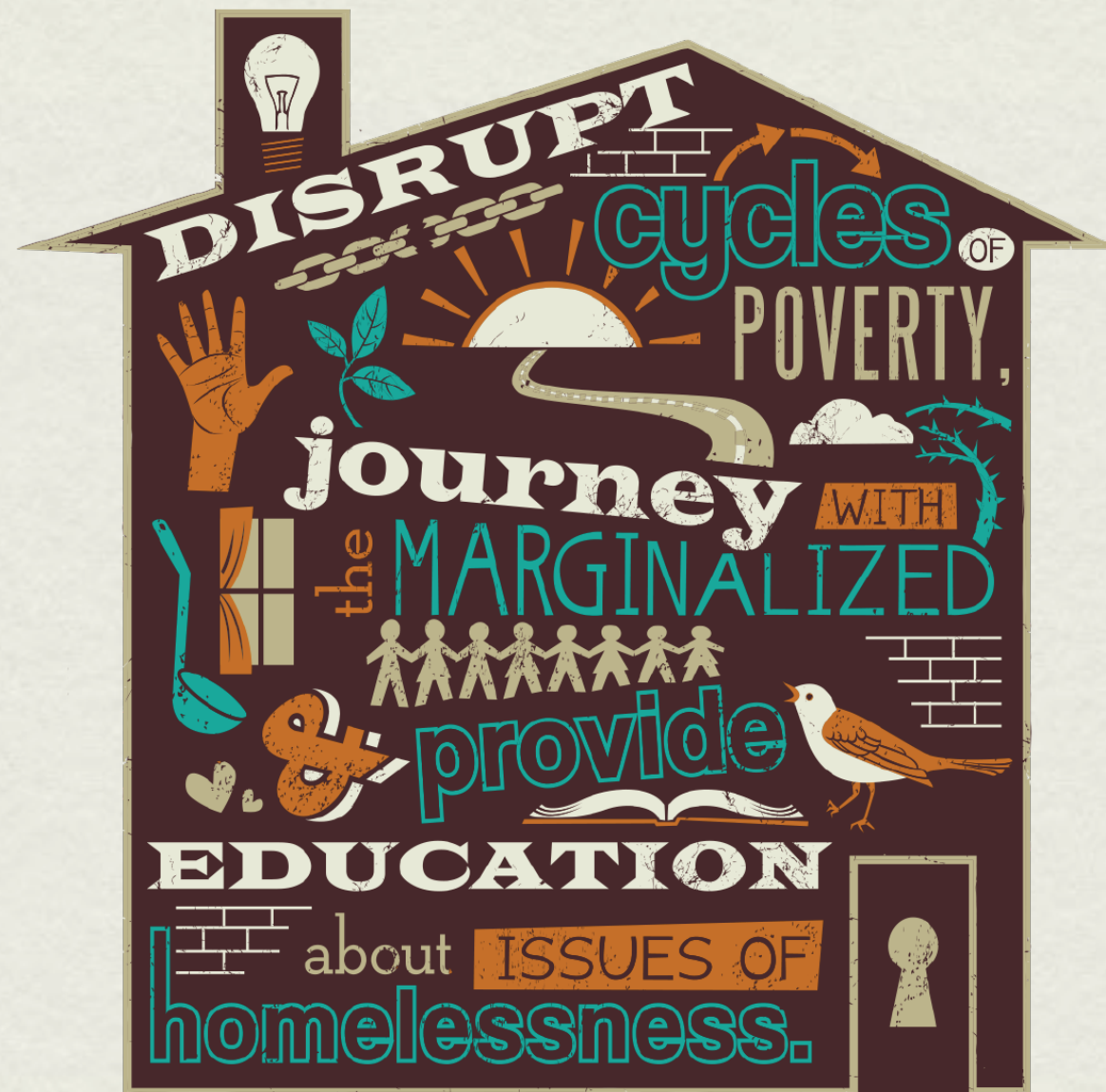


Trauma Informed De-escalation Training



OPEN TABLE NASHVILLE

opentablenashville.org | lindsey@opentablenashville.org

A faded, grayscale background image of a wooded area. In the center, there is a tent-like structure made of white fabric and poles. To the left of the tent, a bicycle is leaning against a tree. To the right, there are several folding chairs and other outdoor gear. The ground is covered with fallen leaves and branches. The overall scene suggests an outdoor camp or a field study site.

AGENDA

Welcome

Activity

What's Going On?

Self Inventory

BEFORE the Encounter

DURING the Encounter

Break

Additional Strategies

Expert Advice

Special Considerations

AFTER the Encounter

Practice

Closing

Escalation:
A rising in levels
or intensity



De-escalation:
A lowering in
levels or intensity

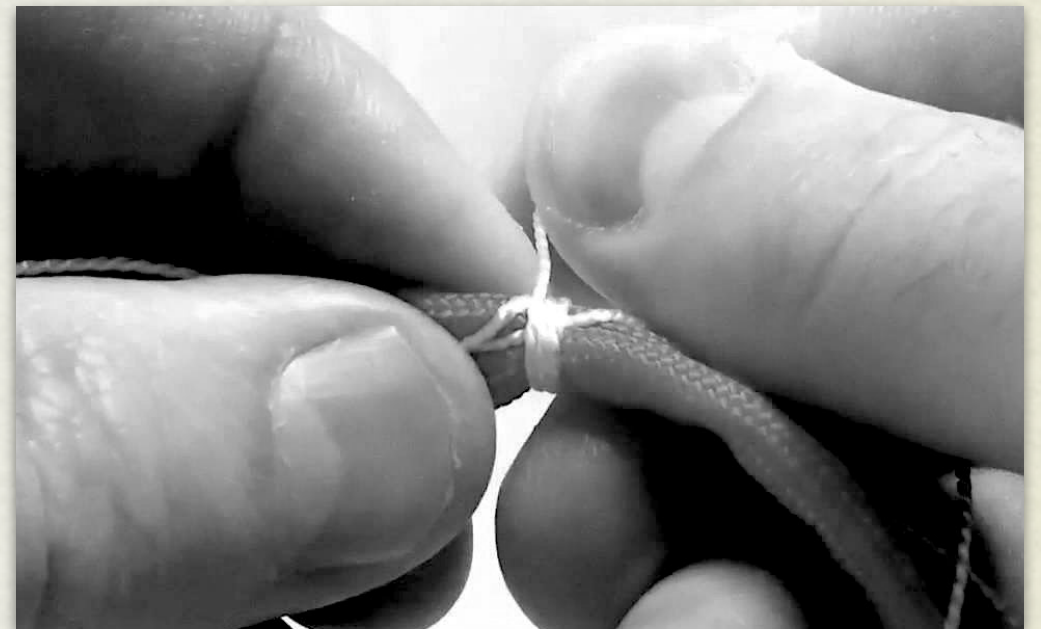
How much experience do you have when it comes to de-escalation?

1. **Beginner** - I'm new to this and want to learn all the things!
2. **Somewhat experienced** - I feel somewhat comfortable with this, but want to gain new skills, insights, and techniques
3. **Very experienced** - I have a good bit of experience and just want to hone my skills
4. **Expert** - I basically have Jedi powers when it comes to de-escalation

NEVER
IN THE HISTORY OF
CALMING DOWN
HAS ANYONE EVER
CALMED DOWN
BY BEING TOLD TO
CALM DOWN

This training will....

- Help you understand what leads to escalation and what escalated people are experiencing in the moment
- Help you to identify your strengths and things you need to work on in this arena
- Better prepare you to know what intervention strategies can help
- Better equip you to step in and assist in escalated situations
- Help you identify your own triggers and cultivate self awareness



