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Social Work and Crisis Intervention: practice, theory and research

In the fields of social works the significance of crisis psychology is growing and in the training of **social workers** in the United Kingdom and elsewhere the component of crisis psychology is included more frequently. But there are few textbooks that seek to introduce students to a broad sweep of the field and so this text has been prepared with this aim in view.

The classic formulation of crisis intervention as a technique is that of Gerald Caplan on preventive psychiatry (1965). The method's origins, therefore, are in mental health work, and on prevention rather than treatment of illness. Parad, H. J. and Parad, L. G. describes the development process (1990b: 12-16). Eric Lindemann's (1944) paper dealt with grief reactions in various groups of patients, showing how people coped with bereavement crises. They managed better if they had coped with previous crises in their lives, less well if they had not resolved past problems. A group of mental health workers around Lindemann and Caplan constructed the ideas of crisis intervention while working with several mental health problems in the community. Their work continues concerning preventive networks, and has led to a variety of developments influencing networking ideas. Crisis intervention uses elements of ego psychology from a psychodynamic perspective, and recent developments have included cognitive therapy. James and Gilliland (2001:3) define a crisis as 'a perception or experiencing of an event or situation as an intolerable difficulty that exceeds the person's current resources and coping mechanisms'. Albert R. Roberts (2000:3) points out that a crisis may be personal (such as the death of a loved one) or public (such as a major fire). It may be a personal crisis as a result of a public event, for example if your loved one died in the fire. A personal crisis may be potentially public. For example, a woman who has been raped has to decide whether and how she will report it to the police, and this will have public consequences, for example for other women who may have been raped by the same man, in having to give evidence. The state of active crisis, according to Caplan (1965), continues for four to six weeks: Roberts clarifies that this is the period of disorganization, resolved for better or worse during this period. If resolution is unsuccessful, a person will function less well in the future, and will be more liable to bad reactions to later hazardous events. For example, the mind of the someone who loses their spouse unexpectedly does not have a successful bereavement and will react more strongly bereavements than expected. Extremely poor resolutions may lead to serious difficulties, pushing someone towards suicide, drug abuse, violence to others or mental illness (Kanel, 2003). Crisis intervention, to Roberts, also includes:

1. Establishing new coping mechanisms as part of the client's repertoire
2. Working through the feelings and experience of the problem so that longer term changes can be made
3. Mobilizing resources for support
4. Reducing continuing unpleasant effects and emotions
5. Thinking through events and their aftermath and integrating them into the client's personal life narrative.

In 1974, Argyris, C. and Schon, D. A. also raised one of the basic issues of this chapter when they distinguished between espoused crisis theory and theory in use; the former being the theory to which practitioners give allegiance whilst the latter is that theory which can be constructed as a result of observing their performance. They recognized that there was not always congruency between the two; indeed, they (1974:7) actually claimed that there may, but need not, be compatibility between them at all. At the same time Argyris' and Schon's concern was not really with the body of knowledge as theory, but only the manner by which social worker made sense of the world and increased their effectiveness within it. Such analyses have led to calls to reintroduce the apprenticeship model of training school teachers in the United Kingdom, and this could also be extended to the preparation of adult educators as well. However, there are some fundamental questions to be raised about this claim, namely:

- if there is no research into, or agreement about, what constitutes good practice then what every practitioner learns from any experienced practitioner must be acceptable if it works, even though not all experienced practitioners are experts. But we have also argued that education must be humanistic, which is a belief perspective, and its beliefs and values, as well as efficiency, underlie the idea of 'good' practice;
- not all aspects of practice can be learned through observing the expert because unusual situations are likely to occur in most forms of professional practice, and so all practitioners are likely to experience something in the course of their practice that they have not been able to observe in their apprenticeship with the expert - but working with the expert does allow practitioners to learn practical knowledge itself;
- if there is only apprenticeship then every new practitioner needs to reinvent every aspect of the wheel, which might be an even greater waste of time than learning some aspects of practice in the room first!

