



Crisis Intervention

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Objectives

- Describe the three types of crisis
- List at least three causes of crisis
- Describe the four phases of crisis
- Explain the steps involved in crisis intervention
- List at least three local resources for training, education, and/or assistance with crisis intervention





Crisis



What is Crisis?

- Overwhelming emotional reaction to a threatening situation or stressful event in which a person's usual problem solving strategies fail to resolve the situation resulting in a state of disequilibrium
 - Struggle for equilibrium and adjustment when problems are perceived as insolvable
- Acute, time-limited



Crisis in Mental Health

- ‘Crisis’ in mental health refers not to a traumatic situation or event itself, but rather to a person’s reaction to it

Types of Crisis

- Developmental (Maturational)
- Situational
- Adventitious



Developmental (Maturational) Crisis

- Predicted times of stress in everyone's life
- Occurs in response to a transition from one stage of life to another
- Transient period which everybody experiences in the process of bio-psychosocial growth and development



Examples of Developmental (Maturational) Crisis



- What types of situations come to mind when you think about situational crisis?
 - Entry into school
 - Puberty
 - Leaving home
 - Marriage
 - Pregnancy
 - Child birth
 - Menopause
 - Retirement
 - Old age
 - Facing death of others and self

Situational Crisis

- Occurs in response to a sudden unexpected event in a person's life
- Critical life events evolve around experiences of grief and loss



Examples of Situational Crisis

- What types of situations come to mind when you think about situational crisis?
 - Loss of a job
 - Divorce
 - Death of a loved one
 - Abortion
 - Miscarriage
 - Severe physical or mental illness
 - Self
 - Loved one
 - Substance abuse
 - Sexual violence

Adventitious Crisis

- Not part of everyday life
- Unplanned and accidental resulting in traumatic experiences



Examples of Adventitious Crisis

- What types of situations come to mind when you think about adventitious crisis?
 - Natural disasters
 - Tornados
 - Hurricanes
 - Floods
 - Earthquakes
 - Fire
 - National disasters
 - War
 - Riots
 - Crimes of violence
 - Child abuse
 - Sexual assault
 - Domestic violence
 - Physical assault
 - Homicide



Who is Affected by Crisis?

- EVERYONE
 - Extent of 'perceived' crisis is dependent on the individual's:
 - Mental health
 - Past experiences
 - Social support
 - Age and development
- May encourage growth and change!



Impact of Trauma & Crisis Based on Age & Development

Young Children

- Irritability
- Poor appetite
- Sleep disturbances
- Regressive symptoms



Older Children

- Behavior problems at school
- Depression
- Somatic symptoms (i.e., headaches, stomach aches)
- Engaging in high risk behaviors



Adulthood

- Abuse of alcohol and drugs
- Feelings of hopelessness about the future
- Psychosocial pathologies (i.e., anxiety)
- Poor coping skills





Responses to Trauma/Crisis

Physical Responses

- Acute injury
- Chronic headaches/migraines
- Insomnia
- Panic/Anxiety attacks
- Eating disorder(s)
- Chemical abuse
- Suicidal ideation
- Other somatic complaints
 - Chronic abdominal pain
 - Non-specific pain

Social Responses

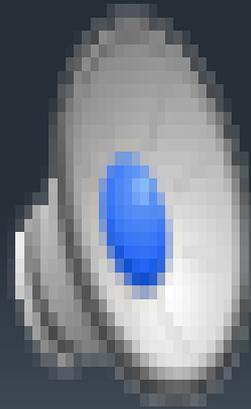
- Difficulties With:
 - Self-esteem
 - Relationships
 - Parenting
 - Sexuality
- Aggressive/delinquent behavior
- Antisocial behavior
- Developmental delays
- Family stress/conflict

Emotional Responses

- PTSD symptoms
- Dissociation
- Depression
- Anxiety
- Suicidal/Homicidal ideation

- Feelings of:
 - Helplessness
 - Fear
 - Guilt
 - Self-blame
 - Humiliation
 - Anger
 - Hopelessness

Emotional Crisis



Occupational/Academic Issues

- Impact on attendance
- Lost wages
- Lost productivity
- Decreased concentration
- Poor performance
- Loss of job/demotion



Stages of Crisis



Stages of Crisis

- Resembles stages of grief
- Individuals can skip a stage, get stuck in a stage, or move back and forth throughout stages
- Stages:
 - Outcry
 - Denial/Intrusiveness
 - Working through
 - Completion/Resolution

First Two Stages of Crisis

■ **Outcry**

- Earliest reactions after event
- Reflexive, emotional, behavioral
- Can vary depending on individual
 - Panic, screaming, shock, anger, defensiveness, moaning, flat affect, crying, hyperventilation

■ **Denial/Intrusiveness**

- Eliminates the impact of crisis through emotional numbing, dissociation, flashbacks, nightmares, etc.