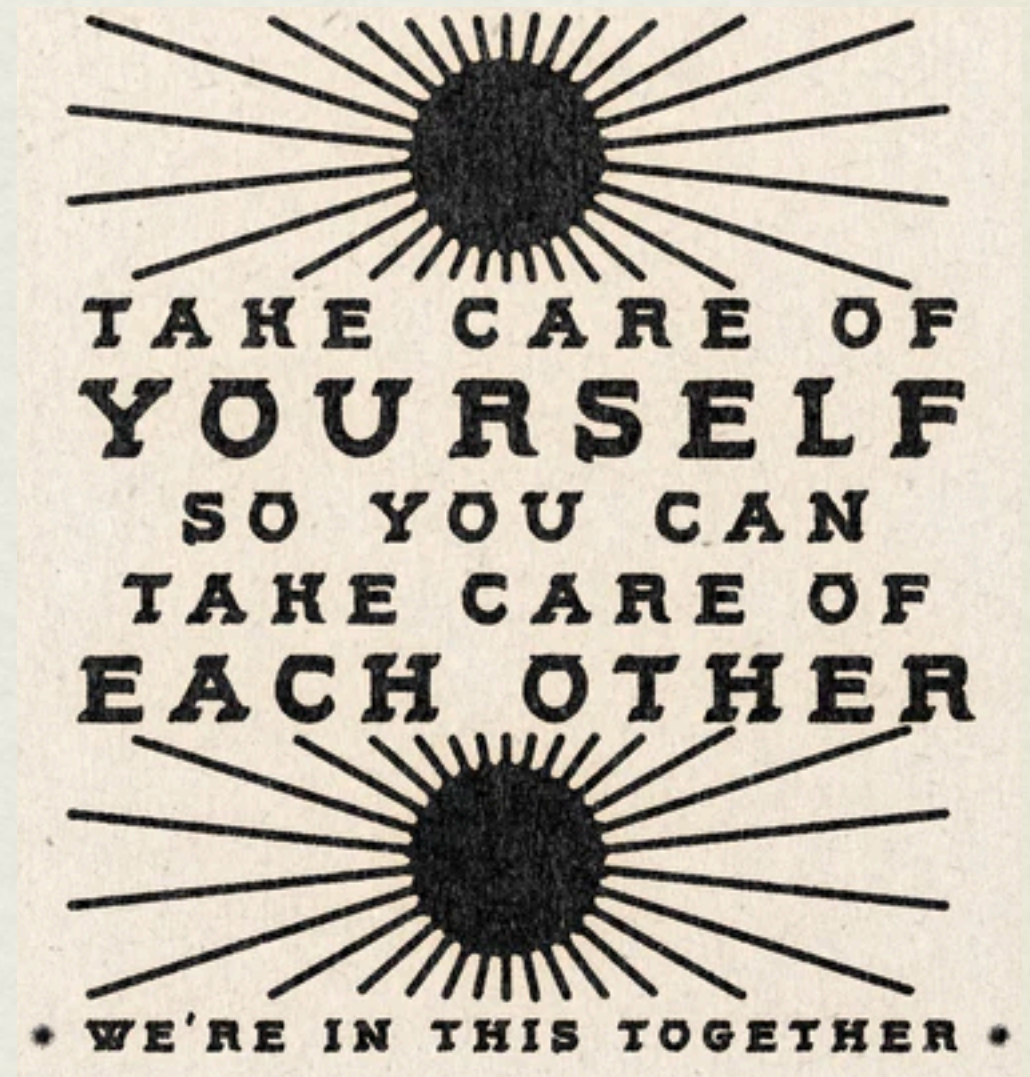
This will NOT...

- Teach you how to control or manipulate situations or people
- Teach you how to physically disarm someone

Content Warning

This training can feel heavy and can bring up difficult things.

Please feel free to step out and take a breath.



Think of a time...



When **YOU** were really angry and upset.

How did you feel?

What did you need?

What did someone do that was helpful?

What did someone do that was not helpful?



Crisis

- A **crisis** is an emotionally significant event that can exceed a person's ability to cope
- People can be pushed into “**crisis mode**” by a single event or by a number of events that build up over time
- People in crisis situations often feel **out of control** or **powerless**
- Coming in and taking control or power **away** from the person often adds to the crisis and makes things worse (backed by research)



Be curious and nonjudgemental. What is making this person feel out of control? Is there even some small bit of control we can help the person regain?

What is going on beneath the surface?



What is going beneath the surface?



Trauma

Trauma can result from experiences that are...

- Physically or emotionally harmful or life threatening
- Have lasting adverse effects on a person's functioning
- Impact mental, physical, social, emotional, or spiritual well-being

Trauma can also...

- Override our ability to cope
- Stay with us in our bodies
- Re-wire and change our brains, causing some parts to under-develop/under-function, and others to over-function

- *Substance Abuse and Mental Health Services Administration (SAMHSA)*

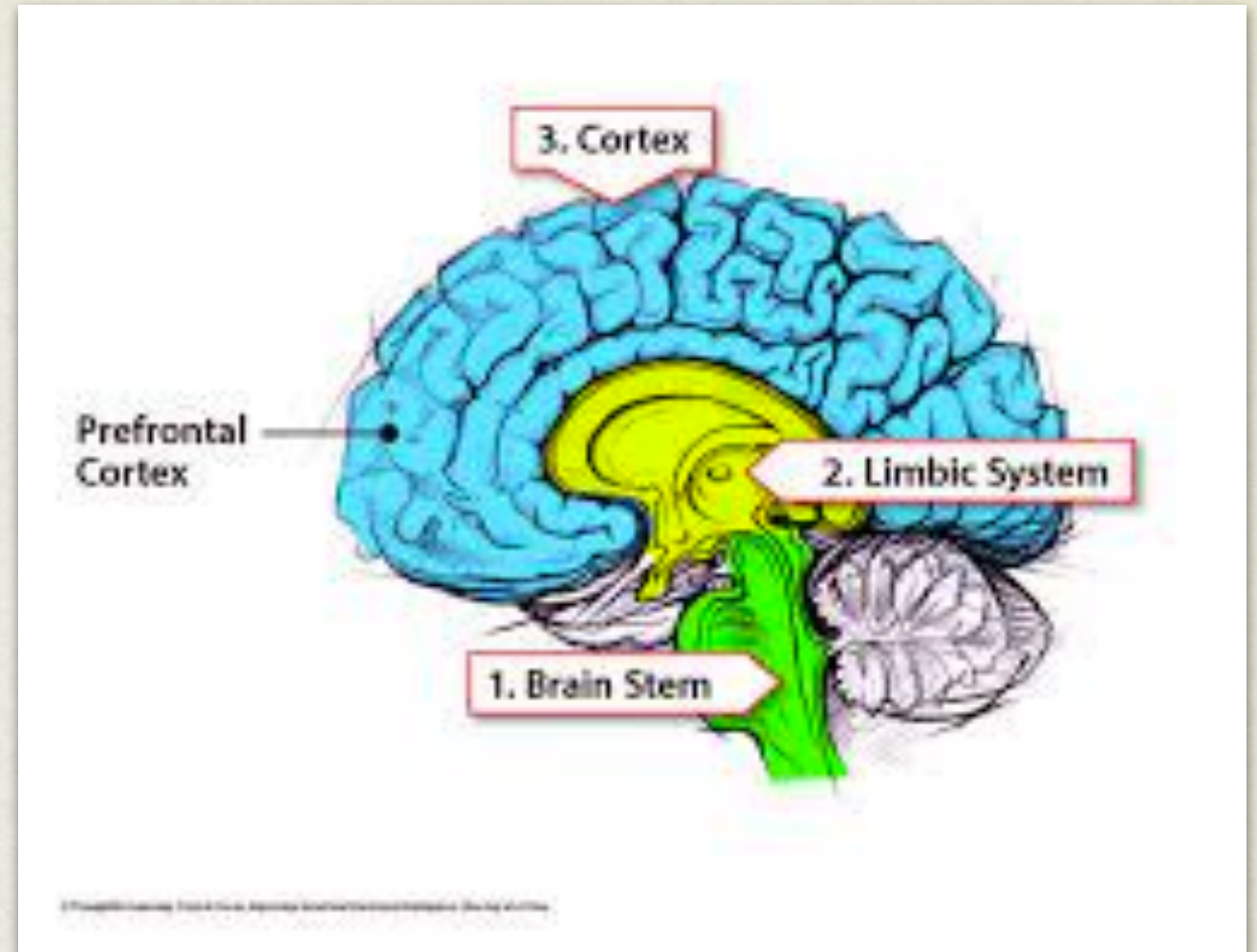


Trauma & Crisis & Toxic Stress

- Do NOT foster logical thinking—they foster **fight, flight, freeze**, or **appease** responses
- Some also talk about a “**fawn**” response that is similar to the “**appease**” response and is often present in more ongoing codependent relationships and trauma. It involves “seeking safety by merging with the wishes, needs and demands of others” and sometimes even “becoming the helpful and compliant servant” of the abuser. - Pete Walker



Survival Mode



Many of our friends are *already* in survival mode which makes it difficult for them to see beyond their immediate circumstances.

This mode dials back the *thinking* parts of our brain (cortex) and elevates our *instincts* (brain stem) and *emotions* (limbic system).

In times of crisis and trauma, what is happening to the body?

Hormones can flood our systems and alter our state of being:

CATECHOLAMINES	CORTISOL	OPIATES	OXYTOCIN
<ul style="list-style-type: none">*adrenaline*help with FIGHT so the body can fight back against the traumatic event*can also help with FLIGHT to try to run from the threat	<ul style="list-style-type: none">*affects the amount of energy the body has for its reaction* FIGHT or FLIGHT	<ul style="list-style-type: none">*body's natural morphine*to counteract physical pain that may accompany emotional pain*could tie into FREEZE	<ul style="list-style-type: none">*increase positive feelings*to counteract physical pain that may accompany emotional pain*could tie into FREEZE

