

## Professor's Notes

### Week Four: Procedure for Crisis Care and Intervention

Though human crises are never simple, it is essential that the crisis care giver have a relatively straightforward and efficient model of intervention. Having an established procedure to follow is vital to crisis intervention and pastoral care effectiveness. An intervention is a logical and orderly process. *"Step-by-step the intervener assists the sufferer in moving from a state of disequilibrium to at least his or her pre-crisis level of functioning."*<sup>1</sup> Of course, with divine help, recovery from crisis is not merely a restoration to a pre-crisis state, but to a deeper state of maturity. It is this theological perspective that leads Siang-Yan Tan to describe Post Traumatic Stress Disorder, as Post Traumatic Stress Growth.

Obviously, the time to develop a procedure is before attempting to intervene. Every action and every interaction must be thoughtful, measured, biblical, and purposeful. A haphazard approach would court disaster for the victim and the caregiver on many levels.

### A-B-C MODEL OF CRISIS INTERVENTION

This A-B-C of crisis intervention was first formulated by psychiatrist **Warren Jones** (1968) "The ABC Method of Crisis Management"

The ABC method has three elements:

- A. **Achieve** contact with the person;
- B. **Boil down** the problem to its essentials;
- C. **Coping** actively with the problem

It was developed as a technique of helping people in crisis. This is a problem-focused approach and is most effectively applied within four to six weeks of the precipitating event.

#### KNOW YOUR ABC'S

The ABC method has three elements:

- A. Achieve contact with the person;
- B. Boil down the problem to its essentials;
- C. Coping actively with the problem

"The phases are not linear but are best understood as a weaving that leads to a tapestry."<sup>2</sup> In other words, although the ABC model of crisis intervention is presented as a three-stage approach, in practice the components of any one of the stages could be used throughout an interview. "Several steps may be given at one given time, or movement backward to a prior stage may often take place."<sup>3</sup>

### ACHIEVING CONTACT With the Person in Crisis

The first issue of significance is the establishment of a relationship of trust. *"The initial step for helping individuals in crisis is to achieve contact –to establish an empathic relationship."*<sup>4</sup>

<sup>1</sup> Greenstone & Leviton. *Elements of Crisis Intervention*. 2<sup>nd</sup> ed. Pacific Grove, CA: Brooks & Cole. 2002. Pg 7.

<sup>2</sup> Kanel, Kristi. *A Guide to Crisis Intervention* 3<sup>rd</sup> ed. NY: Brooks & Cole Publ. pg. 1pg. 30

<sup>3</sup> Switzer, David. *Minister as Crisis Counselor*. Nashville: Abingdon Press. 1974. Pg. 80

<sup>4</sup> Stone, Howard, *Crisis Counseling*. 3<sup>rd</sup> ed. 2009. Pg. 30.

A solid supportive relationship not only serves to help troubled people to feel comfortable but also becomes the means through which the minister can move them from catharsis (release of emotion) to action.

A relationship of trust and empathy is no less important in crisis intervention than in any other form of pastoral care, but because persons in crisis are usually less defensive, less time and effort usually required to establish it. In establishing relationships, crisis intervention helpers use the basic relation-building skills we discussed in the last section.

Achieving contact is what we have been working on when we discussed the skills of empathy, listening, and attending. These are basic skills to assist in making contact with the crisis person at a personal level.

### **Summarization:**

The key purpose to summarization is to help another individual pull his/her thoughts together. A secondary purpose is to check on whether you as a helper have distorted their frame of reference. Summarization is reflective of the empathic response.

Remember that the interview process does not proceed in a linear fashion; the various attending skills can be interwoven as appropriate. As the client begins to feel rapport, trust and openness follows, allowing the interview to proceed. Before delving into the individual's personal world, the crisis care giver must achieve this personal conduct.

## **BOILING DOWN the Problem to its Essentials**

The second step of the A-B-C method of crisis counseling involves reducing the problem to its essential elements. This step requires responding to people in such a way that they can define in their own minds what has happened, what they are feeling, and why. The boiling down phase calls upon the counselor's skills of **Responding** and **Focusing**.

## **RESPONDING**

The divine design of humans by their creator necessitates the need for human interchange. In Genesis we are told that though Adam was occupied in relating to animals as he was categorizing each creature by name, God affirmed that it was not good that man (human) should be alone. In other words, human is not complete when not in engaged in that relational interchange within itself.

