

Hypnosystemic Crisis Intervention and Support

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Position: since 2004:
Intakkt – Institute for individual psychological solutions
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2004-2012:

BOD of the German Society for Suicide Prevention (DGS)

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Outline

- Crisis
- (Trance) experiences in crisis situations
- Goals of crisis intervention
- Hypnosystemic strategies for crisis intervention and crisis support
- Hypnosystemic guideline for crisis communication
- Interventions with “impact”



Crisis



Crisis

- crisis, Greek, originally “opinion,” “judgment,” “decision”
- later has more a sense of “culmination”
- describes a problematic (decision-making) situation associated with a turning point in life
- the result of this situation is perceived as having a fatal influence on ones future
- it is often only possible to see that the event was a turning point in life from a retrospect perspective (once the crisis has ended)



danger

opportunity



**“The crisis consists precisely in the fact that the old is dying
and the new cannot be born.”**

(Antonio Gramsci)



Causes of crises (examples)

Collective crises

experienced by all people in a particular time frame / region

- Natural catastrophes
- Economic crises
- Wars

Normative crises / developmental crises / crises of maturity

all people experience in a similar manner - a blend of biological changes (such as puberty), social requirements (such as marriage and parenthood) and normative obligations (such as the obligation to go to school)

- Birth
- Puberty
- Marriage
- Parenthood (motherhood)
- Children leaving home
- Menopause
- Retirement
- Death

These crises structure an individual's life path, and are more or less predictable.

Individual crises

frequently occur following critical life experiences

- Birth of a sibling
- Death of a friend
- Unemployment
- Moving
- Pressure to perform at school / work
- Retirement
- Separation / divorce
- Illness
- Crimes
- Accidents
- Suicidal crises

These crises are mostly unforeseeable.



Stages of a crisis according to G. Caplan and J. Cullberg

Shock phase

- distancing and denying reality
- fighting against the unpleasant feelings, which only reinforces them

Phase of realization

- realization of one's own condition and failure of general problem solving strategies to achieve results
- continued increase in tension, experiences of insufficiency and ineffectiveness

Reaction phase

- facing the painful facts



- using defense mechanisms (denial, developing an addiction or becoming ill, repression, regression, etc.)
- complete withdrawal, distancing from expectations and desires so as to not experience further disappointment

developing a psychic illness

possibly suicide (attempt)



mobilization of all forces to find a “positive” way out of the crisis – new patterns of behavior and skills may be developed or old ones revived

Processing phase

- relieving old needs

Reorientation phase

- replacing the loss through new objects or persons
- setting off on a new / changed life path

Normal duration of a crisis approx. 4-6 weeks

(Trance) experiences in crisis situations

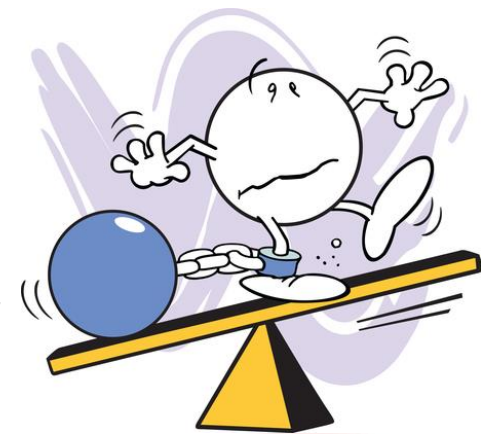


Experiences in crisis situations

In crisis situations, we experience ourselves

- as having been put out of balance
 - thrown off guard
 - no longer centered
 - overwhelmed by things we need to handle
 - lacking the right “tools” (previous experiences / coping strategies)
 - no longer in control
 - exposed helplessly to situation with no way out
 - passive
 - questioning our previous understanding of our lives and our systems of values and norms, potentially also our religion
-
- deep experience of a wide range of emotions, such as
 - fear
 - stress
 - rage
 - grief
 - disappointment
 - bitterness
 - despair

