

People often have an emotional response to the stress of a crisis. They might feel scared, anxious, or angry.

People respond differently to crises, even people in the same family. A crisis for one person may not be a crisis for someone else.

What causes a crisis?

Crisis is the situation of a complex system (family, economy, society) when the system functions poorly, an immediate decision is necessary, but the causes of the dysfunction are not known.

- **Situation of a complex system.** Simple systems do not enter crises. We can speak about a crisis of moral values, an economical or political crisis, but not a motor crisis.
- **Poor function.** The system still functions, but does not break down.
- **An immediate decision** is necessary to stop the further disintegration of the system.
- **The causes are so many, or unknown,** that it is impossible to take a rational, informed decision to reverse the situation.

Crisis has several defining characteristics. Seeger, Sellnow, and Ulme say that crises have four defining characteristics that are “specific, unexpected, and non-routine events or series of events that [create] high levels of uncertainty and threat or perceived threat to an organization’s high priority goals.” Thus the first three characteristics are that the event is

1. unexpected (i.e., a surprise)
2. creates uncertainty
3. is seen as a threat to important goals

Venette [3] argues that “crisis is a process of transformation where the old system can no longer be maintained.” Therefore the fourth defining quality is the need for change. If change is not needed, the event could more accurately be described as a failure.

Apart from natural crises that are inherently unpredictable (volcanic eruptions, tsunami etc.) most of the crises that we face are created by man. Hence the requirements of their being ‘unexpected’ depends upon man failing to note the onset of crisis conditions. Some of our inability to recognize crises before they become dangerous is due to denial and other psychological responses HJ that provide succor and protection for our emotions.

A different set of reasons for failing to notice the onset of crises is that we allow ourselves to be ‘tricked’ into believing that we are doing something for reasons that are false. In other words, we are doing the wrong things for the right reasons. For example, we might believe that we are solving the threats of climate change by engaging in economic trading activity that has no real impact on the climate. Mitroff and Silvers

[5] posit two reasons for these mistakes, which they classify as Type 3 (inadvertent) and Type 4 (deliberate) errors.

The effect of our inability to attend to the likely results of our actions can result in crisis.

From this perspective we might usefully learn that failing to understand the real causes of our difficulties is likely to lead to repeated downstream ‘blowback’. Where states are concerned, Michael Brecher, based on case studies of the International Crisis Behavior (ICB) project, suggested a different way of defining crisis as conditions are perceptions held by the highest level decision-makers of the actor concerned.[6]

- threat to basic values, with a simultaneous or subsequent
- high probability of involvement in military hostilities, and the awareness of
- finite time for response to the external value threat

How to know when someone is in crisis

Some signs that a person may be in crisis include:

- physical: sweaty palms, looking flushed, pounding heart, rapid breathing, shaking, diarrhea, vomiting
- thinking: confused, can’t concentrate, can’t make decisions, memory loss
- emotional: anxiety, mood swings, withdrawal, despair, helplessness, agitation, panic
- behavior: broken sleep, antisocial behavior, sudden outbursts of anger, crying, drug or alcohol misuse, changes in appetite.

People can often feel:

- bewildered: ‘I’ve never felt like this before’
- scared: ‘I feel nervous, worried’
- confused: ‘I can’t think straight’
- immobilized: ‘I feel stuck and nothing helps’
- despairing: ‘It all feels hopeless’
- angry: ‘How dare he die and leave me’
- apathetic: ‘I just don’t care any more’
- overwhelmed: ‘I don’t feel in control’
- a sense of urgency: ‘I need help now!’
- that the situation is not fair: ‘Why is this happening to me?’

How children react

The feelings children have in a crisis are similar to adults but they often show their feelings in actions rather than words.

They may:

- be scared of things linked with the crisis, e.g. loud noises, dogs, strangers
- fear there will be crises in other areas of their life as well
- lose interest in school or other activities

- act as though they are younger
- have behavior problems or problems with friends
- have disturbed sleep or poor concentration.

Children react differently at different ages.

Reactions can include:

5-10 years

Aggression, confusion, competing for attention, avoiding school, nightmares, poor concentration, tummy aches, headaches, fear of the dark, fear of being hurt or left alone

11-13 years

Changes in appetite, broken sleep, antisocial behavior, school problems, anxiety, aches and pains, skin problems, fear of losing friends and family, acting as if it hasn't happened.

14-18 years

Physical problems (rashes, bowel problems, asthma attacks, headaches), changes in appetite and sleep, lack of interest in things they usually enjoy, lack of energy, antisocial behavior, poor concentration, guilt. Some of these are part of the ups and downs of this age too.

In a crisis, children have similar feelings to adults. They often show their feelings in actions rather than words.

Keep up youth in a normal routine, even if it's just taking out the rubbish. It will help them feel safer.

Be positive about the future. Youth need to believe things will get better. Encourage them, but don't make false promises.

