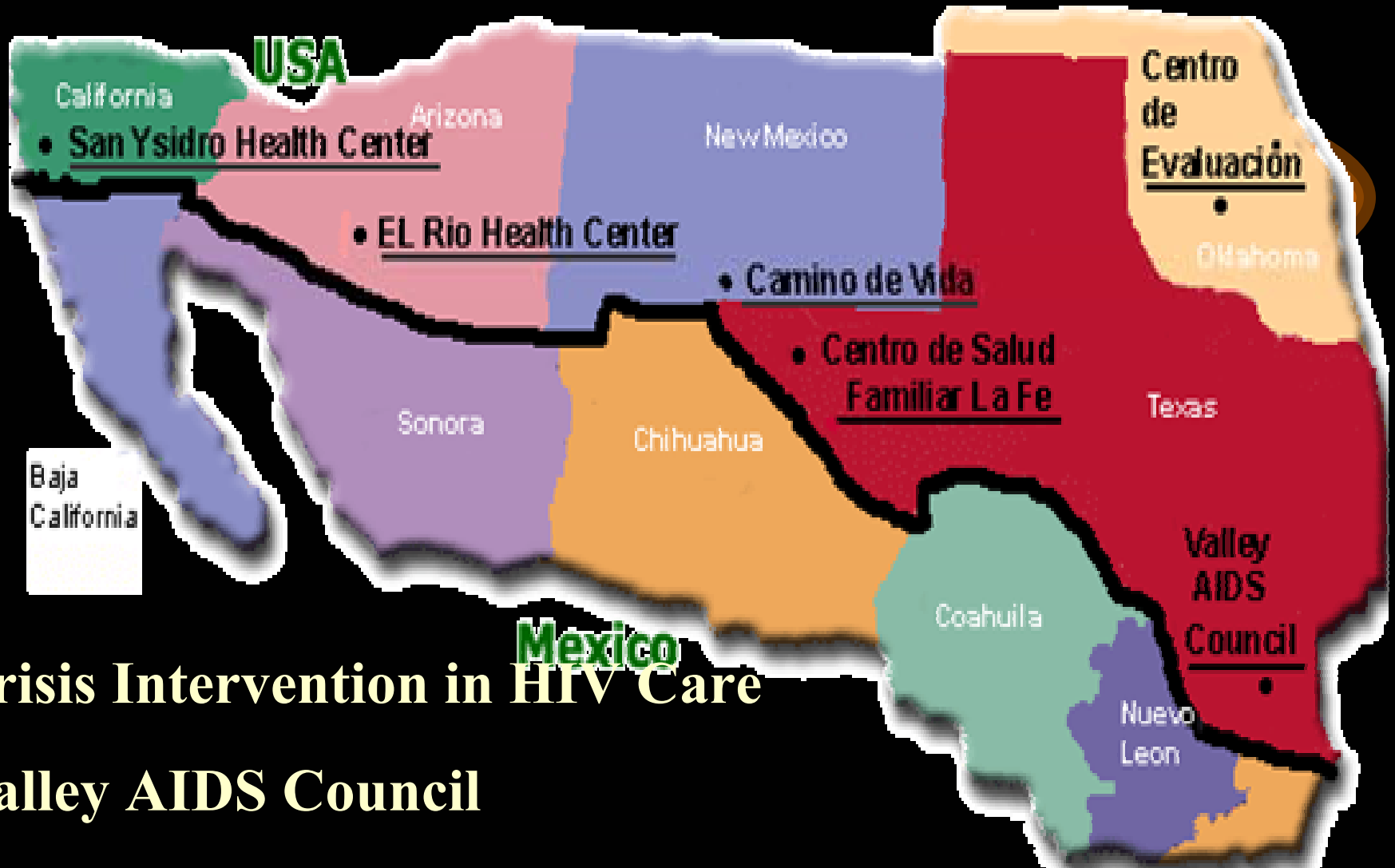


Saludes/Greetings!



