Assessing Family Crisis

A crisis is a period of heightened family tension and imbalance that requires quick staff identification. Head Start staff who work with families will find this information useful in understanding what brings about crises for families. Just as a crisis is an opportunity for a family, it is also an opportunity for staff to make a real difference in the life of a Head Start family.

The following is an excerpt from Training Guides for the Head Start Learning Community: Supporting Families in Crisis.

Key Concepts

Elements Contributing to a Crisis
Phases of a Crisis
The Timing of Head Start Intervention
The Psychological Effects of Crises
Ideas to Extend Practice

Key Concepts

- **A crisis may present an opportunity for positive change.** A crisis is a time for helping families discover and strengthen problem-solving skills. During a period of intense crisis, when usual methods of coping fail, families are often open to learning new problem-solving approaches. Once a crisis is resolved constructively, many families find themselves strengthened by the experience and better prepared for life's next challenge. On the other hand, some families, without the support and resources to resolve crises constructively, risk a downward spiral in their functioning and may never fully recover.

- **A crisis is identified by a family's reactions to a stress-producing situation or event.** A crisis is an upset in a steady state causing a disruption or breakdown in an individual's or family's usual pattern of functioning. Families in crisis find that their usual ways of coping or problem solving do not work; as a result they feel vulnerable, anxious, and overwhelmed.

- **A crisis has four interacting elements.** Generally a family is thrust into a crisis when two or more elements, contributing to a state of crisis, interact. These elements include: 1) experiencing a stress-producing situation; 2) having difficulty coping; 3) showing chronic difficulty meeting basic family responsibilities; and 4) having no apparent sources of support. Differences among the interacting elements make each crisis unique.
A crisis is usually characterized by five phases. A state of crisis in a family is short-lived, usually lasting no longer than six weeks, and has five phases. The five phases may occur in order or overlap and intertwine: 1) the crisis is triggered, then the family 2) sees the crisis as threatening, 3) responds in a disorganized manner, 4) searches for a solution, and 5) adopts new coping strategies. There are signs of distress.

People in crisis typically experience a variety of psychological effects. Difficulty thinking clearly, dwelling on meaningless activities, expressions of hostility or numbness, impulsiveness, dependency, and feelings of incompetency are some effects of crises staff must anticipate and understand.

Background Information

Much of the work of Head Start staff involves crisis prevention. However, staff cannot always predict nor prevent crises in families.

A crisis is an upset in a steady state causing a disruption or breakdown in a family's usual pattern of functioning. Families in crisis find that their usual ways of coping or problem solving do not work; as a result they can feel threatened. This fact/tip sheet, Assessing Family Crisis, prepares staff for recognizing and assessing families that are thrust into a state of crisis.

Elements Contributing to a Crisis

A family moves into a state of crisis when two or more of the four elements that contribute to a crisis interact. These elements are: 1) experiencing a stress-producing situation, 2) having difficulty coping, 3) showing a chronic inability to meet basic family responsibilities, and 4) having no apparent sources of support. In order to identify and assess a crisis situation, it is important for staff to consider four questions that address these elements: What specific situation is producing the most stress for the family? What difficulties in coping are evident in the family? Is the family having difficulty meeting its responsibilities? What supports are available to the family?

Experiencing a Stress-producing Situation. Certain life situations or events may lead to mounting family tension and stress, which contribute to a state of crisis. For example, an unplanned pregnancy, a divorce, the loss of a loved one, unemployment, child protective services investigations, incarceration, addictions, or domestic violence are often crisis-producing.

Having Difficulty Coping. Difficulty coping with stress may surface in many ways: breakdowns in family routines, family arguments, trouble with simple decision-making, disruptions in sleeping and eating patterns, overwhelming feelings of being alone, the depletion of personal energy, and signs of distress. Without supportive
intervention to address the stress-producing situation and its effects on the family, coping difficulties are likely to escalate and thrust the family into a state of crisis.

- **Showing a Chronic Difficulty Meeting Basic Family Responsibilities.** Families that are unable to meet basic family responsibilities find themselves unprepared to deal with life's challenges. These families may be, for example, unable to provide their members with enough food, shelter, clothing, health care, nurturance, protection, education, and/or socialization.

- **Having No Apparent Sources of Support.** Families that go without support risk being thrust into a crisis. For example, socially or geographically isolated families lacking or not utilizing informal supports (e.g., friends, neighbors, relatives) and formal resources (e.g., food banks, Head Start, counseling programs) may be thrust into a crisis.