... we feel the need to end this situation as quickly as possible – by any means necessary



Trance experiences in crisis situations

Disassociation

- from (current and former) resources
- from possibilities for change and “tools”
- from positive, still functional areas of life (tunnel vision)

Association

- with the problem / the crisis
- with all problematic areas of life
- possibly with suicide as the only way out

time distortion, progression, regression, and memory problems

- current events and their effects are experienced as being as bad as possible and lasting “eternally” / “forever” (bad future)
- distorted view of the past
 - “I’ve always had it this bad” (bad past)
 - past is “transfigured” and experienced in an extremely positive way (wonderful past) – the current situation is experienced as being all the worse and it becomes subjectively impossible to restore the previous condition

Suicidality

- frequently, people imagine a miracle would have to happen to end this situation
- suicidality can indicate an attempt to get back in control
 - “I can’t live like this anymore / I can’t handle this” – “I can actively end my own life, it’s something I can control”



Goals of crisis intervention



Goals of crisis intervention

Step by step ...

- getting back into balance
- getting back on track
- finding one's center again
- getting ready to "tackle" things again
- finding "tools" (again) (re-activating coping strategies)
- finding one's path again
- discovering (new) ways
- Being in charge again
- out of the situation
- becoming active again
- getting control again
- finding a new / changed life structure, a new / changed way to think about ones system of values and norms, possibly religion

... small steps on the one hand – but on the other hand, noticeable (!) for the client.



Hypnosystemic strategies for crisis intervention and crisis support



Basis of every “Crisis Intervention Technique”

- create a peaceful oasis
 - establish a rapport
 - pace, pace, pace
 - be supportive
 - show / express understanding for the situation
 - express understanding for the feelings / experience of having no way out
 - be present as a person/ to show concern
 - take time / give clients time
- ➔ don't deny/ don't try to end the situation (either / or), but establish a counterweight to the crisis scale
(both ... and):
“I'm in a crisis, but I also have resources / a perspective, even if I don't see / can't see it right now”



Step by step... back to balance....

Association

- with (current and former) resources
 - with possibilities for change and “tools”
 - with positive areas of life that are still functional (allow one’s gaze to widen once again)
 - possibly focusing on times when the person still experienced themselves as being stable and competent
- ➡ expand experiences of competence and room for action in small steps

Disassociation / distancing

- from the problem / the crisis
- from the problematic areas of life
- from suicide as only way out

- ➡ oscillating between association & disassociation / between “problem trance” & “solution/ resource trance”
for the purpose of differentiation - dialogically and/or under formal trances
(if necessary for the purpose of differentiation, ask when the person experiences things as being particularly bad)

reverse
Association & Disassociation



The importance of vision while driving

From a broadcast on Swiss Radio: a police instructor provided some information on the key factors, drivers need training on to ensure their vehicles don't skid or slide under extreme driving conditions:

“The most important thing you need to train is YOUR VISION. In dangerous situations, people tend to panic and lose their perspective. Your vision goes to where the obstacle is or where you perceive a danger or threat. Your hands direct your vehicle towards the area where your vision is directed. This also explains why many vehicles that go into a skid end up hitting a tree, a street lamp, a post, etc., even if there are no other obstacles around.

The goal is to train yourself to direct your vision and your attention in the direction where there is no danger or threat, where you can drive onwards freely - in the direction you want to go. If this is where your vision is directed, your hands will follow automatically and do what's necessary to get your vehicle out of the danger zone.



Step by step... back to balance....