CAUSES OF CRISIS

Following from our considerations of crisis focus, crisis definition, and cumulative effects, let us now focus our attention on causes and effects. Figure 4 indicates that our question is, "What could cause a crisis like this one?" It is important to see that the question is not "What did cause?" but rather, "What could cause?" For example, what could cause someone to want to kill himself? What could cause someone to become extremely upset or hysterical? What could cause a teenager to want to run away from home? What could cause someone to want to quit his job? What could cause someone to abuse or misuse drugs or alcohol?

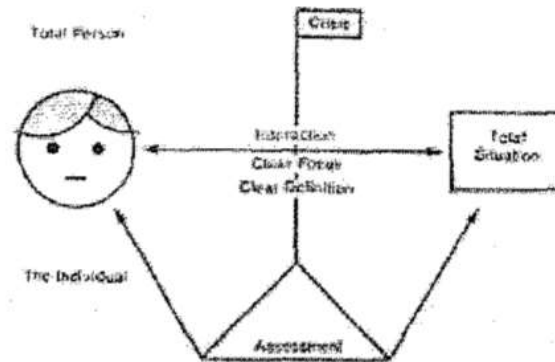


FIGURE 4. The "assessment of" develops an understanding of what happened, what is happening, and what is likely to happen, leading to the formulation of an intervention hypothesis

The focus on “could cause” is, on one hand, a relatively simple notion but, on the other hand one that goes against our usual way of thinking about problems. Typically, we look at a problem and want to know in detail, the situations, circumstances and events leading to the specific problem. In crisis intervention, however, we need to have in mind a set of likely causes of a variety of crisis situations. When we are dealing with a person in crisis, we need to know the most likely causes of a crisis such as the one we now see. For example, the three most likely causes for crises involving threats of suicide are: severe marital or family difficulty or disruption, having done something or having experienced a situation that causes extreme feelings of guilt or worthlessness, or some external event that threatens an individual’s social and/or economic well- being. For each type of crisis situation with which we deal, there are one or more likely causes. As we look at the individual and his crisis, we want to consider the kinds of things that probably have caused his crisis.

Understanding the possible causes for crisis reinforces the social interaction characteristic of this crisis intervention model. The model argues that crises always involve disruption or conflict within the interaction between the individual and his total situation. Possible causes of crises, then, always relate to factors, situations, conditions, and so on, that cause conflict or disruption in the interaction. As we know, crises are caused, or “set off,” by precipitating events. Our own life experience, our experience with people in conflict, our supplementary reading, and our understanding of precipitating events help us understand the kinds of things likely to cause a variety of crisis situations. If a teenager runs away from home, he has probably experienced a “blow up” with his parents; has had a significant problem at school or with one or more of his friends; or has been tempted by the opportunity to be on his own or with his girl friend or boyfriend. If a child appears to be extremely fearful and apprehensive on his first day of school, the likelihood is that he is afraid to move out from the protection and shelter provided by his mother. As you encounter various crisis situations, it becomes increasingly less difficult to speculate about the possible problems and factors in an individual’s interaction that were sufficient to cause the crisis.

We see the crisis and have a good understanding of the situations, circumstances, and events that could cause this kind of problem. Our next step is to look carefully at the individual and his total situation in order to discover what caused his particular crisis. Knowing that gives us two special advantages. First, we know “what a cause looks like.” This point may seem trivial, but it is important to be able to recognize a cause when we see it or are told about it. People in crisis are frequently unable to tell us what happened or to explain what caused the crisis situation. They tend to attribute causality to situations or circumstances that are either too far removed from the crisis to have caused it or else are only incidentally related to it. For example, a young man becomes extremely tense and depressed. We ask him, “What happened?” He says, “I don’t know. I have never been a very happy person and have been nervous since I was a child. It must have

something to do with my background.” Our understanding of crisis and our orientation to precipitating events tell us that, although what he says is probably true, this does not explain why he suddenly became tense and depressed. Something must have happened to precipitate the present crisis. This understanding leads us to ask additional questions and helps us keep him focused on the present situation and what happened to make things worse today. We would probably ask if anything unusual happened at work, at school, with his family or friends, and so on. With our understanding of possible causes, we can help him discover circumstances that might have caused his present crisis. This helps him focus on the real problem instead of on possibly irrelevant or tangential events or circumstances.

A clear notion of the most likely possible causes of crisis also enables us to help people think in a relevant way about what happened when they are feeling confused, somewhat disoriented, or are having difficulty organizing their thinking and feelings. Moreover, the individual will develop feelings of security and trust because we understand what causes people to find themselves in crisis and are able to understand how things got that way.

Let us emphasize a point that may be easily overlooked. Since the crisis developed now or at least in the immediate past, the cause or at least a major portion of the cause also occurred in the immediate past. As we work with people in crisis, we will remember the significance of the precipitating event, and we will continue our search for it until we have found it. In crisis intervention, our commitment to the individual is in part an implicit agreement to continue our involvement with him until the crisis is resolved and until both of us understand what happened.

