third of the time, students were engaging in a number of these activities simultaneously, for example, surfing the Internet while watching a movie.

When each activity was measured separately, the amount of media exposure per student rose to ten hours and forty-five minutes per day. During this time, students are exposed to hundreds of advertisements for commercial products and receive countless messages about values, food, clothing, peers, gender roles, violence, and sex. The information they see affects the choices they make, some of which can have harmful health consequences. Teaching students critical thinking skills helps them sift through the content they are exposed to online and make informed decisions for their health and well-being.

The Substance Abuse and Mental Health Services Administration (SAMHSA) recently evaluated a pair of related media literacy programs, Media Ready and Media Detective. Both received a rating of “effective” in increasing students’ awareness of how advertisements work, and in reducing students’ intention to use alcohol and tobacco products. Several studies have linked exposure to alcohol advertising and product placement in films to teenage alcohol consumption.

Media Ready is a media literacy program for middle school students, while Media Detective teaches third through fifth graders online critical thinking and analysis skills. Both are designed to prevent or delay the onset of underage tobacco and alcohol use by enhancing the ability of children to decode media messages. For example, students learn to identify faulty logic, a skill which has long been taught in composition classes, but is rarely addressed in online learning.

While critical thinking skills are difficult to measure, the program assessments found that students who participated in the programs were better able to deconstruct the messages behind alcohol and tobacco advertising afterwards. For more information about Media Ready and Media Detective, visit SAMHSA’s National Registry of Evidence-based Programs and Practices at [http://nrepp.samhsa.gov/ViewIntervention.aspx?id=183](http://nrepp.samhsa.gov/ViewIntervention.aspx?id=183).

Setting Limits Can Make A Difference

The Kaiser Family Foundation studied changing trends in youth attitudes toward media and published their findings in the *Generation M²* study. *Generation M²* revealed that parental expectations had an impact on how much time students spend with media content. Only about one third of students reported that their parents or guardians set limits on their daily amount of “screen time.”

Not surprisingly, the students with the least parental intervention were the heaviest media consumers. Some of these students reported sixteen hours per day of media time. These students also tended to have the lowest grades of the 2,000 students surveyed. Children of parents who set limits on media time, for example, by limiting internet access after bed time, or turning off the television during meals, tended to perform better academically. To learn more about how students behave online, contact safeschools@csc.com.
Healthy Dating Establishes Life Long Patterns of Respect

Adolescence is rarely easy, but relationship violence complicates the already challenging process of learning how to interact appropriately with peers and partners. Fortunately, some evidence-based prevention programs are available to help students identify healthy relationships and understand that violence in a relationship is not acceptable.

The Centers for Disease Control and Prevention (CDC) found that 9.8 percent of youth reported being hit, slapped, or “physically hurt on purpose” by their boyfriend or girlfriend in the 12 months prior to the 2009 Youth Risk Behavior Survey (YRBS). The CDC also reported that teens suffering from relationship violence were more likely to perform poorly in school, participate in binge drinking, become involved in physical fights, or attempt suicide.

In addition to physical violence, dating violence includes shaming, emotional bullying such as name calling, purposely embarrassing a partner, or intentional isolation from friends or family. It can also include pressure to participate in unwanted intimacy. Both males and females can fall victim to dating violence. Studies indicate that people who harm dating partners are more aggressive and more depressed than their peers. Other factors that signal potential abusers include trauma symptoms, alcohol use, having a friend involved in dating violence, or believing that dating violence is acceptable.

Fortunately the solution begins with helping students recognize violent behavior and teaching all students that violence in a relationship is unacceptable. For additional information on Teen Dating Violence, visit the CDC at www.cdc.gov/ViolencePrevention/intimatepartnerviolence/teen_dating_violence.html. For information regarding evidence based prevention programs, contact DatingMatters@cdc.gov.

National Children’s Mental Health Awareness Day: May 9, 2012

According to the Substance Abuse and Mental Health Services Administration (SAMSHA), 26 percent of children in America are exposed to or experience a traumatic event before the age of four. This can include loss of a loved one, having a life threatening injury, or witnessing violence. SAMSHA is holding a child mental health observance on May 9 to raise awareness of the impact of exposure to trauma on children’s behavior, academic achievement, and overall mental well-being.

Research has shown that children who receive mental health support after a traumatic event have improved behavior, reduced suicidal thoughts and suicide attempts, and improvement in post-traumatic stress disorder symptoms. SAMSHA offers a wealth of materials on its Web site describing how schools and community organizations can partner with hospitals and mental health service providers to raise awareness of children’s mental health and emphasize the importance of helping children who have experienced traumatic events. To download event materials, a related tip sheet, or to learn more about National Children’s Mental Health Awareness Day, visit www.samhsa.gov/children/national.asp.