



Philippine Pediatric Society (PPS) Position Statement on Safeguarding Children in the Conduct of Active Attack Drills in Schools

Prepared jointly by: Committee on Digital Wellness and Emerging Media Technologies,
Committee on Mental Health for Children and Youth, and Committee on Child Protection

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Preparedness matters. But preparation for physical danger must not come at the cost of children's psychological safety.

Recent incidents of violence in Philippine schools have caused grief, fear, and an understandable demand for action. The Philippine Pediatric Society (PPS) recognizes the Department of Education's mandate and immense responsibility to protect millions of learners and school personnel. We appreciate DepEd's efforts to strengthen school safety. We share its goal: every school should have a clear plan and know how to respond in an emergency.

Clear plans matter, and calm practice can help people know what to do. However, the evidence on children's participation in active attack and lockdown drills remains limited, mixed, and overwhelmingly drawn from the United States. Announced, low-intensity drills may help students learn basic safety procedures.¹⁻⁴ Some studies have reported anxiety, avoidance, or a reduced sense of safety following drills. There is insufficient evidence that realistic or high-intensity simulations provide additional benefit. Given this uncertainty, nationwide implementation should meet a higher standard of practice.

For these reasons, **PPS believes that the planned nationwide active attack simulation involving learners should not proceed in its current form on August 25, 2026.** We respectfully call on the Department of Education (DepEd) to use the scheduled activity for non-simulated preparedness work while undertaking an urgent technical review of active attack simulation protocols involving learners.

This is not a call to abandon preparedness. It is a call to strengthen it. Any future student drill should be grounded in the best available evidence, developmentally appropriate, and trauma-informed,²⁻⁴ introduced through phased implementation in communities assessed as ready, and evaluated for both intended benefits and potential harms before broader use.

THE PHILIPPINE PEDIATRIC SOCIETY (PPS) RECOMMENDS:

1. Begin with a transparent assessment of school readiness and security.

Preparedness begins with knowing what is already in place, what is missing, and who is responsible for addressing each gap. Before involving children in any simulation, every school should **conduct and document an inventory of its structural and operational safety measures**, including access controls, doors and locks, alarm and communication systems, evacuation and shelter areas, family-reunification procedures, trained response teams, and available medical and psychological support.⁵ Schools should develop time-bound corrective plans and communicate their general findings to families and personnel—while withholding operational details that could compromise security.

2. Assess both individual and community readiness.

At the individual level, plans should provide accommodations, modified participation, alternative activities, or exemption for children with physical, sensory, developmental, intellectual, communication, or mental-health needs. At the community level, student drills should not proceed

in communities recently affected by school violence or other serious violence until a qualified multidisciplinary team with expertise in child and adolescent trauma and mental health has assessed readiness and identified the support required. In these communities, postponement or a calm, discussion-based preparedness activity may be the safer option.

3. Where student drills are undertaken, use only announced, low-intensity, developmentally appropriate, and trauma-informed approaches.

Parents and guardians should receive advance notice describing the drill's purpose, activities, and available support, with a clear option to request modified participation or exemption. Children should receive an age-appropriate explanation and be allowed to pause or stop without penalty. Drills **must not use deception, surprise, simulated gunfire, realistic weapons or injuries, or aggressive attacker role-play**. Children should not be instructed or expected to confront or stop an attacker as part of a drill. Any discussion of physical resistance should be approached cautiously and tailored to the learner's age, developmental capacity, physical ability, and circumstances. Every drill should include preparation beforehand, calm debriefing afterward, monitoring for distress, and timely access to appropriate support.^{3,4,11}

4. Place drills within a comprehensive prevention strategy.

Preparedness must go hand in hand with prevention. Drills must be supported by full and consistent implementation of DepEd's Child Protection Policy. Every school should have a functional Child Protection Committee, **safe, confidential, and child-friendly reporting channels**, and clear pathways for assessing, escalating, referring, and following up concerns involving bullying or cyberbullying, threats, weapon access, or significant distress or behavioral change. Children at risk should be connected promptly to appropriate mental-health, health, social-welfare, or law-enforcement services through a multidisciplinary process that prioritizes early support, proportionate escalation, and risk reduction. Prevention also requires trusted adults, responsible media and online practices, and the safe storage of firearms and other weapons.⁶⁻¹⁰

5. Develop Philippine guidance, then pilot and evaluate it.

DepEd is well positioned to convene a **multidisciplinary and multisectoral technical working group**. It should include experts in disaster risk reduction and emergency management, child development, pediatrics, trauma, and mental health, educators, guidance personnel, school nurses, and school leaders, child-protection, disability, and public-health specialists, law enforcement, and representatives of parents and young people. Together, the group **should adapt international evidence-informed guidance to the Philippine context**, establish developmentally appropriate and trauma-informed standards, train drill leaders, pilot protocols before nationwide use, and evaluate both preparedness and possible harm.^{1,2,11} No single profession can answer this alone.

Documentation can support accountability and improvement, but it should also protect children's privacy, dignity, and security. Where documentation is required, it should be limited to what is necessary, use non-distressing and de-identified materials where possible, and be shared through secure channels.^{5,12} Public posting on social media should not be required when materials could identify children or reveal security-sensitive details. The **clearest measure of success is whether children learned what to do while their physical and psychological well-being remained protected**.

Children should leave a drill knowing that adults have a plan—not believing that an attack is inevitable or that the burden of survival rests mainly on them. **Physical preparedness and psychological well-being are not competing goals**. Children deserve both.

PPS offers these recommendations in the spirit of constructive partnership. We stand ready to work with DepEd and its partners on a rapid, evidence-informed review and on Philippine guidance that is developmentally appropriate, trauma-informed, inclusive, and practical across different school settings.

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