Responding is the ability to let the person know you can understand his or her perspective. It entails providing feedback that helps them make changes in their lives.

The minister has already begun responding to persons in crisis while Achieving Contact (phase A), but during the boiling-down phase (B) care giver will have fewer and shorter periods of only listening.<sup>5</sup>

To go beyond attending and listening and to begin boiling down the problem to its essentials, it is necessary to distinguish between facilitative and non-facilitative ways of responding.

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<sup>5</sup> Stone, Howard, *Crisis Counseling*. 3<sup>rd</sup> ed. 2009. Pg. 35.

Here are some not-so-helpful ways of responding to those in crisis shared by Stone<sup>6</sup>:

- **Quick Advice:** Making suggestions only ten minutes after a person starts talking does not take seriously what the other has to say or the complexity of the issues involved.
- **False Assurance:** It is inappropriate and unauthentic to promise what is impossible to predict.
- **Clichés:** Responses ought to be specific, clear and individually tailored to the issues about which the troubled person is talking. Clichés usually end up belittling the individual instead of building them up.
- **Questions:** Too many questions tend to put people on the spot and narrow their range of expression.
- **Judgmental Pronouncements:** communicating statements like, “That’s Dumb...”
- **Psychoanalysis:** Deal with the immediate not the underlying issues.
- **Debating or Arguing:** This usually creates distance, not closeness.
- **Seeking Personal Release:** Sharing your own problems for resolution is not appropriate. Seek help somewhere else.

Perhaps the best way to develop effective, facilitative responding skills is to learn Mirroring. **Mirroring** is reflecting back in a sentence or two the essence of what the other person has shared: “I hear you saying you feel low (reflects the feeling) because you lost your job (reflects the content).”

Features of Effective Response<sup>7</sup>:

- **Specificity:** Vague and general responses are hard for people to apply. Compare: “You’re too aggressive” to “You speak too loudly and interrupt people frequently”
- **Open-Ended Questions:** They require more than a simple yes or no response.
- **Describing Rather Than Evaluating:** Describe the feeling and action rather than labeling the person.
- **Responding with Immediacy:** Give frequent feedback at appropriate times.
- **Brevity:** Limit most responses to a sentence or two whenever possible.
- **Checking for Understanding:** If there is uncertainty have them rephrase what is being said.
- **Pauses:** Pauses allow for self-reflection. It also gives opportunity for the Holy Spirit to speak both to you and to them.

## FOCUSING

Often people who find themselves in the midst of a crisis find it difficult to see clearly. Their perspectives are usually tainted by the apparent enormity of their situation. There are also occasions when they are not even sure what may have brought on their situation. For them the precipitating event and its full impact may be unidentifiable.

Focusing helps these individuals to identifying specific and relevant facets to the crisis. It also includes filtering out details that may be unrelated to the crisis. There can be times then people will relate information that is meaningless to the situation that they do not know is meaningless.

Once the person’s perceptions and frame of reference regarding various situations are understood, the crisis worker is in a position to guide them into new ways of thinking. Once the

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<sup>6</sup> Stone, Howard, *Crisis Counseling*. 3<sup>rd</sup> ed. 2009. Pg. 35-37.

<sup>7</sup> \_\_\_\_\_. Pg. 35-37.

thinking begins to change, subjective distress will begin to diminish, coping skills can then be implemented and, and functioning will increase.

Boiling Down the Problem is also the phase in which the crisis intervener will need to make ethical checks. There are some issues in the crisis that may include some ethical implications and must be assessed either directly or indirectly. However, in order not to appear as a prosecuting attorney, the crisis worker will need to extract the information in a fluid and relevant manner. Pertinent questions should be weaved in the natural flow of the conversation.

Some of the issues would include:

1. Suicide check: Because people in crises are vulnerable, overwhelmed and confused, suicide often becomes an alternative for them. Assessing the suicidality particularly if the person is depressed or impulsive. We will talk about suicides later in this course.
2. Homicidal / Abuse Issues. In many states, mental health workers and even pastors are required to report child and elder abuse and any other suspicion that the individual may harm someone. The issue of abuse will be discussed later in this course.

## **COPING ACTIVELY with the Problem**

The last step of the ABC model is concerned with the person's coping behavior -past, present, and future. Past coping success can be built upon to help the person weather the present and future difficulties.