**Phases of a Crisis**

A crisis is usually characterized by five phases, which may occur in order, overlap, and/or intertwine. Awareness of the phases, as well as awareness of a family's responses to each phase, allows staff to examine a crisis. As described below, the phases of crisis that a family generally experiences include:

- **Phase 1: The Family Crisis is Triggered.** A family is thrust into a crisis when two or more elements, contributing to a state of crisis, interact. When the crisis is triggered, it causes a change in the family's circumstances and an increase in stress and anxiety.

- **Phase 2: Seeing the Crisis as Threatening.** Family members see the crisis as a threat to the family's goals, security, or emotional ties. While all crises are stressful, some crises are universally threatening: the death of close family or friends, serious illness and personal injury, or environmental disasters.

- **Phase 3: Staging a Disorganized Response.** The crisis may spur a rush of memories about traumatic or highly stressful times in the family's past. The family becomes increasingly disorganized as the strategies and resources used before to solve family problems fail. Family members experience increasing feelings of vulnerability, helplessness, anxiety, and confusion. As a result, feelings of losing control and being unable to meet family responsibilities may become intensified and disabling to family members.

- **Phase 4: Searching for a Solution.** In an attempt to deal with mounting tension, the family begins to involve friends, relatives, neighbors, and others in the crisis. Typically, each family member looks for someone to validate his/her own views about the crisis and its resolution. Conflicting opinions and advice can add to the
family's confusion and instability. When the family is unable to find appropriate solutions to the crisis, a chain of events is set off, creating yet another crisis for the family. Rapid intervention is necessary to stop the chain of events from causing a complete breakdown in family functioning.

- **Phase 5: Adopting New Coping Strategies.** When support for dealing with the crisis is available from a non-judgmental and skillful helper, this phase represents a turning point for the better for the family in crisis. It marks the beginning of the family's recovery. Family members are likely to welcome the sense of direction, security, and protection the helper brings to their situation.

The tension and struggles created by the crisis provide the motivation for the family to learn and apply new coping strategies, and use new resources. With supportive intervention, the family discovers it can master and overcome the crisis or, at least acknowledge, accept, and adapt to the loss surrounding the crisis.

**The Timing of Head Start Intervention**

The opportunity a crisis provides for enhancing the coping and problem-solving skills of families depends largely on the timing of the intervention. During the initial phases of a crisis, a family may be receptive to intervention. The anxiety produced by the crisis, coupled with the realization that no ready response works, motivates the family to try new coping strategies and resources. Families who receive support and assistance to help them deal with a crisis quickly are likely to stabilize within a few weeks.

While crisis intervention can not cure all the family's stressors, it does provide the opportunity for staff to teach the family how to focus on and resolve the current crisis. After gaining the skills and resources to resolve the crisis, the family realizes it has some control over its life and the capacity to fix other stressful problems.

In contrast, families who go without support and assistance during a crisis may get caught up in a chain of events or memories of past traumas that only lead to more stress. As a result, these families may experience increasingly severe breakdowns in family functioning. Violence, neglect, or other destructive behaviors may have the potential to put families in contact with the community's court and child protective services systems.

**The Psychological Effects of Crisis**

People in crisis typically experience a variety of psychological effects. It is important for the psychological effects to be anticipated and interpreted correctly. These effects are temporary and not indicators of mental illness.

- **Difficulty Thinking Clearly.** Some people in crisis may quickly skip from one idea to another in conversation, making communication with them confusing and difficult to follow. They may have trouble relating ideas, events, and activities to each other in a logical way. They may overlook or forget important details in their
explanation of events. Fears and wishes may be confused with reality. Some people in crisis cling to responses or behaviors they used in the past to solve problems; they seem unable to move on to new ideas, actions, or behaviors necessary to resolve the current situation.

- **Dwelling on Meaningless Activities.** In an attempt to combat anxiety, people in crisis may become overly involved in activities that are not productive. For example, they may spend all day watching TV, sleeping, or just sitting. They are likely to benefit from support in focusing on activities to reduce the crisis.

- **Expressing Hostility or Numbness.** The feelings of loss of control and vulnerability, experienced by some people in crisis, may be expressed through hostile words and actions directed toward anyone who intervenes in the situation. Others may withdraw or experience depression; they seem not to care about the crisis or its outcome.

- **Impulsiveness.** Although some people become immobilized in crisis situations, there are others who react impulsively without any regard to the consequences of their behaviors. Impulsive behavior, such as verbally striking out at a child or a spouse, can trigger additional crises. In these instances, a complex situation becomes even more complex and difficult to resolve.