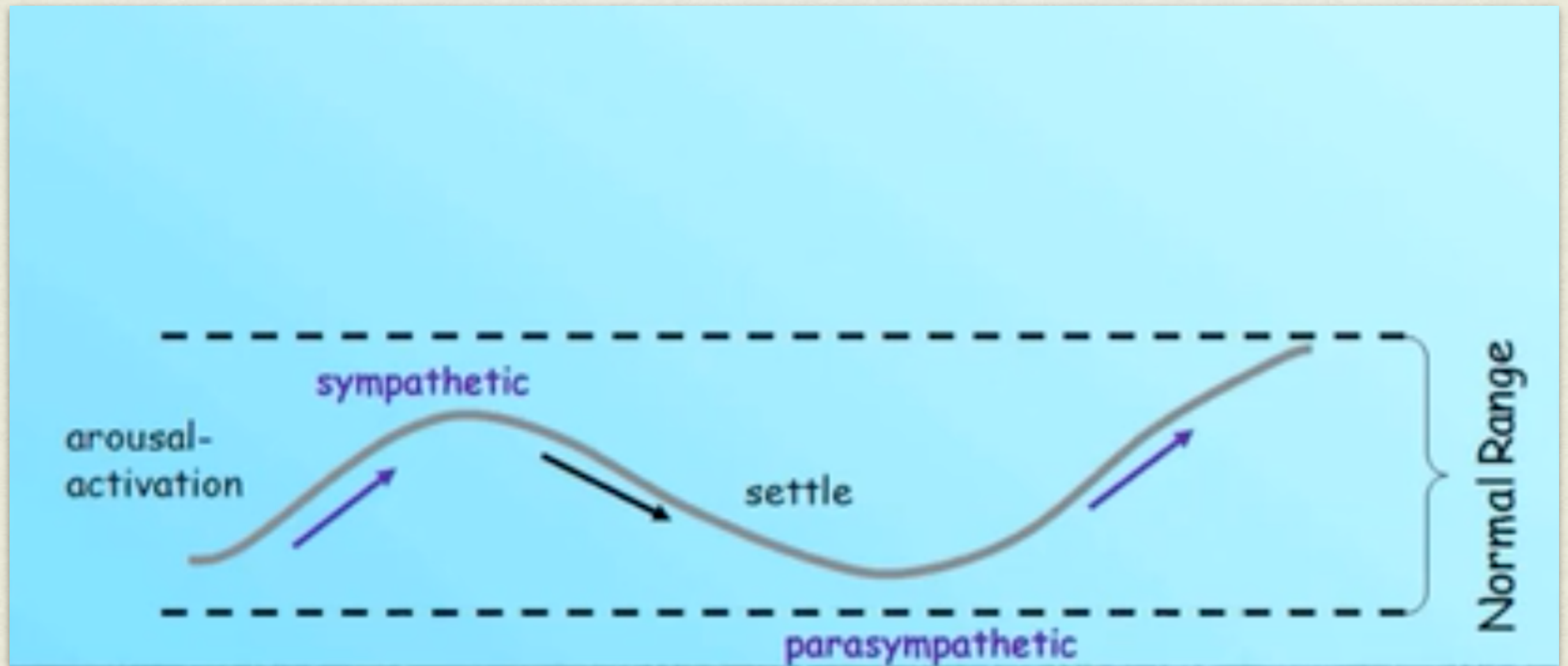
It can take the body 20-30 min to come back to baseline after a perceived or actual threat

Nervous System

- The **Autonomic Nervous System** controls body functions that aren't consciously directed (like breathing, heartbeat, BP, digestion, etc.).
- Made up of:
 - **Sympathetic Nervous System** - “fight or flight”
 - **Parasympathetic Nervous System** - “rest and digest” + “freeze”
- This system functions in waves. There are cycles of activity and cycles of rest.

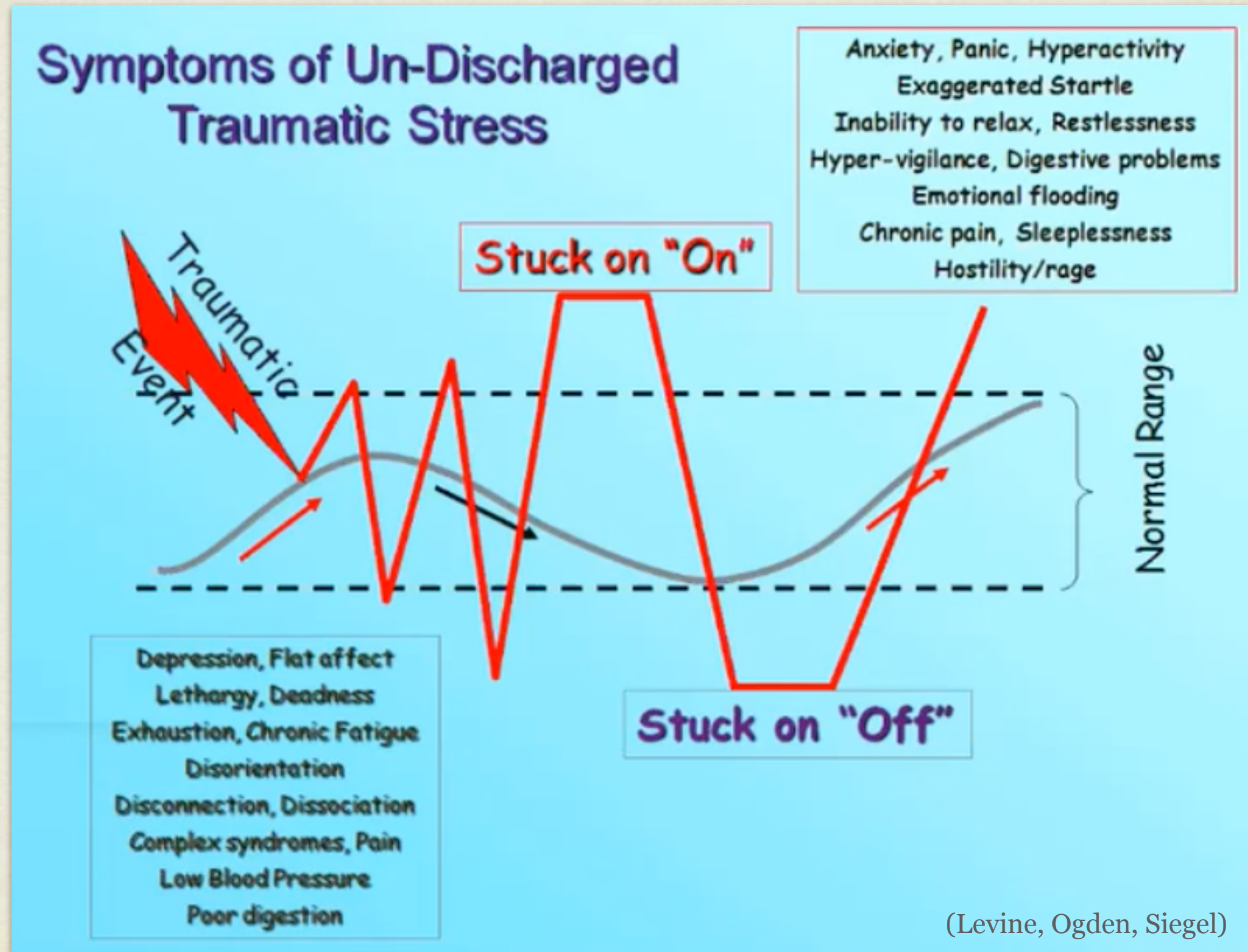


Cycles of a Healthy & Regulated Nervous System



(Levine, Ogden, Siegel)

When the Cycles are Disrupted...



(Levine, Ogden, Siegel)

“Window of Tolerance or Presence”

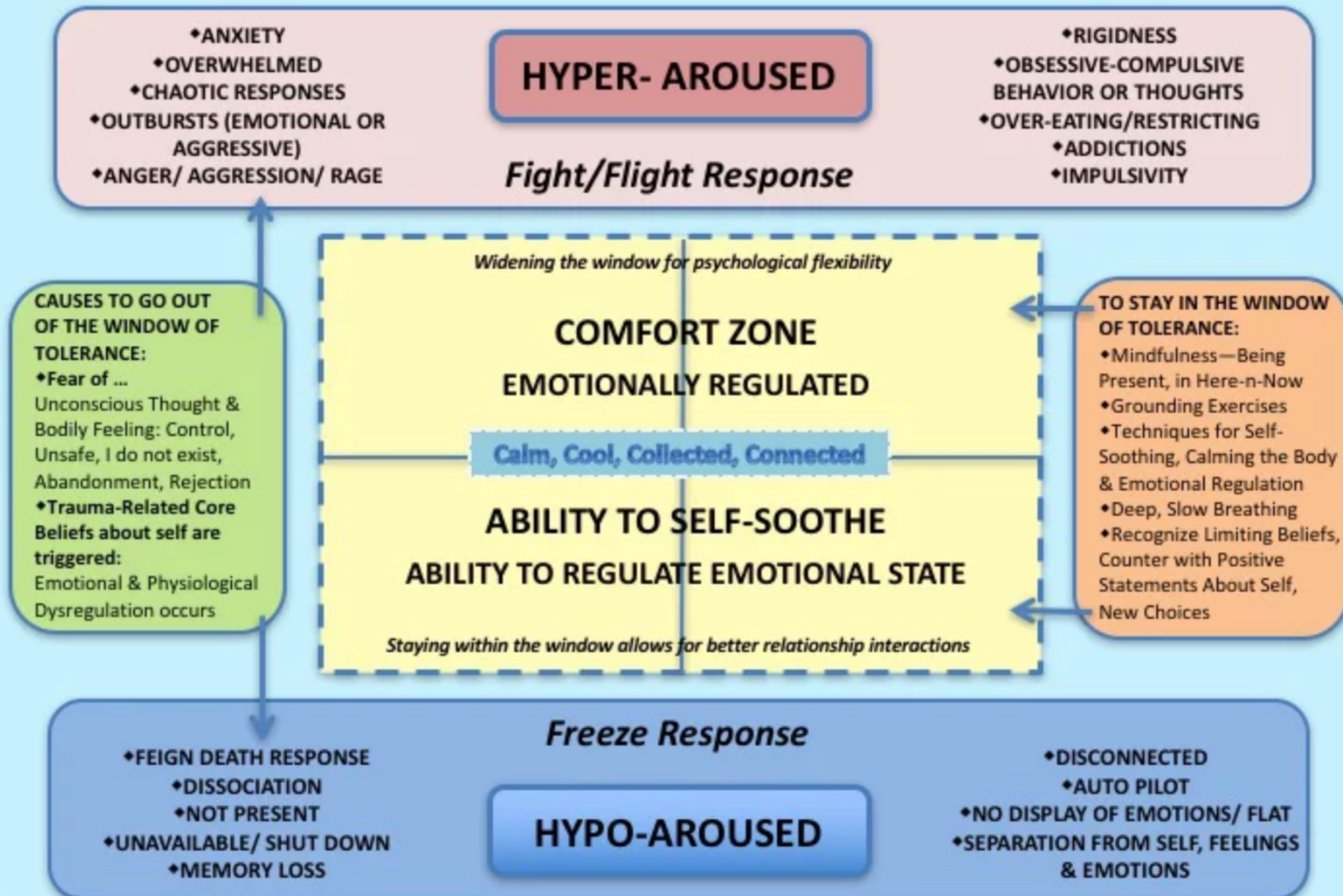
- The term “Window of Tolerance” was coined by Dr. Dan Siegel, a clinical professor of psychiatry at UCLA and author
- The Window is a way of understanding the neurological and physiological reaction responses to crisis, stress, or trauma
- **Main idea:** When we’re inside of our window of tolerance/presence, we’re calm, regulated, centered, and able to keep our cool. A stressful event can knock us out of our window, however, and cause our fight/flight/freeze responses to activate. The question for all of us is what practices/coping skills will help us get back into our window? What will help our friends get back into theirs?
- If we can’t stay in our in our window, we can’t de-escalate others who have been knocked out of their window.