Crisis Intervention in HIV Care

Valley AIDS Council

Harlingen, Texas February 20, 2003

Instructor background

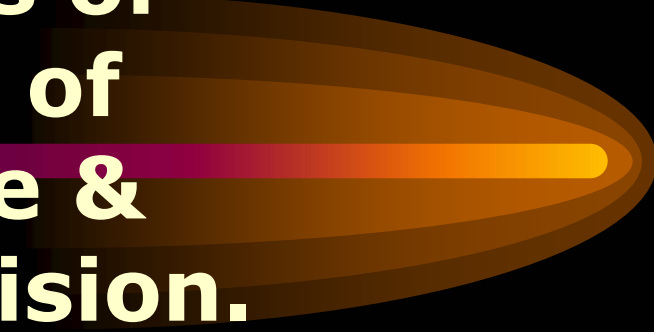
**Herman Curiel: Ph.D., Texas A & M,
College Station, Texas, 1979; MSW,
Our Lady of the Lake University,
San Antonio, TX 1962; Associate
Professor, School of Social Work,
Adjunct Associate Professor,
Department of Geriatric Medicine,
College of Medicine, University of
Oklahoma, Health Science Center;**

Instructor's academic roles

Co-PI, Centro de Evaluacion, evaluation of HIV/AIDS Health Care program serving Mexico-US border populations; Teaches Graduate & UG courses in social work practice including practicum oversight, aging & clinical supervision;

Research interests

**Research interests include;
aging, cultural aspects of
health care in context of
HIV/AIDS patient care &
direct practice supervision.**



Instructional Objectives

- **Examine major concepts in crisis intervention, definitions & types**
- **Examine crisis intervention in context of working with persons living with HIV/AIDS**
- **Describe stages & normal defense mechanism associated with the crisis process**
- **Identify specific intervention strategies**
- **Identify ways care providers can increase comfort level in helping clients in crisis**
- **Answer Questions**

What is a crisis?

Kanel (1999) defines a crisis as a situation where:

- **A precipitating event occurs**
- **The perception of the event leads to subjective distress**

Usual coping methods fail, leading the person experiencing the event to function psychologically, emotionally or behaviorally at a lower level than before the precipitating even occurred (page 1)

Source: Kanel, K. (1999). *A guide to crisis intervention*. PacificGrove, CA: Brooks/Cole.

Crisis Types

Developmental – life cycle changes

Situational – Specific to individual

Social – societal responses

Compound – reactivates previous losses

Goals of crisis intervention

Psychological resolution of crisis

Practical resolution of aspects of problem

Restoration to previous functioning level

Crisis points in HIV/AIDS Care?

Learning HIV positive status

Fear of rejection;

Fears of disability & dying

Learning of a family member's drug use

Disclosing one's HIV status to loved one

Episodic Crisis

Drop in CD-4 count

Decision to take antiretroviral medication

First symptoms of infections

Being hospitalized

Terminating employment

Applying for disability

Losing physical functioning

Unique Social Crisis of Disease

HIV invokes negative social responses

**How illness is perceived & defined
culturally**

Societal fears, myths, misconceptions

Stigma of illness

The Crisis Process (Golan(1987))

- **First, individual is exposed to a heavy amount of stress over some time;**
- **Second, stress makes person exceptionally vulnerable to intimidation & assaults from outside;**

The Crisis Process (Golan(1987)

Third, some precipitating factor acts as turning point to push individual to state of active crisis, marked by disequilibrium, disorganization, & immobility;

The Crisis Process (Golan(1987)

Fourth, individual perceives precipitating factor & other stressors as increasingly serious;

Finally, individual experiences surging anxiety, depression & grief

Normal Defense Mechanisms

When normal defense mechanism weaken

Persons become more anxious & emotional

Typically become less objective & logical

Crisis breeds desperation

Desperation fosters panic & immobility

People can easily become immobile

Themes in Crisis Intervention

Goal: return client to pre-crisis level of functioning

- **Crisis intervention is short term**
- **Specific current, observable difficulties are target of intervention**

Care-provider takes more active role, more directive

Core Conditions for Helping

Professional worker-client relationships are characterized by a clear purpose, a commitment to meeting the client's needs, ethical standards of practice, & worker emphasis on communicating warmth, genuineness, & empathy.