- **Dependence.** It is natural for some people in crisis to feel dependent upon a professional who offers help. The professional represents a source of power and authority: someone who knows what to do and how to get things done [and] someone who is the "answer" to all the family's difficulties. Such perceptions of the professional can have a stabilizing impact on a family at the height of a crisis. After a brief period of dependency, most families are able to "let go" and act independently. For some, however, dependency may linger and become extreme, making them quite vulnerable to negative influences. They may be unable to decide between what is beneficial for them and what could be harmful, or to decide to whom they should or should not listen.

- **Feeling Incompetent.** A crisis presents a threat to one's sense of personal competency and self-worth. To counter low self-esteem, people in crisis may assume a facade of adequacy or arrogance. They may claim no help is needed or withdraw from offers of help. It is important to remember that families in crisis are probably very frightened by their feelings of incompetency, rather than unmotivated or resistant.

**Next Steps: Ideas to Extend Practice**

**Improving Skills in Crisis Identification**
Ask staff to meet with co-workers, who did not participate in the training, to share information from the training on the characteristics, dynamics, and impact of family crises. During the information-sharing process, instruct staff to present examples of family crises and to emphasize the importance of early intervention with families in crisis. Further, have staff ask co-workers whether they are aware of any Head Start families who may be in a state of crisis and, if so, to discuss and assess the indicators and make home visiting plans.

**Enhancing Family Coping Strategies**

Help staff to develop a mutual support group for Head Start families that are experiencing similar sources of stress, such as difficulty finding employment or child care, child behavioral problems, teenage pregnancy, neighborhood crime, budgeting money, etc. In line with the focus of the group, have staff arrange for community representatives (e.g., employment counselors, child development specialists, business leaders, law enforcement officers) to meet with the families to address their concerns. If families indicate an interest in continuing the group, have staff work with families to develop an agenda for subsequent family meetings. The agenda should include time for families to share their feelings, experiences, and strategies for coping.

**Recognizing Crisis-Surviving Families**

Have staff visit with Head Start families who have survived very stressful situations or crises. These may be families who are raising grandchildren; have overcome/adapted to a serious illness, injury or disability; left an abusive relationship; or who have dealt effectively with alcoholism, drug addiction, mental illness, etc. With staff, explore the options for recognizing the strengths and coping abilities of these "crisis-surviving" families, such as a certificate for their family storybook, a bouquet of flowers, or a special dessert. Help staff select and implement one of the options.

**Crisis!**

**Overview**

A family is thrust into a crisis when two or more elements, contributing to a state of crisis, interact. These elements include: 1) experiencing a stress-producing situation; 2) having difficulty coping; 3) showing chronic difficulty meeting basic responsibilities; and 4) having no apparent sources of support. Differences among the interacting elements make each crisis unique.
People in Crisis: Signs of Distress

Overview

Watch for these signs of distress in Head Start families. They may signal a state of crisis.

Physical Signs

<table>
<thead>
<tr>
<th>Appetite Loss</th>
<th>Fatigue</th>
<th>Nausea</th>
</tr>
</thead>
<tbody>
<tr>
<td>Back Pain</td>
<td>Flushed Skin</td>
<td>Overeating</td>
</tr>
<tr>
<td>Breathing Difficulties</td>
<td>Frequent Urination</td>
<td>Rashses, Hives</td>
</tr>
<tr>
<td>Clenched Jaw</td>
<td>Frequent Colds</td>
<td>Shaking</td>
</tr>
<tr>
<td>Cold Hands or Feet</td>
<td>Grinding Teeth</td>
<td>Sleep Problems</td>
</tr>
<tr>
<td>Diarrhea</td>
<td>Frowning</td>
<td>Stiff Neck and Shoulders</td>
</tr>
<tr>
<td>Dry Mouth</td>
<td>Frowning</td>
<td>Stomach Gas</td>
</tr>
<tr>
<td>Elevated Blood Pressure</td>
<td>Headaches</td>
<td>Tight Chest</td>
</tr>
<tr>
<td>Excessive Perspiration</td>
<td>Heart Palpitations</td>
<td>Twitches</td>
</tr>
<tr>
<td>Excessive Salivation</td>
<td>Hot Flashes</td>
<td>Vomiting</td>
</tr>
<tr>
<td>Exhaustion</td>
<td>Hyperventilation</td>
<td>Weak Knees</td>
</tr>
</tbody>
</table>

Behavioral Signs
The Phases of a Crisis

Overview

A crisis is usually characterized by five phases, which may occur in order, overlap, and/or intertwine. Awareness of the phases and of the responses typical to each phase leads to correct identification and assessment of a family in crisis. As described below, the phases are:

Phase 1:

The Family Crisis is Triggered

A family is thrust into a crisis when two or more elements contributing to a state of crisis interact. When the crisis is triggered, it causes a change in the family's circumstances and an increase in stress and anxiety.