Window of Tolerance or Presence

Marie S. DeZelic, PhD © 2013

WINDOW OF TOLERANCE- TRAUMA/ANXIETY RELATED RESPONSES: *Widening the Comfort Zone for Increased Flexibility*



Mindfulness Exercises



5 Things You Can See



4 Things You Can Touch



3 Things You Can Hear



2 Things You Can Smell



1 Thing You Can Taste

4-7-8

breathing technique

This breathing technique can aid relaxation and sleep. Start by sitting or lying in a comfortable position.



Repeat technique 4 times

Caveats

- This doesn't mean that people should never be angry. There is a time to be angry. There is also a time to pull back and rest.
- It's also important to recognize that different cultures and people express their emotions differently.
- The key is that we need to be able to recognize when WE are outside of ourselves and when people are outside of themselves.
- "Our role is to return people to themselves." - Father Greg Boyle



Remember: Your window is dynamic. The healthier you are, the bigger your window is and the easier it can be to get back to your center. When you're going through hard times, your window can shrink and make it so it's easier to knock you out and harder to come back in.

Being Real about Power Differentials & Inequities

Anti-oppression framework...

- Recognizes that there are **interpersonal** and **systemic power imbalances**
- Works to **foster awareness** of power imbalances and ultimately **change** the balances of power



* Power imbalances exist based on differences in class, gender, race, ethnicity, physical ability, sexuality, education, health status, housing status, age, etc.

* These inequities are driven by white supremacy and other ideologies of dominance that entrench themselves in policies, organizations, and systems.

SELF-INVENTORY



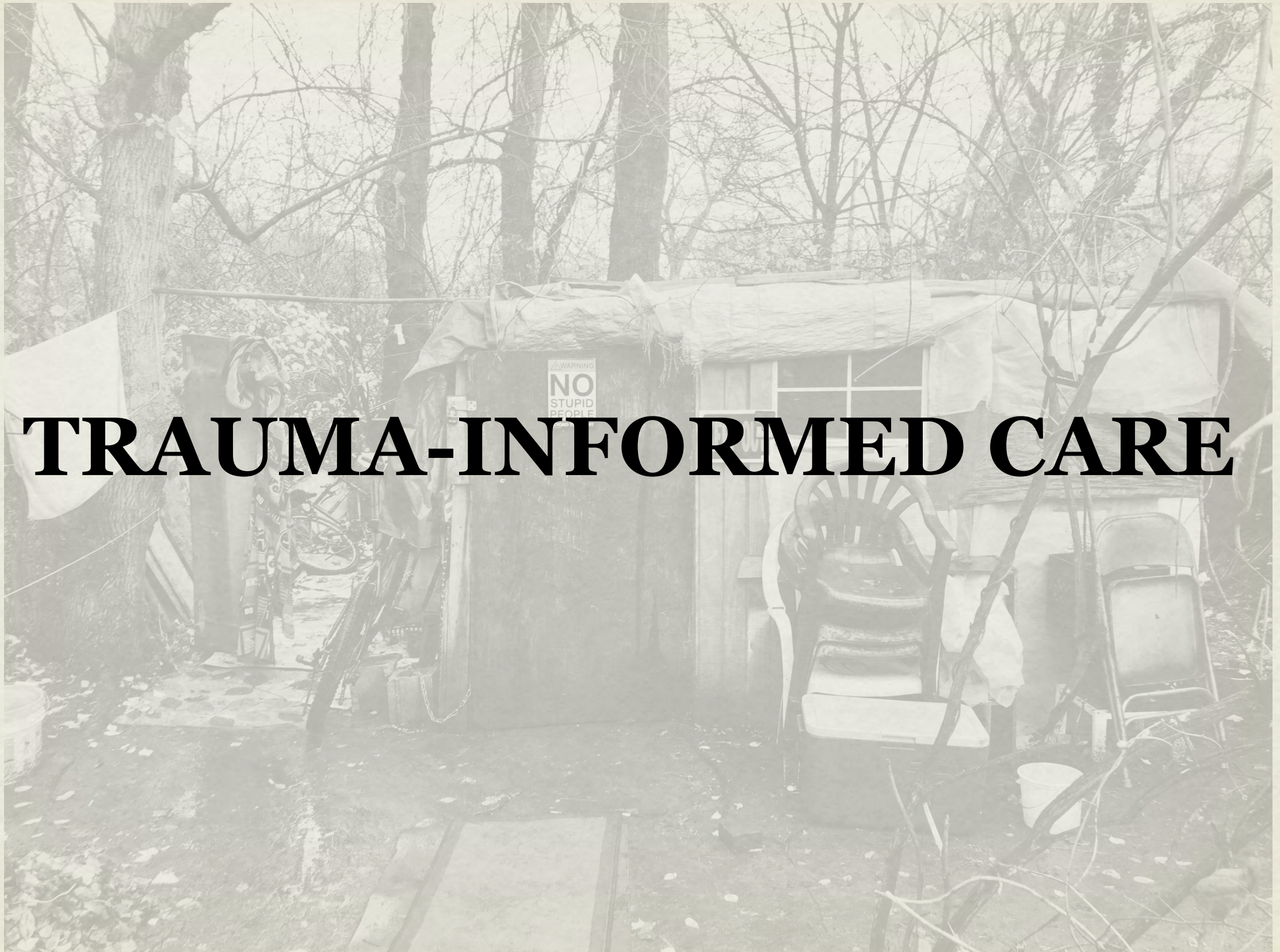
Self-Inventory

- How do you present to others?
- What are your strengths? What gifts and capabilities do you bring to these situations?
- What do you struggle with? What might you need to work on the most?
- Who might you be able to build the best rapport with when it comes to de-escalating?
- Who might you have barriers to de-escalating?



Be prepared: Identify 1-3 things that will help YOU get back into your Window of Presence.

TRAUMA-INFORMED CARE



Trauma Informed Care

- An evidence-based practice
- Understands how past traumas can impact present **behaviors** and **thinking**
- A **strengths-based** model for interaction grounded in an understanding of the impact of trauma. It emphasizes **safety** for both providers and survivors and creates opportunities for survivors to **rebuild a sense of control and empowerment**.
- People only begin to **heal** when they feel **safe**
- Healing cannot happen in isolation... it happens in the context of **supportive and caring relationships**



A shift from “what’s wrong with you” to a gentle curiosity about “what happened”

Also, people are more than their traumas.



“Here is what we seek: a compassion that can stand in awe at what people have to carry rather than stand in judgment about how they carry it.”

- Father Greg Boyle

Core Principles of TIC

Safety



Ensuring physical and emotional safety.

Trustworthiness/ Transparency



Decisions are made with transparency, with a goal of building and maintaining trust for all.

Peer Support



Utilizing their stories and lived experience to promote healing.

Collaboration / Mutuality



Everyone has a role to play in the healing process.

Empowerment, Voice & Choice



Individuals' strengths are recognized, built on, and validated.

Cultural, Historical, and Gender Issues



Actively moving past stereotypes and biases, offering inclusive services.