Stone provides pro-active steps for coping with the crisis<sup>8</sup>:

- **Establishing Goals:** The goal of crisis counseling is action. The goal determines the direction in which the care will proceed and toward which the courses of action will be aimed.
- **Taking Inventory of Resources:** Internal, external and relational resources
  - **Internal:** *Personality, Education, Spiritual Maturity, Emotional Intelligence*
  - **External:** *Support Groups, Shelters, Financial, Legal and Medical Agencies, Literature (Bibliotherapy)*
  - **Relational:** *Friends, Family, God, Church Community*
- **Formulating Alternatives:** The next step is to help them consider alternative courses of action with which they can take to reshape their lives. Brainstorming alternative courses of action will help facilitate the established goals. It may be wise to choose one to two alternatives upon which to embark, just in case the first option does not prove to be beneficial.
- **Committing to Action:** The person will need to challenge to act upon one or more of those alternatives. Action must be immediate. Action counters the paralysis of crisis. Thoughtful yet decisive action leads to growth.
- **Evaluating:** Evaluate the actions, goals, and growth. This should be continual to assure that a rhythm of continual behavior has been established. It is also a periodic checkpoint to gauge the relevance of the goals and the efficiency of the plans of action.

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<sup>8</sup> Stone, Howard, *Crisis Counseling*. 3<sup>rd</sup> ed. 2009. Pg. 40-45.

In addition to the classic ABC model of intervention there are slightly more detailed models of crisis intervention used to work with individuals in crisis. The first is the so-called SAFER-R model, developed by George Everly Jr.<sup>9</sup> The second approach is a hybrid developed from several models outlining the steps and the proper sequence involved in the process of crisis intervention. In our notes, we will be elaborating in greater detail on the latter model. However, for reference here is the SAFER-R Model:

#### The **SAFER-R** model

This model uses the initial letters of its six steps to assist memorization:

- S: Stabilize the person in crisis by meeting basic needs and mitigating the immediate stressor.
- A: Acknowledge the seriousness of the event and the person's reaction to it.
- F: Facilitate the person's understanding of the event; attribute their reaction to the event itself and not to their personal weaknesses.
- E: Encourage effective coping, which may involve teaching stress management tools and/or identifying external support or coping resources.
- R: Recovery.
- R: Referral, when needed for longer-term therapy.

You can clearly see the ABC Model of Intervention interwoven in this model.

#### **SIX STEP MODEL FOR CRISIS INTERVENTION**

1. Define the Problem
2. Ensure Safety
3. Provide Support
4. Examine Alternatives
5. Devise a Plan of Action
6. Develop Commitment

##### **Step 1: Define the Problem**

Explore and find the problem of the person's point of view. Use active listening including open-ended questions. Attend to verbal and non-verbal messages.

#### **SIX-STEP MODEL**

*"The first three steps of defining the problem, ensuring safety and providing support, are more listening activities than they are actions.*

*The final three steps of Examining Alternatives, devising a plan of action, and developing commitment are largely action behaviors on the part of the counselor.*

This step is simply to define and understand the problem. The challenge is to see the crisis in two ways. See the crisis as it is (apart from the person's subjective distress) and also see it as the person perceives it.

##### **Step 2: Ensure Safety**

Assess the lethality, criticality, immobility, or seriousness of threat to the person's physical and psychological safety. If necessary, ensure that they are made aware of alternatives to impulsive, self-destructive actions. It is imperative that the minister keep the person's safety in the

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<sup>9</sup> Everly, George, Jr. *Pastoral Crisis Intervention II*. NY: International Critical Incident Stress Foundation. 2005

forefront. In counseling, “Client safety” is defined as: *“Minimizing the physical & psychological danger to self & others”*

### **Step 3: Provide Support**

Communicate to them that you are a valid support person. Demonstrate (by word, voice, & body language) a caring, positive, personal involvement with them during this critical time in their life. This support step provides an opportunity for the worker to assure the individual that *“here is one person who really cares about you.”*

This requires **Authenticity, Respect, Empathy** and unconditional and positive **Acceptance** of the person, whether they can reciprocate it or not and whether they are deserving of it or not.

