Chapter 34
Crisis Intervention

Situational Crises
- Material or environmental
- Personal or physical
- Interpersonal or social

Maturational Crises
- Life cycle transitions: infancy, childhood, puberty, adolescence, adulthood, middle age, older adulthood, old age
- Other life changes: marriage, retirement, transition from student to worker
Crisis as Turning Point

- Crisis = turning point that results in new equilibrium, which may be similar to pre-crisis state, or more positive or negative

Crisis Intervention

- Crisis is self-limiting because disequilibrium is so uncomfortable.
- Crisis resolves itself, favorably or unfavorably, even without intervention.
- Working with another person increases likelihood of favorable resolution.

Sequence of Crisis

- Tyhurst’s three stages of disaster:
  - Impact
  - Recoil
  - Post-trauma
Sequence of Crisis - continued

- Caplan's four stages of crisis reaction:
  - Initial increase in tension
  - Further increase in tension and disruption of daily living when crisis is not quickly resolved
  - Increase in tension to depression levels if usual problem-solving techniques fail
  - Partial resolution of crisis with use of new coping skills, or mental disruption/disorder if new skills are not developed

Health Professional’s Role

- Help person in crisis understand what led to the crisis and guide him/her toward positive resolution
- Acute phase: restore the person to pre-crisis level of functioning as quickly as possible

Assessment

- Individual: precipitating event, perception, support, resilience, coping style, ability to handle problem, suicide potential
- Family: stressors, resilience, resources, coping skills, interpersonal styles
- Sociocultural: influence of culture on sources of distress a client experiences, symptomatology, interpretation of symptoms, coping methods
Nursing Care

Common diagnoses:
- Ineffective Coping
- Interrupted Family Processes
- Risk for Self-Directed Violence
- Anxiety
- Acute Confusion
- Spiritual Distress
- Sleep Deprivation
- Risk for Post-Trauma Syndrome
- Complicated Grieving
- Impaired Social Interaction

Nursing Care - continued

- Outcome criteria: determined in collaboration with client
- Planning/implementation: developed with client and family; focused on immediate problems; consistent with lifestyle/culture; time limited; realistic; mutually negotiated; provides for follow-up
- Evaluation: in long-term setting, review of implementation and outcomes

Origins and Risk Factors for Crisis

- Origins of crisis: situational, maturational
- Risk factors: intensity of exposure, preexisting psychiatric symptoms or diagnosis, previous trauma, family history of mental illness, early separation from parents, childhood abuse, poverty, cultural expectations, degree of threat to life
Balancing Factors

According to Aguilera, three balancing factors for resolution of disequilibrium are:

- perception of the event
- situational supports
- coping mechanisms

Crisis Intervention

Types of crisis intervention:

- Crisis counseling (brief, solution-focused therapy)
- Telephone counseling
- Assisting with environmental changes
- Anticipatory guidance (assistance in anticipation of the potential for crisis, thus averting it)
- Helping to develop social supports
- Critical incident stress management
- Disaster assistance

Critical Incident Stress Management

- CISM = integrative, comprehensive, multifaceted approach spanning time sequence of crisis

- 10 components:
  - Pre-event planning
  - Assessment
  - Strategic planning
  - Individual crisis intervention
Critical Incident Stress Management - continued

- 10 components: (con’t)
  - Large group crisis intervention
  - Small group crisis intervention
  - Family crisis intervention
  - Organizational/community intervention
  - Pastoral crisis intervention
  - Follow-up/referral

ABCs of Crisis Counseling

- A = Achieve contact (safety and security)
- B = Boil down the problem (ventilate and validate)
- C = Cope with the problem (predict and prepare)

ABCs of Crisis Counseling in Plan of Care

- A = Assessment
- B = Diagnosis
- C = Planning and implementation, including plan for follow-up (evaluation)
**Psychoeducation**

Take into consideration the client’s understanding of the event using:
- Tyhurst’s stages of disaster
- Roberts’ model of crisis intervention
- Critical incident stress management

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**Small Group Debriefing**

Small group debriefing process incorporates psychoeducation in each phase:
- Introduction phase
- Fact phase
- Thought phase
- Reaction phase
- Symptom phase
- Teaching phase
- Reentry phase

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**Nursing Self-Care**

Behaviors crucial to effective crisis work:
- Belief in a person’s capacity to grow and change
- Awareness of impact of repeatedly hearing horrible stories
- Developing outlets for stress, frustration, anger
- Dealing with fears and vulnerability
- Realistic expectations
- Respect for others’ timetable for crisis resolution
- Collaboration with others
Vicarious Traumatization

- Vicarious traumatization – condition in which psychological aftereffects are experienced by those who are not direct victims of the traumatic event.
- Commonly affects next of kin, injured and uninjured survivors, onlookers, rescuers, body handlers, health personnel, people responsible for disaster, coworkers, evacuees.

Resources

- [http://www.aaets.org](http://www.aaets.org)
  The American Academy of Experts in Traumatic Stress is a multidisciplinary network of professionals committed to the advancement of intervention for survivors of trauma. The Academy provides meaningful standards for those who work with survivors.
- [http://preparedness.asph.org/About.cfm](http://preparedness.asph.org/About.cfm)
  The Centers for Public Health Preparedness Resource Center is a free online repository of terrorism and emergency response training and educational resources developed by the CDC-funded Centers for Public Health Preparedness.