More TIC Practices

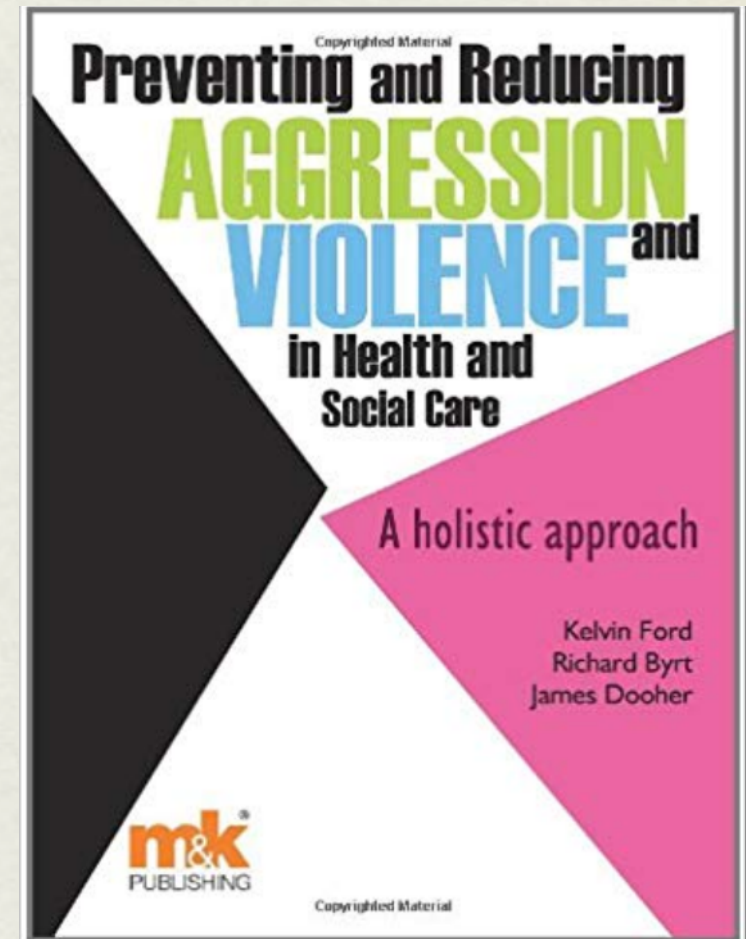
- Meet people where they are with **non-judgmental compassion**
- Respect their **needs** *and* **strengths**, their **voice** *and* **choice**
- Respect their **personal space** and tend to their **physical needs**
- Be **attentive** and listen well. **Build trust.**
- Be **genuine** and **honest** about your limitations
- **Don't impose** your beliefs or opinions. Respect their agency. **Collaborate.**
- You want your **relationship** with the person to feel like you are **on their team...** like you are **a refuge for them...** like they can feel safe with you and begin to heal



“Just having a listening ear made all the difference for me. With my new found family at Open Table, I’d just pick up the phone and call. **The best thing you can do is show that you are genuinely concerned about someone’s feelings.**” - Susan Lantrip

Levels of Intervention in an Encounter

- **BEFORE: Prevention**
 - Self awareness
 - Observation
 - Assessment
- **DURING: De-escalation**
 - Verbal & non-verbal de-escalation including skilled listening and communication
 - Action focused on safety
- **AFTER: Debriefing & Care**



Some of the following information has been adapted from the book above and a guide from Wasatch Homeless Health Care Program

Goals

- Do no harm + “harm reduction”
- Help keep people safe
- Model healthy interactions that respect the dignity of all people involved
- Help people return to themselves
- Do your best!







You're at work and see a person you've never seen before pacing back and forth in the main gathering area near the entrance. The person looks agitated, but you don't know much about them or what is going on.

What would you do next?

Prevention

Observation:

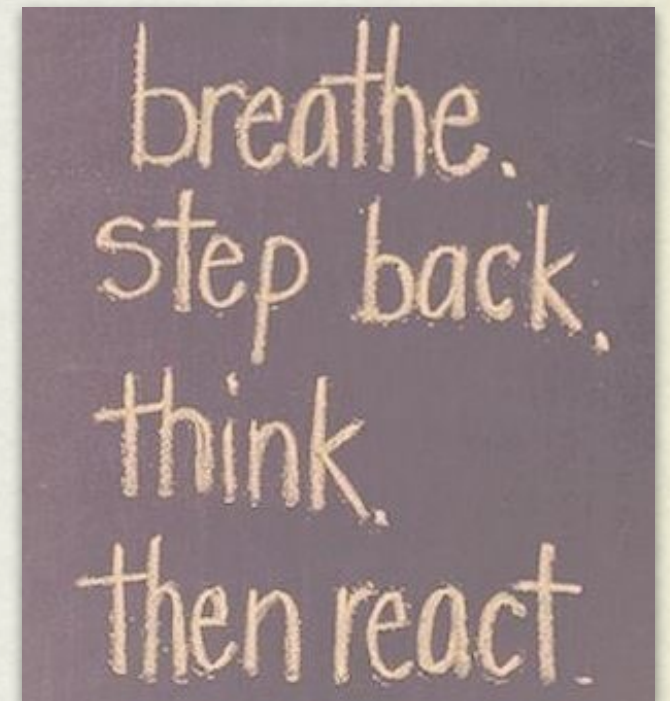
- Look for **warning signs**: Defiant attitude, clenched fists, aggressive motions, loudness or stewing silence, challenging demeanor, etc.

Self Awareness:

- How is **your** body reacting to this situation?
- Are you the best person to respond? If you can't respond, it's okay—**find someone else who can.**

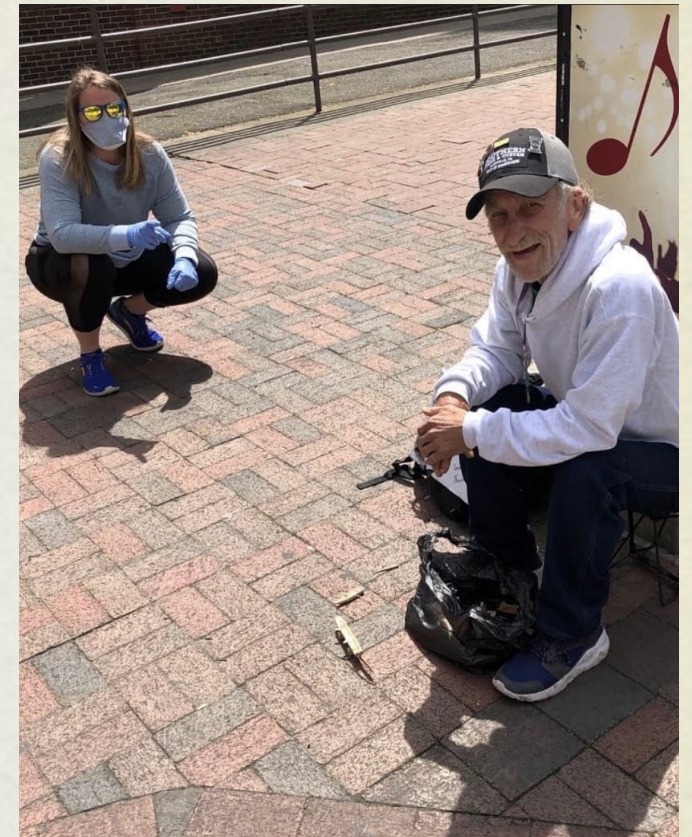
Assessment of Needs:

- What is the person telling you about their needs through their **behavior, words** and **body language**? Ask what they need. Can we meet these needs? If not, what **options** can we offer the person?
- Is the person **impaired** by drugs, alcohol, or severe mental health issues? If so, they may respond in unpredictable ways.



Prevention - Interacting

- **Introduce yourself** and tell the person your name, your role, and that you are there to help. Your first impression and minute of interaction is critical.
- Approach with care. Allow the person a “**comfort zone**” – don’t stare at, hover over, or press the person.
- Keep a **soft and calm tone of voice**.
- Treat the person with **respect**. Channel the persona of a **concerned and curious friend** (without patronizing them).
- Be **consistent and predictable**.
- **Listen empathetically** to what the person is experiencing. Affirm the person’s feelings.
- What **needs** do they have? What needs can you meet? Can you **negotiate creative solutions?**



Avoid
authoritarian and
patronizing
behavior and
communication.
**“Never make
people feel
small.”**

ADVICE: Build Trust



- **Relational rapport matters.** You are more likely to be able to help someone come back into their “window of presence” if you have already established rapport with them.
- Some researchers call this “**relational security**” or “**establishing a therapeutic alliance**”
- **Tips:**
 - Be a friendly face and ask people how they’re doing.
 - Introduce yourself to new people.
 - Check in with people who look agitated or uneasy *before* things escalate... “vibes team.”
 - Try to remember names when you can.