### **Step 4: Examine Alternatives**

Assist the person is exploring the choices he or she has available. Facilitate a search for immediate situational supports, coping mechanisms, and positive thinking. This step addresses an area where both individuals often neglect- exploring a wide array of appropriate choices available to them. Many times, crisis victims in their immobile state do not adequately examine their best options. Some actually believe there are no options. In this step we help them recognize that there are many alternatives available and that some choices are better than others, and some are more difficult than others.

We can help them see alternatives in three ways:

1. *Situational Support*: These are people known to the person in the present or past, which might care about what happens to the them.
2. *Coping Mechanism*: These are the actions, behaviors, or environmental resources the they might use to help to get through the present crisis.
3. *Positive & Constructive Thinking Patterns*: These are ways of thinking that might substantially alter their view of the problem and lessen the their level of anxiety and stress.

### **Step 5: Devise a Plan of Action**

Assist them to develop a realistic short-term plan that identifies additional resources and provides coping mechanisms –providing definite action steps that they can own and comprehend. This step is an outflow of Step 4.

The plan should focus on systematic problem solving for the individual. The central issues in planning are their *control* and *autonomy*.

Because no one but God is omniscient or omnipotent, attempting to control unmanageable circumstances or other people will crush one’s well-being, because that is not what we were made to do.

The truth is only God is in control. A person only has control for themselves. The belief that one can control others or circumstances will foster stress and weariness. And leave a crisis victim stuck in their issue.

#### **DEVISE A PLAN OF ACTION**

A plan should...

1. Identify additional persons, groups, and other referral resources that can be contacted for immediate support.
2. Provide coping mechanisms – something concrete and positive for the client to do now, definite action steps.

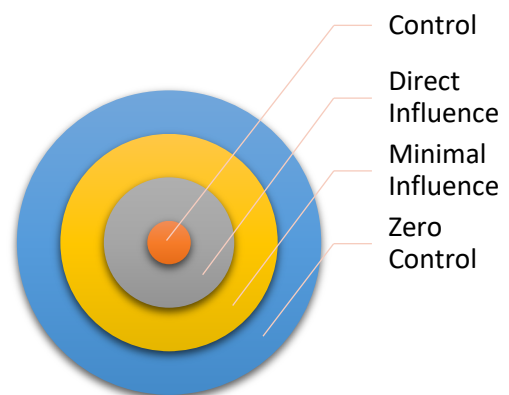
It is similar to Stephen Covey's 7 Habits of Highly Effective People, "Circle of Concern vs Circle of Influence"<sup>10</sup> Everyone has a circle of concern and a circle of Influence.

- Circle of Influence: Things you can control
- Circle of Concern: Things you worry about

In reality, most people's circle of influence is smaller than their circle of concern, which is a problem. Because Influence is our power to control outcomes. So how do you grow the circle of influence?

- Focus on YOUR actions and YOUR choices.
- Recognize the things you can control
  - Your actions
  - Your character
  - Your choices
  - Your goals
  - The way that you react to all things you cannot control
- Recognize the things that are outside of your control
  - Other people's actions and choices
  - The economy
  - The weather
  - The environment
  - The past precipitating event
  - The initial fallout from the crisis

By helping the individual to focus on the things they can control, they will have more peace, success and develop their ability to influence others by the example they set. This video link below elaborates on the challenge of filtering out those things that are in a person's life that may need to be set aside in order for them to move forward toward well-being. Circle of Influence Video:  
<https://www.youtube.com/watch?v=scZYignY3rU>



The reasons for having the crisis survivor to identify what they can control and what they need to surrender to others and to God, is to help them to restore their sense of self-control and to ensure that they do not become dependent on support persons such as the pastor.

### **Step 6: Develop Commitment**

Help the person to commit him or herself to definite positive action steps that they can own and realistically accomplish or accept. Step 6 flows from Step 5 and the issues of control and autonomy apply equally to the process of obtaining an appropriate commitment.

If the planning step is effectively done, the commitment step is apt to be easy. Many times the commitment step is brief and simple. It consists of asking the individual to verbally summarize the plan: "Now that we have gone over what you plan to do next time you start to get angry with her, summarize for me what actions you will take to ensure that you do not lose your temper and what you will do to make sure you keep it from escalating into another crisis."

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<sup>10</sup> Adapted from *The Seven Habits of Highly Effective People* by Stephen R. Covey, Simon & Schuster 1992.