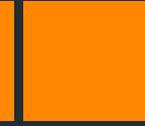
Last Two Stages of Crisis

■ Working Through

- Thoughts, feelings, images of crisis are expressed, acknowledged, explored, and reprocessed through adaptive and healthy coping skills

■ Completion/Resolution

- Can take months or years to complete
- Some may never complete this process
- Allows the individual to reorganize their life, and use the resolution of the trauma in positive ways
 - Many who successfully complete this stage reach out to others through volunteer organizations to give back and help others



Crisis Intervention

What is Crisis Intervention?

- Technique used to help an individual or family understand and cope with the intense feelings that are typical of a crisis
- Short-term
 - Usually limited to 4-6 week period after which resolution will be attained
- Focuses on solving of the immediate problem
- Aims to establish healthy coping pattern(s) and problem solving skills



Goals of Crisis Intervention

- Provide emotional and environmental support in a way that reduces the stress and risk
- Teach better, more constructive and effective ways to deal with stress or painful feelings

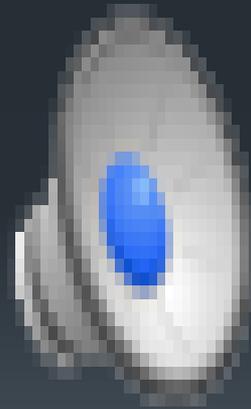


Who is Involved with Crisis Intervention?

- EVERYONE
 - Individual
 - Family/Friends/Support system
 - Medical Professionals
 - MDs
 - RNs
 - Social Work
 - Therapists/Counselors
 - Law Enforcement
 - Crisis Intervention Volunteers



Law Enforcement Role





Communication Techniques & Resources

- Be empathic and an active listener
- Non-judgmental attitude
- Maintain dignity & privacy of individual
- Facilitate participation and control, when able
- Respect choices
 - Cultural
 - Familial
 - Individual
- Provide information/education
- Remain professional

Empathy vs. Sympathy





Crisis Intervention Models

Three-Step Crisis Intervention

- Assessment
- Planning and Outcome Identification
- Implementation



Assessment



- **Perception of event**
 - What happened that led you to seek help?
 - How are you feeling now?
- **Coping mechanisms**
 - Suicidal?
 - Homicidal?
 - Plans?
 - What helps you feel better?
- **Support systems**
 - Who do you live with?
 - Who is available to help you?
 - Who is most helpful?
- Mental health status
- Previous history

Suicide Risk Assessment

Components	Protective Factors	Other Risks	Opportunities for Intervention
Thoughts	Coping skills	Mental illness	
Intent	Family support	Family history	
Plan	Social support	Current situation	
Access	Spirituality		
Past attempts	Reasons for living		



Other Considerations During Suicide Risk Assessment

- Promote safety
- Provide appropriate referral resources
 - Immediate
 - Long-term
- Engage family and friends, when able
- Be sensitive to emotions and reactions

Planning and Outcome Identification

- Assist individual in setting realistic goals to assist in returning to the pre-crisis level of functioning
- Establish desired outcome criteria for the patient using the problem solving approach



Implementation

- Assess for any suicidal/homicidal thoughts/plans
- Take steps to ensure patient safety and decrease anxiety
 - Intervene to prevent violence, if needed
- Listen attentively and encourage individual to discuss crisis situation
- Connect individual to resources and referrals



Additional Ideas & Tools

- Utilize a problem-solving approach
 - Do not be reactionary
- Identify needed social support (with input from individual) and mobilize the most needed first
- Develop useful interventions with input from individual
 - Needs to be acceptable to both individual and responder to be effective

10-Step Acute Traumatic Stress Management Protocol

- Assess for danger/safety for self and others
- Address any medical needs
- Introduce yourself, state your role, and begin to build rapport
- Help ground the individual by allowing them to share their thoughts, fears, concerns, and what happened
- Provide support through active listening
- Be empathic
- Normalize, validate, and educate
- Bring the person to present
- Develop a plan using a problem-solving process
- Provide resources and referrals