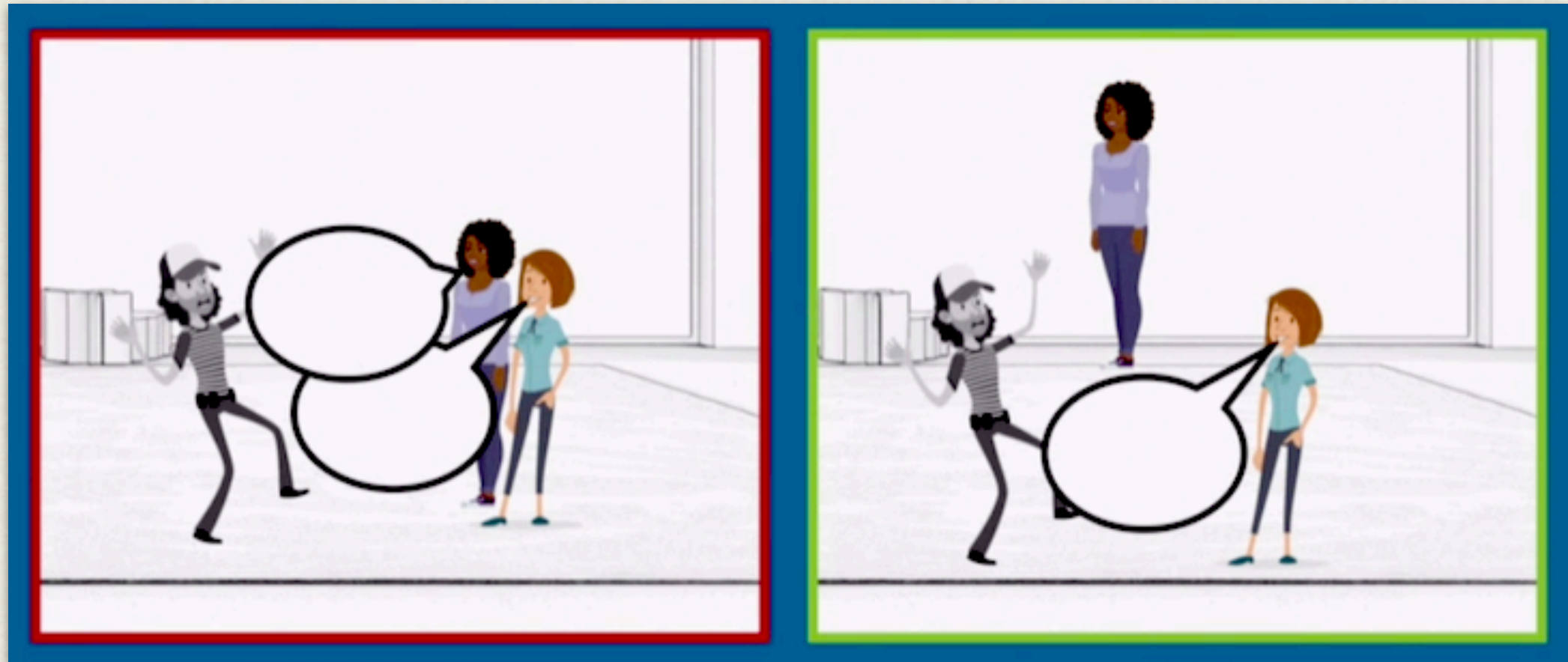
Consider carrying items you can offer people that might help them return to their “window of presence”

What can you offer?



But remember - YOU are your own greatest asset

How to approach de-escalation in pairs (“buddy system”)



Do Not...

- Team up, 2-on-1
- If you are the back-up, don't join the conversation/argument

Do...

- Decide on who will be lead and who will be back-up
- Roles of the back-up:
 - Stand 8-10 feet away
 - Get help if your buddy asks
 - Keep others from interfering

Example from Ryan Dowd, homelesstraining.com

A black and white photograph of a makeshift shelter in a wooded area. The shelter is constructed from various materials, including wood, plastic, and a tarp. A sign on the shelter reads "WARNING NO STUPID PEOPLE BEYOND THIS POINT". A bicycle is leaning against the shelter. In the foreground, there are several chairs and a white bucket. The background shows bare trees and a forest. The text "ACTIVE DE-ESCALATION" is overlaid in large, bold, black letters across the center of the image.

ACTIVE DE-ESCALATION

Verbal & Non-Verbal De-Escalation



1) Active & Reflective Listening

2) Open Body Language

3) Action Focused on Safety

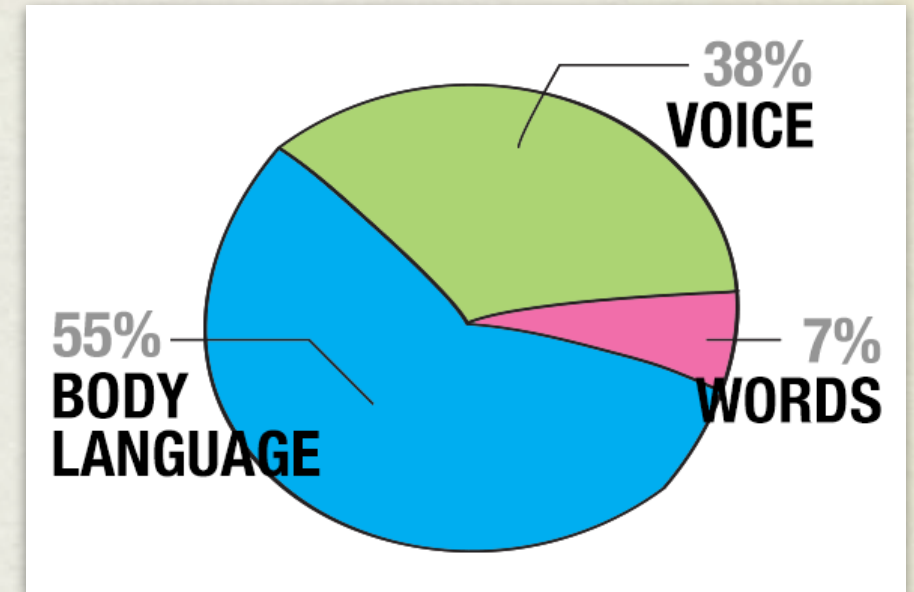


Active & Reflective Listening for Verbal De-escalation

“Attention is the rarest and purest form of generosity.”
- Simone Weil

Tips for listening well

- ✓ DO ask thoughtful questions that allow them to talk and vent.
 - “Can you help me understand what you’re going through?”
 - “Tell me more about...”
- ✓ DO reflect back to them what you hear them saying, “It sounds like you...”
- ✓ DO let the person blow off some steam (within reason)
- ✓ DO affirm their feelings
- ✓ DO ask them what would help them
- ✓ DO practice the “Low and Slow” strategy (Teresa Bolick)



Don't forget your tone of voice, your volume, and things like eye contact and your facial expressions

TOXIC POSITIVITY

THE SUN WILL COME OUT TOMORROW.

EVERYTHING HAPPENS FOR A REASON.

**YOU HAVE TO BE GRATEFUL FOR WHAT
YOU DO HAVE.**

IT WON'T ALWAYS HURT THIS BAD.

LOOK ON THE BRIGHT SIDE.

IT IS WHAT IT IS.

IT COULD ALWAYS BE WORST.

I KNOW EXACTLY HOW YOU FEEL.

GOOD VIBES ONLY.

COMPASSION RESPONSE

I SEE YOU.

I HEAR YOU.

I ACCEPT YOU AS YOU ARE.

THIS IS A TOUGH TIME.

HOW CAN I SUPPORT YOU?

I AM HERE FOR YOU.

YOU ARE NOT ALONE.

TELL ME MORE ABOUT IT.

FEEL WHAT YOU NEED TO.

What to AVOID

- ✗ DON'T make the conversation about you
- ✗ DON'T tell them how they should fix things or feel
- ✗ DON'T minimize what they're feeling
- ✗ DON'T shame them, blame them, or judge them
- ✗ DON'T argue with them or challenge them when they're escalated
- ✗ DON'T make demands or promises

Open Body Language

Open Body Language - Sitting:

- Use an open and relaxed posture, slightly leaning forward.
- Avoid crossing your arms and legs.

Open Body Language - Standing:

- Use an open and relaxed posture.
- Keep your hands visible with palms open.
- Stand with your feet shoulder width apart at a slight angle from the person in a way that doesn't block them.



(This may be a little *too* open...)



Open Body Language

What is being modeled well?

What could be more helpful?



Example from Ryan Dowd, homelesstraining.com

The “Regulate Over Educate” Strategy (Or “Connect Over Correct”)

When people’s instincts and emotions are heightened and their “critical thinking/logical brain” is offline, we can’t meet them with logic or reason. We have to **first connect with them emotionally**.

We establish ourselves as safe and non-threatening in our body language, approach, and tone of voice. We listen and reflect back what they’re saying. We affirm their feelings. We seek understanding. We try to be on their team to keep them and everyone safe. This helps them to regulate their fight/flight responses. If we can keep them talking, sometimes their “logical brain” will come back online.

Educating or “correcting” (cringe) are not effective strategies when people are highly escalated.

PRACTICE

You walk over to the person who is agitated and introduce yourself. As you expected, they are very angry and they tell you about it. They say that the last time they were here, their bag was stolen that had *everything* in it. They also need housing ASAP. The person is upset and loud, but not quite yelling.

Role Play

What would you say and do next?

A black and white photograph of a makeshift shelter in a wooded area. The shelter is constructed from various materials, including what appears to be a car door or a similar metal panel, and is covered with a tarp. A bicycle is leaning against the shelter. In the foreground, there is a wooden chair and a folding stool. The background shows bare trees, suggesting a cold season. The text "ACTION FOCUSED ON SAFETY" is overlaid in a large, bold, serif font across the center of the image.

