

Evidenced-Based Care of Adolescents and Families in Crisis



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KEYWORDS

- Adolescent • Crisis • Crisis intervention • Family • Lethality assessment
- Risk and protective factors

KEY POINTS

- Crises are precipitated by specific identifiable events and are determined by an individual's personal perception of the situation.
- Nurses regularly intervene with individuals and families in crisis across the continuum of care and in a wide variety of settings. The nursing process serves as the framework by which nurses assist those in crisis with a short-term solution-focused approach to crisis management.
- The Robert's Seven-Stage Crisis Intervention Model identifies key stages that individuals and families progress through as they attempt to solve the problem that precipitated crisis. The stages are sequential but may overlap as progress occurs.
- The first step in crisis intervention is the assessment of lethality (imminent danger of harm to self or others).
- Crisis intervention is a process in which a solution-focused approach is used to help the adolescent and their family to use their strengths and resources to develop and implement potential solutions to the problem at hand and return their family system to a state of equilibrium.

INTRODUCTION

Life in the twenty-first century is rife with stress. Economic volatility, societal conflicts, traumatic events, political unrest, and terrorism are only a few of the serious stressors one may be exposed to. In addition to these stressors, individuals confront maturational and situational changes that contribute to stress. Generally, a person reacts and adapts to stress effectively; however, an unanticipated stressful situation can

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precipitate the evolution of a crisis. Adolescence is a time of rapid physical, emotional, and maturational change. It is a tumultuous time, because the teen is coping with a multitude of forces that will influence their transition from childhood to adulthood. Adolescence holds the potential for growth and maturation, but it can be a challenging and demanding time for the teen and their family. The addition of external stressors can tax the individual and family system, leading to crisis.

Crisis is a subjective reaction to a stressful life experience that so affects the stability of the individual that the ability to cope or function may be seriously compromised.¹ Crises are personal in nature, acute and not chronic, hold the potential for personal growth, and will resolve within a brief period of time. The available resources and ability to effectively use these will determine the outcome of the crisis. For those multi-stressed individuals and their families, the stresses of a particular circumstance may overwhelm their ability to use their resources, creating tension and escalating anxiety, which culminates in crisis.

This article provides an overview of germane points relative to the factors that contribute to the evolution and resolution of crises in adolescents and their families and the role of nurses in crisis intervention. It examines the categories of crisis, the risk factors that can potentiate, and protective factors that may mediate crisis for youth and their families. It further examines the role of nursing in identifying and working with families to implement strategies using a crisis intervention model that can help them return to an optimal level of functioning.

CRISES

Crisis is not defined by the event or precipitant itself. Crisis is defined by the individual's perception and the extent of disruption of personal or familial homeostasis²; this leads to systemic disequilibrium that does not respond to protective factors, use of external support systems, or previously effective coping skills. Crisis threatens personal and family system organization but also offers great opportunities for growth and development. Crises are acute and time-limited and will be resolved one way or another within a brief period of time. Crises are categorized into the 3 following types:

- A. *Situational Crises*—arising from external events that are unanticipated and perceived as a threat to the individual or family, for example, job loss, divorce, academic failure, or severe physical or mental illness.
- B. *Maturational Crises*—occurs across the continuum of the life cycle. Each developmental stage is marked by tasks or goals marking the transition from one stage to the next. Disequilibrium is created as part of the maturational growth and development, creating greater vulnerability to crisis.
- C. *Adventitious or Social Crises*—triggered by external events that are accidental, uncommon, and unanticipated, resulting in multiple losses and extraordinary environmental change. This type includes events such as tornadoes, flood, fire, terrorist attacks, or war.

Nurses work in a wide variety of health care settings and may be the first point of contact for the adolescent and their family challenged by the stressors that strain their current skills and resources and threaten to evolve into crisis.

RISKS AND PROTECTIVE FACTORS

Understanding the risk and protective factors that mitigate the development of crisis within a family provides the nurse with a framework from which to implement intervention strategies. An understanding of these factors allows the nurse to view the patient

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