ACT Model

- A – Assessment/appraisal of immediate medical needs, threats to public safety and property damage
- C – Connecting to support groups, delivery of disaster relief and social services, and critical incident stress debriefing
- T – Traumatic stress reactions and post-traumatic stress disorder



Critical Incident Stress Debriefing and Management

- Used for frontline crisis workers who are exposed to gruesome and life-threatening situations
 - Suicides
 - Homicides
 - Natural disasters
 - Terroristic attacks
 - Hostage situations
- Allows worker to discuss traumatic event, promote group cohesion, and educate first responders on stress reaction and healthy coping techniques



Critical Incident Stress Debriefing and Management (cont'd)

- Typically occurs within 24-48 hours of event
- Can be done individually or with a group
- Should encourage individuals to be supportive of one another rather than critical



Minnesota-Specific Responses & Resources

MN CIT Officer's Association

- Provides law enforcement personnel and mental health professionals with information and training in how to safely and compassionately handle a person in a mental health crisis
- Training is based on the nationally recognized Memphis Crisis Intervention Team (CIT) model, which promotes the use of verbal de-escalation skills before using force when confronting a mental health crisis



Law Enforcement Officer Testimonial

- “The skills learned in this class are...not only applicable to mental health crisis situations, but are also applicable...in domestic violence situations, sexual assault investigations, drunk and disorderly situations, death notifications or dealing with an upset citizen.”



MN CIT Courses & Training Available

- 40-hour Certification Training
 - Goals include:
 - Providing advanced mental health awareness, communication techniques and de-escalation skills to help law enforcement when dealing with a person in a mental health crisis
- Half day – 4 hours CE credit, POST approved
 - \$75.00 per attendee
- One day – 8 hours CE credit, POST approved
 - \$150.00 per attendee

More from MN

- More police officers are getting special training to approach mental health crises with calm, not force.
 - <http://www.startribune.com/empathy-can-be-better-than-force-twin-cities-police-trainers-teach/297470321/>
- Agencies involved with CIT Training:
 - A total of 39 cities in 31 counties
 - St. Paul
 - Minneapolis
 - Golden Valley
 - Eden Prairie

Additional Resources

- Mental Health MN
 - <http://www.mentalhealthmn.org/find-support/resource-list/crisis-lines>
- National Alliance on Mental Illness Minnesota (NAMI)
 - <http://www.namihelps.org/support/crisis-resources.html>
 - Links to several fact sheets & additional resources