ACTION FOCUSED ON SAFETY

Action Focused on Safety

Be aware of your environment

- Where are the exits?
- Are there potential weapons?
- Does someone else know where you are?
- Can you minimize distractions?



Offer options for safety

- Will they walk to somewhere safer with you away from the conflict?
- Will they sit down with you and talk?
- What would help them feel safe?
- Avoid touching the person without consent

It's okay to get help

- If your intuition or gut is telling you to get out of a situation, you need to listen
- It's always okay to leave and enlist outside help

A Few More Do's & Don't

- ✓ DO pay attention to your intuition
- ✓ DO act with sincerity and respect
- ✓ DO be creative in your negotiating
- ✗ DON'T have your back to the person
- ✗ DON'T touch the person without consent

EXAMPLES:
Hobson
House &
when you
can't break it
up



The person who is agitated is still talking with you and then they see another person across the room. The person who is agitated says,

“There’s the person who stole my crap! It’s not right... They’re gonna be sorry!”

The person who is agitated starts to go around you toward the other person.

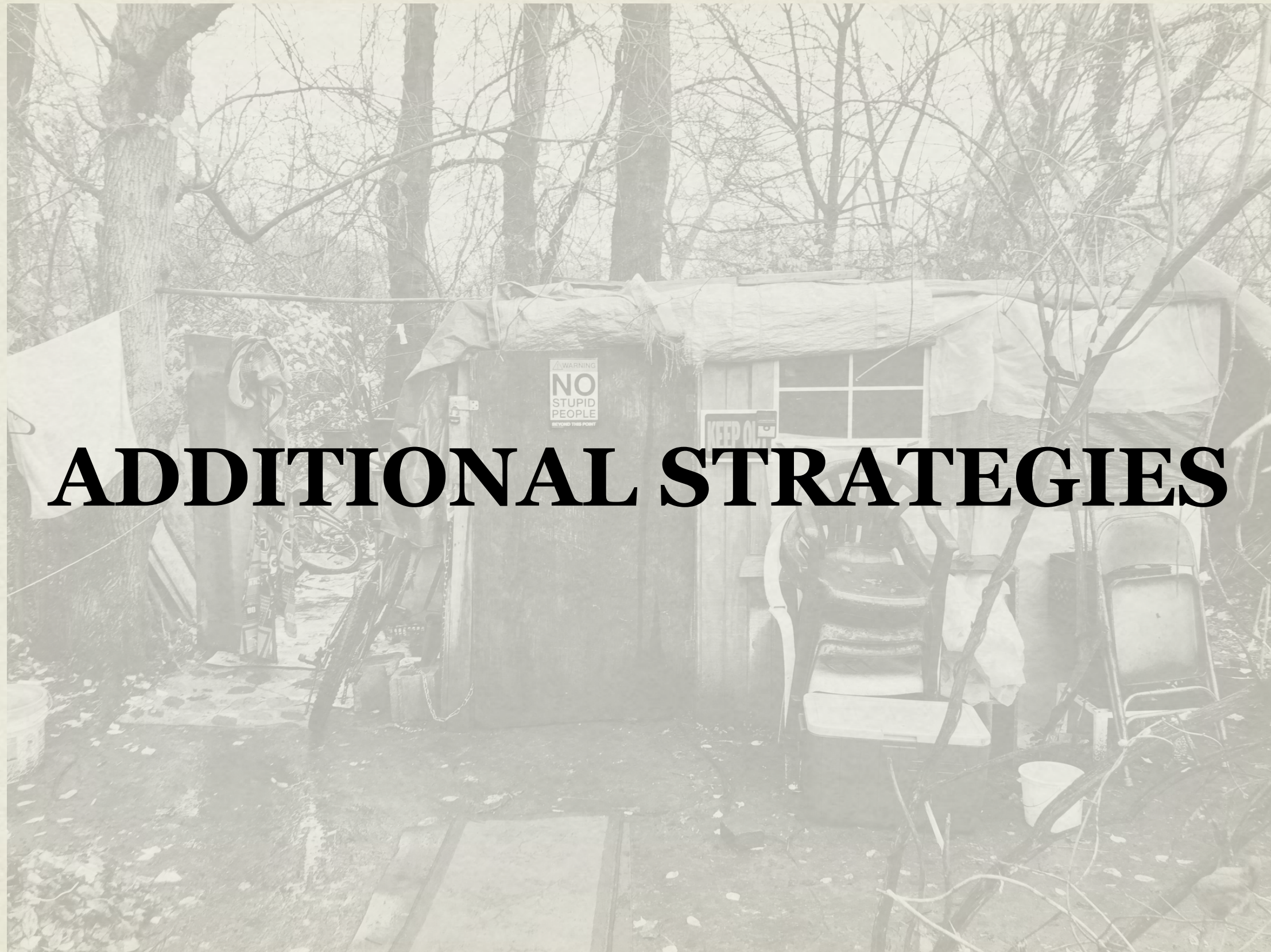
Role Play

What would you do next?

EXPERT ADVICE

Valegia Wilson





ADDITIONAL STRATEGIES



Pair up with 2-3 people near you. Spend 4-5 minutes discussing:

- What strategies have worked for you in the past?
- What things have you seen others do that has worked in your setting

Other Strategies

- Try **distractions!** (“Oh I really like your shoes, where did you get them?”)
- Try **humor to lighten the mood** (Just not humor that degrades anyone!)
- **Enlist their help**
- **“Focus on me”** strategy
- Do **breathing activities** together
- Keep someone **talking/venting**
- **Be flexible** - “Blessed are the flexible, for they shall not be bent out of shape.” - Open Table Nashville mantra



Learn from this encounter
between Gail King and
R. Kelly:
“Robbie. Robbie.”

Pro Tip: Let go of your need to
“win” in front of your group.

This is really hard, especially for
newer facilitators.

Tips for engaging a dispute between two parties

- **Don't take sides** during the moment of escalation if you step in to mediate. (This is important - your #1 priority in the heat of the moment is to get people to step back and feel like you are someone who can hear both sides and help.)
- **Create physical distance between the parties.** See if you can separate them and spend time actively listening to each person's experiences. Acknowledge each person's needs. Validate feelings where you can. Take time to find and negotiate solutions that could work for both parties when possible. Take your time. Pull in extra support if needed.



It's easier to break things up between two people if you have help



SPECIAL CONSIDERATIONS

Special Considerations

- Extreme mental health issues and psychosis
- Substance use disorders and being under the influence
- When someone is armed
- When you get activated



Special Considerations

When people are experiencing alternative realities or are impaired, they can be less predictable. Here are some things to do:

- **Slow things down.**
- **Use concise, direct, even statements.**
- **Be predictable.**
- **Build rapport. Be on their team.**
- **Be a broken record on repeat.**
- **Let them know you're there for them and want to help.**
Problem solve together. Is there someone they can call who can help? What has helped in the past?



If in Active Psychosis...

- Remember the person's perceptions may be **different** from yours.
- Meet the person where they are with **acceptance** and **compassion**. **Affirm their feelings** ("that must be scary/frustrating") without affirming their alternative realities.
- **Don't try to argue** against voices or delusions. A person's perception is their reality.
- **Don't try to use logic** to convince the person they are wrong.
- Bring the conversation back to **the behavior**—not the delusion—and try to **negotiate a solution** that works for everyone and doesn't belittle them.
- Don't blame the person or others for what's happening.



If a person is **suicidal or homicidal**, do not leave them alone. Call or send someone for help. **The number for Mobile Crisis is 615-726-0125.**

Psychosis: Tips for Talking/Listening

- **Affirm their *feelings*:** “That sounds like it would be disorienting/frustrating/scary/overwhelming.”
- **Seek to understand:** “Can you help me understand what you are experiencing right now?”
- **Ask about their options:** “What do you think would help you right now?” and “How can I help you feel more safe?”
- **Brainstorm resources:** “If you’ve experienced this before, what or who has helped you in the past?” “Is there somewhere you could go that would help you feel more safe?”
- **Express concern. Enlist their help:** “I’m concerned about your safety. Can you help me/us make sure that you/everyone here is safe?”
- **Focus on the here and now and what might help.** “I don’t have much experience/education about (whatever topic the person is having delusions about), but I do want to help.” “How is that affecting you now?”



Narrate what actions you’re taking if you call for help, talk to someone else, or are even reaching into your bag. Be predictable, clear, and as soothing as possible.

If Under the Influence of Drugs/Alcohol

- Avoid getting into a confrontation with the person
- Speak **calmly** but **directly**. **Slow down**. **Repeat yourself**.
- Be flexible where you can, but set **boundaries** for what is and is not appropriate. Keep those boundaries.
- Sometimes **humor** and **redirection** work well here.
- Be **aware** and **cautious** of how you are affecting the person. Leave or enlist additional support if the person becomes increasingly agitated or behaviorally inappropriate.
- Check on the person's **immediate physical health and safety**. An intoxicated person may be physically ill or injured but unaware of it. Offer immediate, concrete help (like options for detox, medical attention, etc.).
- If someone needs help with **substance use resources**, call the **TN REDLINE** at **1-800-889-9789**.