Phase 2:

Seeing the Crisis as Threatening

Family members see the crisis as a threat to the family's goals, security, or emotional ties. Some crises are universally threatening or stressful: the death of close family or friends, divorce, serious illness, personal injury, and environmental disasters.

Phase 3:

Staging a Disorganized Response
The crisis may spur a rush of memories about traumatic or highly stressful times in the family's past. The family becomes increasingly disorganized as the strategies and resources used in the past to solve family problems fail. Family members experience increasing feelings of vulnerability, helplessness, anxiety, and confusion. As a result, feelings of losing control and being unable to meet family responsibilities may become intensified and disabling to family members.

**Phase 4:**

**Searching for a Solution**

In an attempt to deal with mounting tension, the family begins to involve friends, relatives, neighbors, and others in the crisis. Typically, each family member looks for someone to validate his/her own views about the crisis and its resolution. Conflicting opinions and advice can add to the family's confusion and instability. When the family is unable to find appropriate solutions to the crisis, a chain of events is set off, creating yet another crisis for the family. Rapid intervention is necessary to stop the chain of events from causing a complete breakdown in family functioning and a perpetual state of crisis.

**Phase 5:**

**Adapting New Coping Strategies**

When support for dealing with the crisis is available from a non-judgmental and skillful "helper," this phase represents a turning point for the better for the family in crisis. Family members are likely to welcome the sense of direction, security, and protection the helper brings to their situation. The tension and struggles created by the crisis provide the motivation for the family to learn and apply new coping strategies, and to use new resources. With supportive intervention, the family discovers it can master and overcome the crisis or, at least acknowledge, accept, and adapt to the real or tragic loss surrounding the crisis.

1Adapted from C. Gentry, Crisis Intervention in Child Abuse and Neglect (Washington, D.C.; U.S. Dept. of Health and Human Services, 1994).

**Possible Psychological Effects of Crises**

**Overview**

People in crisis typically experience a variety of psychological effects. It is important for the psychological effects to be anticipated and interpreted correctly; they are temporary and not indicators of mental illness. As described below, the psychological effects fall into six broad categories.

- **Difficulty Thinking Clearly.** People in crisis may quickly skip from one idea to another in conversation, making communication with them confusing and difficult to follow. They may have trouble relating ideas, events, and activities to each other
in a logical way. They may overlook or forget important details in their explanation of events. Fears and wishes may be confused with reality. Some people in crisis cling to responses or behaviors they used in the past to solve problems; they seem unable to move on to new ideas, actions, or behaviors necessary to resolve the current situation.

- **Dwelling on Meaningless Activities.** In an attempt to combat anxiety, people in crisis may become overly involved in activities that are not productive. For example, they may spend all day watching TV, sleeping, or just sitting. They are likely to need considerable help in focusing on activities to bring the crisis to an end.

- **Expressing Hostility or Numbness.** The feelings of loss of control and vulnerability, experienced by most people in crisis, may be expressed through hostile words and actions directed toward anyone who intervenes in the situation. Others may withdraw or experience depression; they seem not to care about the crisis or its outcome.

- **Impulsiveness.** Although some people become immobilized in crisis situations, there are others who react impulsively without any regard to the consequences of their behavior. Impulsive behaviors, such as verbally striking out at a child or a spouse, can trigger additional crises. In these instances, a complex situation becomes even more complex and difficult to resolve.

- **Dependence.** It is natural for people in crisis to feel dependent upon a professional who offers support and help. The professional represents a source of power and authority: someone who knows what to do and how to get things done and someone who is the answer to all the family's difficulties. Such views of the professional can have a stabilizing impact on a family at the height of a crisis. After a brief period of dependency, most families are able to let go and act independently. For some, however, dependency may linger and become extreme, making them quite vulnerable to negative influences. They may be unable to decide between what is beneficial for them and what could be harmful, or to decide to whom they should or should not listen.

- **Feeling Incompetent.** A crisis presents a threat to one's sense of personal competency and self-worth. To counter low self-esteem, people in crisis may assume a facade of adequacy or arrogance. They may claim no help is needed or withdraw from offers of help. It is important to remember that families in crisis are probably very frightened by their feelings of incompetency, rather than unmotivated or resistant.

Last Updated: May 29, 2018