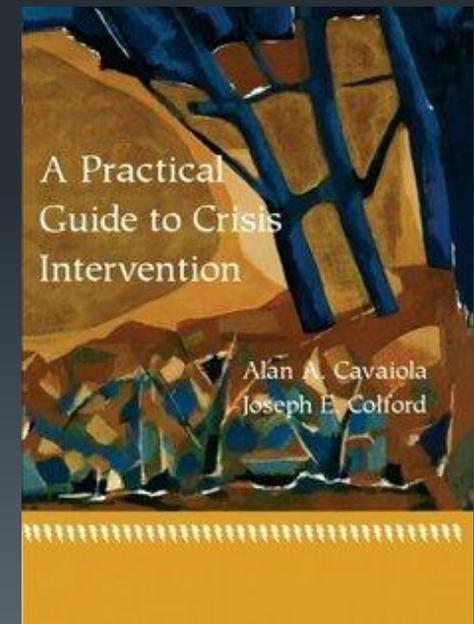
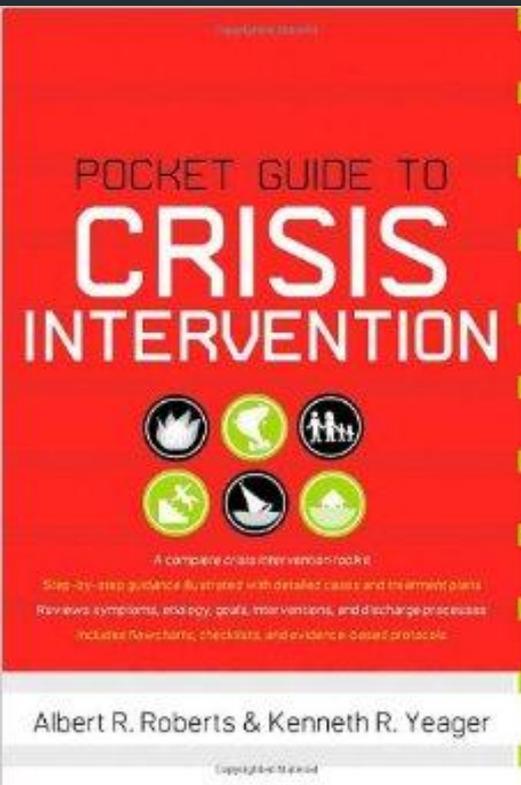
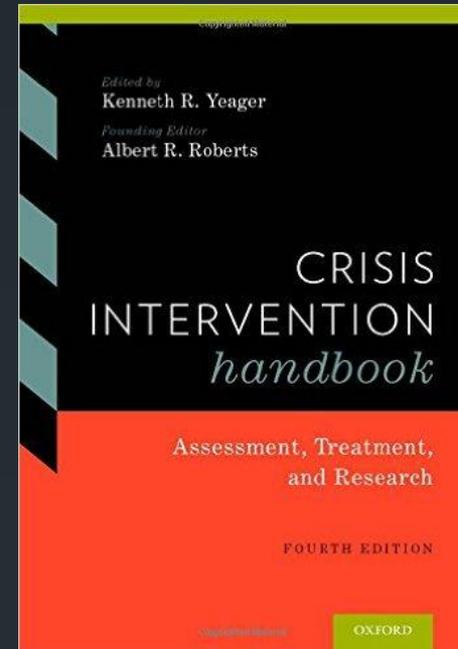
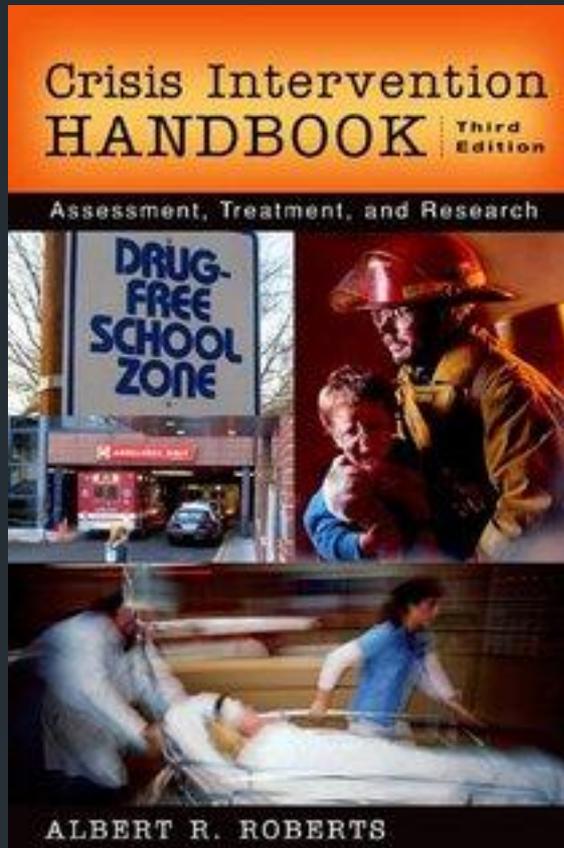
Mental Health MN Services

Advocacy	Mental Health Evaluations	In-home services	Homeless Shelters
Case Management	Medical Services	Support Groups	Military & Veteran Services
County Social Services	Employment Services	Northern MN Community Resources	Domestic Violence
Legal Services	Financial Assistance	Food shelves	Education & Referral

NAMI

- Metro Area Mental Health Crisis Response
 - Anoka: 763-755-3801, Carver/Scott: 952-442-7601
 - Dakota: 952-891-7171, Washington: 651-777-5222
 - Ramsey: adults - 651-266-7900, children - 651-774-7000
 - Hennepin: adults - 612-596-1223, children - 612-348-2233
- Urgent Care for Adult Mental Health (Ramsey, Dakota and Washington counties)
 - 402 University Ave. E., St. Paul - Walk-ins Welcome - 651-266-7900, also is a 24/7 Mobile Crisis Team and Crisis Phone Line
- National Suicide Prevention LifeLine 1-800-273-TALK (8255)
- Ramsey County Children's Crisis Response 651-266-7878
- Ramsey County Housing & Shelter Information - Coordinated Access to Housing and Shelter: 651-215-2262

Books







thank you!





Contact Information

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