Pro-Tip: Build rapport by offering water, food, coffee, or cigarettes.

If (When) You Get Activated...

- If *someone who is agitated or aggressive* triggers you by using language that is derogatory to entire groups of people (like racial slurs, or sexist, homophobic, or transphobic language)...
 - **Take a deep breath.** If that person is activating you OR if you are a member of the group the person is deriding, you might not be the best person to intervene. That is 100% okay. Leave the person and enlist additional help.
 - Don't argue with the person. ***Now is not the time to try to convince them that they are wrong.***
 - Using a **calm, firm, and direct tone of voice**, let them know that that language is not welcome in this space.
 - Can you **redirect the conversation**? Is there something you can do to **help** them? Can you get them to **leave** the area?
 - Remind them **your role** is to keep everyone here safe and that you are concerned they are making this space unsafe. **Enlist their help** in helping you keep things cool.



If the person settles down and is able to have a reasonable conversation, THEN you can talk about their options and try to educate them and change their mind!

If Someone is Armed...

- What **guidelines** does your org/group already have?
- **Prioritize your safety.** Get out of harm's way if possible. Listen to your intuition if you try to intervene.
- If a weapon is drawn and the person is locked into you, *one strategy* to consider is this:
 - **Identify the exits, maintain eye contact, keep your hands visible.**
 - Keep talking in a **calm tone of voice**: "I know you're upset. I'm here to help. We can work through this together. I know you don't want to hurt me and other people here. You have options. You can lay the weapon down and we can figure this out together."
 - If they will not release the weapon, **slowly back away, facing them.**
- As soon as you are in a safe place, **call for back-up immediately.** If someone there is not able to handle the situation, call for security help or the police. *Calling the police is **always** the last resort, but if a drawn weapon is present, calling may be necessary.*



Remember:

Weapons can also be things from the environment like tools, utensils, pieces of furniture, poles, pencils/pens, etc.



EXAMPLE:

Abandoned
hotel

Additional Resources

ACTIVE SHOOTER *Pocket Reference Card*



RUN	HIDE	FIGHT
		
<ul style="list-style-type: none">Identify the location(s) of the threatQuickly escape from the threat (via windows, stairs, doors, etc.)Leave belongings behind	<ul style="list-style-type: none">Block entry to hiding place and lock doorsHide in area out of the shooter's viewSilence mobile communication devices	<ul style="list-style-type: none">Commit to decisive and aggressive actionYour goal is to incapacitate the shooterFight until the threat is neutralized

Consider all of your options: Run ↻ Hide ↻ Fight

Note: Our training is *not* an active shooter training, but there are resources for that.

For info on active shooter webinars, please email

ASWorkshop@CISA.DHS.GOV

What non-police active shooter trainings are available?

CALL OR TEXT 9-1-1 IF YOU CAN

STAY SAFE!

- Pay attention to emergency alerts
- Report **suspicious activity and individuals**
- Take note of the **two nearest exits** in any facility you visit
- Help others** if you are able to do so **safely**
- If you are in a **secure location**, stay there until law enforcement enters

Contact your local security POC for additional information (name, phone, email, etc.):



WHEN LAW ENFORCEMENT ARRIVES

- Remain **calm** and follow instructions
- Put down any items in your hands (i.e., bags, jackets)
- Keep hands **visible** at all times
- Avoid quick movements toward officers such as holding on to them for safety
- Avoid pointing, screaming, or yelling
- Follow responder's instructions when evacuating



cisa.gov/active-shooter-preparedness



AFTER the Encounter

- When possible, **debrief** with the person after things cool down and a reasonable amount of time has passed
- Offer a **nonjudgemental space** to talk through things, maybe sitting down with water or coffee
- Help the person **identify their triggers** and think through **other ways to express** their anger and frustrations
- **Re-establish boundaries** for the space (if needed) and **express care**
- ***If you mess up, own up to it.** Apologize. Tell the person you're sorry. We all make mistakes... it's okay. The point is to own them and learn from them.



BREAK THE CYCLES

AFTER the Encounter: For YOU!

- Take care of **your** physical needs —drink water, eat what you want to eat. Find somewhere you can relax and feel safe.
- Find someone to **debrief** with when you're ready.
- Talk (or write) about how you feel. What went well? What didn't? What can you learn from this?
- **Be kind to yourself.** Be proud of yourself for doing your best. Every instance is a learning experience!



Let us all move beyond self care and also practice **collective care** with our team members.



PRACTICE

PRACTICE

- Break up into **groups of 3-4 people**.
- **Your group can either...**
 - (1) Choose a couple common (or possible) **scenarios from your setting** to workshop.
 - (2) **Use the next slide** that has two scenarios for you to workshop together. Feel free to change the details/setting to better fit your context!
- **Apply** the principles, techniques, and strategies we've discussed. **What would you do? What would you say?** Feel free to flip back through your handouts for ideas!

PRACTICE

Someone with severe mental health issues: You are volunteering at a shelter and notice a woman who is talking loudly to herself. She is not well and is disturbing the other guests who are trying to rest. She is getting upset and begins to point at other people and yell at them. “You’re part of it!” she yells at someone. “You’re trying to keep my babies from me! First the government put a chip in me and now they’ve stolen my babies! And YOU are trying to keep them from me!” She begins to point at people and starts approaching others angrily. What would you do? What would you say?

Someone who is intoxicated: You are volunteering at the shelter when a white man stumbles into the crowded lobby. He is loud and belligerent. He appears drunk and when you get closer, you can smell alcohol. He is yelling about “people taking his job from him” and something about America. He is making people uncomfortable and is so drunk that he is bumping into people. What do you need to consider? If you decide to step in, how would you intervene? How would you position yourself? What would you do? What would you say? (Special considerations: What if he threatens you? What is he triggers you by saying disrespectful things about women or using racial slurs?)

Join us!

DONATE!

- Email **donate@opentablenashville.org** if you have items you would like to donate or to organize a donation drive.
- **Venmo:** OpenTableNash

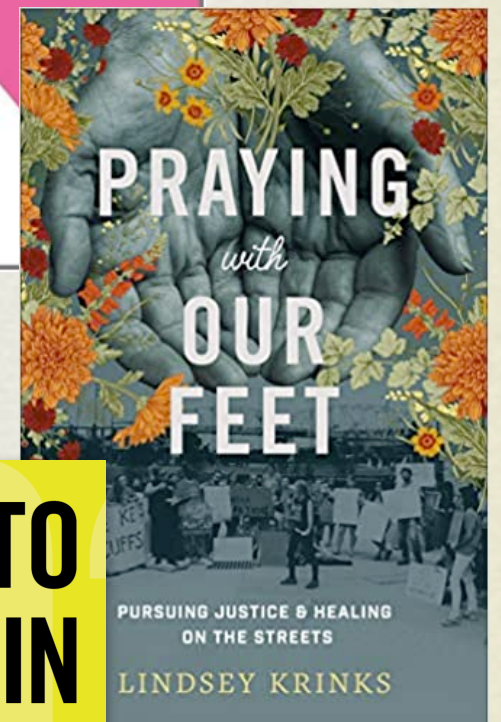
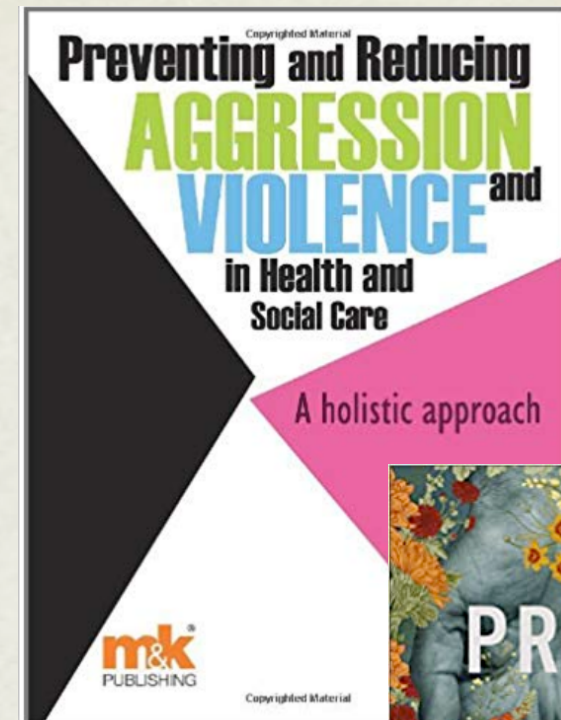
STAY INVOLVED!

- **Active Listening & Motivational Interviewing Training:** Friday, April 12th, 1:00-4:30 p.m.



Additional Resources

- “The tender, terrifying truth about what happened inside the Trader Joe’s Hostage Siege” - L.A. Times, 8/3/18
- “Anger can be contagious - here’s how to stop the spread” - NPR, 2/25/19
- Podcast with the highlights from this training: Search “Peace Talks Radio” wherever you get your podcasts and look for the episode from July 5, 2019 entitled, “Reconciling a Sexual Assault & De-escalating Street Conflict.” (The de-escalation segment begins at minute 29.)



**WHERE TO
TURN IN
NASHVILLE**

wttin.org

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