Major statement of practical social work

Classic statements of crisis intervention theory are those of Caplan (1965a) and, in social work, Parad (1965a), the latter being updated by a comprehensive review by Parad and Parad (1990b). Golan (1978) was the major international text for many years, and O'Hagan's (1986) account was useful for introduction based on UK practice. All these, particularly Golan, whose work is generic and comprehensive, contain valid practice guidance and a similar approach. However, the development of crisis intervention as an aspect of emergency and disaster

services, particularly in the USA, has led to a new generation of books providing a wide variety of approaches for practice in wide ranges of emergencies aimed at a multi-professional audience, prefaced by accounts of crisis intervention principles. These are all broadly similar, and the one most connected to social work is that of Roberts' (2000) ***Crisis Intervention Handbook***, which is therefore the main text given here as an example of the present literature. Kanel's (2003) ***A Guide to Crisis Intervention*** is less comprehensive and more about principles, but is primarily aimed at a non-professional counselling readers, since many such services (for example suicide prevention services and rape crisis centres) rely on trained volunteers or paraprofessionals. Myer's (2001) ***Assessment for Crisis Intervention*** provides useful guidance on assessment. The following account of crisis intervention relies mainly on Roberts (2000), but also includes pieces from Kanel (2003), Myer (2001) and James and Gilliland's (2001) ***Crisis Intervention Strategies***. The definitive statement of task-centred casework is in Reid's books (1978, 1992) and in Epstein (1992), and Reid's account is the main focus of the account presented below. The pioneer statement is in Reid and Epstein's ***Task-Centered Casework*** (1972a). It has been explicitly applied to group work and family work (Reid, 1985; Fortune, 1985). More recent accounts (Tolson et al., 1994; Reid, 2000) have elaborated and updated the model. A British interpretation, Doel and Marsh's (1992) ***Task-centred Social Work***, elaborated in Marsh (1991) and Doel (1994, 2002), offers a comprehensive account using less technical terminology (included below for comparison) and full bibliography.

Social Work and Roberts: crisis intervention

Roberts (2000) sees crises as turning points in people's lives. The model is shown in Figure 5.1. People function normally in a steady state (Rapport, 1970: 276) that is, as things happen to them, they can 'cope', responding to events and changing and developing as they do so. 'Steady state' implies that people can manage new events in their lives, unlike the idea of equilibrium in early conceptualizations of crises, which saw people's lives as in a balance, with the crisis knocking them off balance, implying that people were not able to manage new events. In this way, contemporary accounts of crisis intervention incorporate a degree of social change. Does having a body of knowledge (information about practice) mean that: crisis intervention is a discipline like other social sciences? Response to such a question must be negative. The body of educational knowledge is a body of information that is drawn from practice but once we interpret practice (knowledge why) we will always be forced to use knowledge that is drawn from the other social sciences. The point about this is that in everyday actions might be seen as integration of different disciplines, including applied disciplines life actions are performed that, if they are ever analyzed, might be seen to be an integration of distinct but applied disciplines - such as psychology or sociology or philosophy, or even from beliefs and ideologies such as Marxism or feminism, etc. However, in everyday life people do not, when they think about how they are going to behave, always consciously decide that they are going to use a little bit of

psychological, a lot more philosophical, some sociological knowledge, etc. and mix it together to constitute the practical knowledge underlying a specific behaviour. Nevertheless, there may be times when actors are aware that they have applied some philosophical ideals, etc. to their behaviour, so that it would be untrue to claim that the foundations of practical everyday knowledge are never recognized. (See Heller, 1984:185-215 for a discussion on everyday knowledge.) The same is true of educational knowledge - it is a unique constellation of applied knowledge that falls within the ambit of the other social science disciplines. It is only independent up to a point where it relates to the fields of practice. This can be demonstrated in the following manner: it is possible to have a philosophy of adult education or a sociology of continuing medical education, but it is not possible to have an adult education of sociology or a lifelong learning of psychology, and so on. In this sense, education is not an academic discipline, but it is a field of practice that can be studied from a wide variety of perspectives.

James and Gilliland (2001) identify three models of crisis intervention:

- *The equilibrium model* - Caplan's (1965) original approach; people are seen as being in a state of psychological disequilibrium and need to return to a steady state in which they can deal with issues in their life effectively
- *The cognitive model* - Associated with Roberts (1995); people are seen as thinking in a faulty way about events that surround the crisis
- *The psychosocial transition model* - Associated with developments of Erikson's (1965) model of developmental crises arising as people move through life stages; people are seen as going through a particularly important psychological or social change as part of their development.

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