UNSEEN EFFECTS

The final phase of the assessment comes after we have developed an understanding of the cause or causes of the individual’s crisis. Our understanding of possible causes includes “possible effects.” An example may serve to clarify the point. Suppose your married daughter calls you one afternoon, and she is quite upset and crying. From some of the things she says, you get that fear in the pit of your stomach that comes with recognition that someone may be suicidal. At a minimum, she is confused and hysterical. We have some ideas about what might have caused

these intense emotions and feelings. In addition, we know that people who become that upset are very “caught up” in their own feelings and emotions. Frequently, one effect of this intense self-concern is to forget or to be unable to deal with other responsibilities, for example, the care of young children. As you respond to your daughter and her crisis, discussion about her children may not develop spontaneously. Our knowledge about this kind of crisis, though, should prompt us to inquire about the children. Where are they? Who is taking care of them? We know that one possible effect of the mother’s crisis may be her unintentional neglect of her children. It is our responsibility to be aware of this possible effect of her crisis and to check out the situation.

As you think about the possible causes of a variety of crisis situations, you begin to develop notions of possible effects or undesirable situations that frequently accompany such crises. Considering and thinking about this dimension of crisis intervention will stimulate your imagination and enable you to foresee possible consequences by drawing on your own experience and common sense.

Brenda, age nine, is in the middle of a very complicated crisis. Do you remember the little poem about the girl with the curl in the middle of her forehead? When she was good, she was very, very good, and when she was bad, she was horrid. Well, this describes Brenda, except that she was terrible most of the time. She would not behave on the school bus, was always getting into fights with other children, would not do her

schoolwork, almost never obeyed her teacher, and was undoubtedly the biggest problem in her elementary school. She either could not or would not stand still, sit still, or be still. For the third time that week, her teacher bolted into the principal's office, saying, "It's Brenda again! She came back inside at recess and took every single pencil in the room and did something with them. I don't know where they are. We can't have school without pencils. I've had it! Either she goes or I go!" The teacher had said that before, the principal believed that she really might do it this time. The pencil incident was the final straw. The principal had a real crisis on his hands. To placate the teacher, and with no better ideas occurring to him, he expelled Brenda until her parents could give some assurance that her behavior would improve. The unseen effects of his action were numerous. The teacher was still thinking about Brenda when she returned home that evening. By that time, she had begun to see some humor in the pencil episode, and she wondered if expelling Brenda might not have been excessively harsh. She knew that Brenda had specific learning disorders and had a lot of difficulty controlling her emotions and behavior. She was preoccupied about it that evening and became fairly nervous and irritable. Her husband's efforts to reassure and comfort her just ended up in a big fight. Things got so bad that even her own teenage children got involved in the argument. The teacher and her family finally got things worked out that evening and came to the conclusion that the principal had overreacted and probably did not know what he was doing, anyway. The teacher came back to school the next day convinced that the principal was incompetent and blaming him for the impulsive way with which the problem had been dealt.

The superintendent of the school district learned about the episode and called the principal in for a conference. As it turned out, the principal's action was probably appropriate, but he should have advised the superintendent before taking such drastic action. The principal said, "I just forgot. It was the third time that week that this situation had come to my attention, and I just took action without thinking things through very clearly."

Now what happened to Brenda? When her parents learned she had been expelled, they were even more convinced that the school did not understand their daughter and did not really care about what happened to her. They had been involved in many conferences at school and were receiving help from the local mental health clinic. What do those people expect from us? We are doing everything we can possibly do. Do they want us to beat her? How do they expect us to solve the problem when the professionals at the mental health center don't know how to solve it? The parents had this discussion at the supper table, and Brenda's brothers and sisters thought the pencil episode was very funny. They could just see Brenda's teacher storming into the principal's office and telling him about the incident. Brenda? She had a good supper, got a vicarious satisfaction out of seeing her parents so angry with the school, enjoyed the attention from her brothers and sisters and their amusement with her prank, took a nice hot bath, and went to sleep, dreaming about whatever nine-year-old girls dream about.

The principal's effort to deal with the crisis had many unseen effects. Interestingly, however, his action had little, if any, effect on Brenda. What was the cause of the crisis? Of course the cause was Brenda's behavior at recess. The principal's intervention was directed at the cause of the crisis. His hope was that his action would lead to a change in Brenda's behavior, but he probably only served to reinforce her undesirable behavior pattern. As we intervene in crises, thinking about the unseen effects of the crisis and of our intervention will increase our effectiveness, and perhaps more importantly, careful attention on unseen effects will decrease the likelihood that our intervention will make things worse. In crisis intervention, sometimes we will help, sometimes we will not help, but we want to do everything we can to be sure that we do not make matters worse.

IN SUMMARY

To summarize the assessment set, we are clearly focused on the individual's crisis. We have it clearly defined. We have assessed the individual and his total situation sufficiently to develop a "picture" of what is happening. We have developed a causal explanation of the crisis that includes the precipitating event, and we have explored the cumulative and the unseen effects. Basically, we are focused on the crisis and have a good idea about what is going on, what happened, and what might happen. In addition, we have been sufficiently involved with the individual to enable him to develop a similar understanding of what is happening, what happened, and what is likely to happen. Now we are ready to develop our intervention hypothesis-our possible solution.