Areas of HIV Care knowing

Knowledge of progression of disease

Common infections & treatments

Exacerbating social stigma

Knowledge of health care resources

Knowledge of community resources

Use of consultation & supervision

Focus in crisis intervention

Help client view crisis objectively

Use Engagement skills

**Focus on specific precipitating event
& related aspects of client's situation**

First line of questions



What prompts client's call?

What precipitating event occurred?

What happened to upset client?

What is the crisis?

Second line of Questions

Tell me how you are feeling

How can I help?

When did you start feeling this way?

What do you want to do about this?

Third line of Questions

Help client establish a support system?

Is there anyone client can talk to?

More people helping the better.



Fourth line of Questions

Use client's history in solving similar problems?

Has something like this ever happened?

How did it get resolved?

How does client cope with stressful events in general?

Can any of these coping skills be applied to present situation?

Crisis as life growth experiences

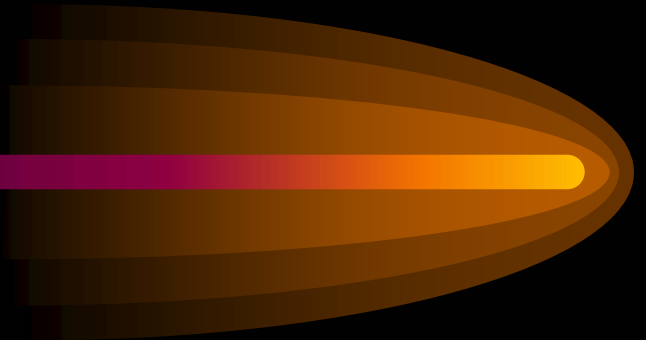
HIV disease can be catalyst for positive change

Trigger for spiritual quests

Clarification of life goals

Increasing intimacy

Attending to relationships



Things we can do

Maintain flexibility – service plan

Offer more interviews

Develop a time limited contract, specify tasks

Validate, reflect, normalize client's responses

Maintain balance of reality & hope

Sources of Help

Support groups

HIV Education

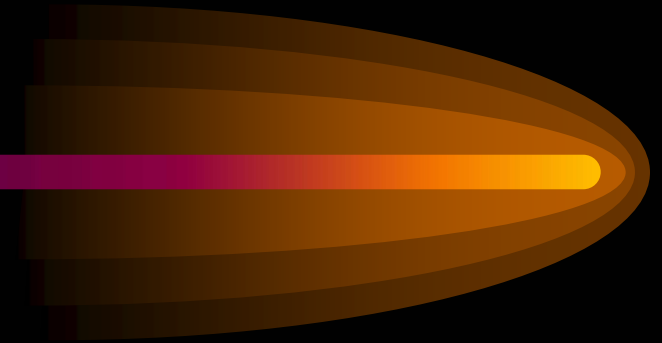
Benefits advocacy

Legal services

Case management

Home health care

Counseling



When client is depressed

Determine whether client is suicidal

Are suicidal thoughts present

Past history, lives alone, has plans

**If yes, seek consultation or refer for
medical evaluation & treatment.**

Taking care of self

Be aware of your own feelings

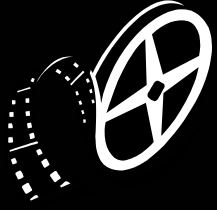
Anxiety is contagious

Client wants quick solution

Needs help working out own solution

Know agency resources

Use supervision



Summary

Basic crisis intervention tenets

Crisis work in helping HIV positive clients;

Episodic crisis for HIV care;

Tools for conducting assessment & intervention planning

Acknowledgements: Sources

Poindexter, C. C. (1997). In the aftermath: Serial Crisis intervention for people with HIV. *Health & Social Work* 22(2),125-133.

California Social Work Education Center (2001). *Crisis Intervention* edited by Marsha Carlson, MSW, UC Berkeley

Kirst-Ashman K. K. & Hull, Grafton, H. Jr. (2002) (3rd Ed.). *Understanding Generalist Practice* Pacific Grove, CA: Brooks/Cole. 230-237.

Time for questions

What else would you like to know?

**Thanks for your efforts in the care of
persons living with HIV/AIDS**

Thanks for your presence.

Herman Curiel, Ph.D., ACSW

**University of Oklahoma, School of
Social Work, Centro de Evaluacion**