Time distortion

- being able to experience current events and their effects as “time periods” – with a beginning and an end (cf. 2 pillars according to G. Perren-Klingler)

Regression and memory phenomena

- realistic view of the past: “I’ve had bad experiences in the past, and I survived them” (earlier crises and how they were handled as resources)
- being able to “see” positive aspects of the past and have access to positive experiences once again

Progression

- in the near future – “how can survival become possible”
- in the time after the crisis: allowing a retrospective view, what contributed to the management of the crisis, what would the post-crisis person say to advise the person in the crisis (looking forward to the point from which one will look back)
- potentially the “miracle question” (deShazer) – even acknowledge impossible miracles and desires
- recognize the potential effect that the current event will have on the future, and at the same time see that “life will go on,” even if it will be different (acceptable future)



Step by step... back to balance....

Suicidality

- experience as one (of many) potential ways out of the current situation
- develop other ways together for once again being able to handle life in another manner
(at the same time acknowledging that suicide is possible)



Problem-oriented and Solution/ Resource-oriented Speech Patterns

Problem-oriented

- no way out of a situation
- it will never end
- inner emptiness
- feel despair

Solution/ Resource-oriented

- **seems like** there is no way out
- sometimes, **you might believe** it will never end / seems to be eternal
- can't imagine **yet** that this event will find its place in my life story
- can't imagine **yet how** life will be fulfilled again in the **future/ what** can give you fulfillment **ever again**
- **not** yet knowing, **what** will happen next



Hypnosystemic Guidelines for Crisis Communication



Hypnosystemic Guidelines for Crisis Communication

Present

- Making a connection to the current situation
- Pacing, pacing, pacing

Past

- Acknowledging the problem (and explaining the “normality” of symptoms in view of what has happened)
- How was the situation dealt with previously (resources)?
- How have you managed to keep going this so far?
- How did you handle previous crises?

Present

- What is different this time?
- What are you lacking to deal with this situation?

According to Hortlik (1996) in “Systemische Krisenintervention” (Systematic Crisis Intervention) Pub: Egidi and Boxbücher, dgvt-Verlag



Hypnosystemic Guidelines for Crisis Communication

Near future

- What needs to happen so you'll at least be able to survive or get through these next few hours?
- Target vision / potentially the “miracle question” (depending on the stage of the crisis)

Present

- How can you achieve that? (possibly “Detour” through the steps / activities, thoughts that would lead to additional hardship)
- What would be the first sign for you that you're under a bit less stress?
- Who or what might be able to help you to get there?

Near future

- Formulation of concrete, near-term goals (if necessary, discuss admission to hospital)
- Principle of “small steps”
- if necessary a forecast for future crises / “relapses” (emergency plan, etc.)

According to Hortlik (1996) in “Systemische Krisenintervention” (Systematic Crisis Intervention) Pub: Egidi and Boxbücher, dgvt-Verlag



Emergency plan

I'm at home and notice my thoughts are circling around my current situation.

I protect myself by ...

- listening to my favorite music
- leaving the house and walking around the block
- calling person XY (think of some alternatives in case you can't reach this person)
-
-

I'm lying in bed and notice that I can't get to sleep. Instead, I can't stop thinking about how this all could happen to me.

I protect myself by ...

- getting up and drinking a glass of water
- getting up and writing down my thoughts
- looking for another place to sleep (specify)
- calling person XY or the telephone counseling line (0800-1110111 or 0800-1110222)
-
-



Emergency plan

I realize that I'm feeling unable to stop myself from driving over to see person Z and do YX (for instance after a breakup).

I protect myself by ...

- going jogging
- standing under the shower for a while
- meeting with or calling person XY
- calling the telephone counseling line (0800-1110111 or 0800-1110222)
- calling my therapist and setting up an appointment
-
-

Packing / assembling an emergency suitcase is a smart way to support emergency plans.



Helplines

- Telephone counseling – 365 days/ 24h 0800-1110111 or 0800-1110222
- Youth line(s) 0800-1110333 (Nummer gegen Kummer, Mo-Sa 2-8 PM)
0800-1110444 (youth phone Krefeld, regional)
- local crisis services
- regional emergency counseling
- psychiatric clinics
- counseling services online



Interventions with “Impact”



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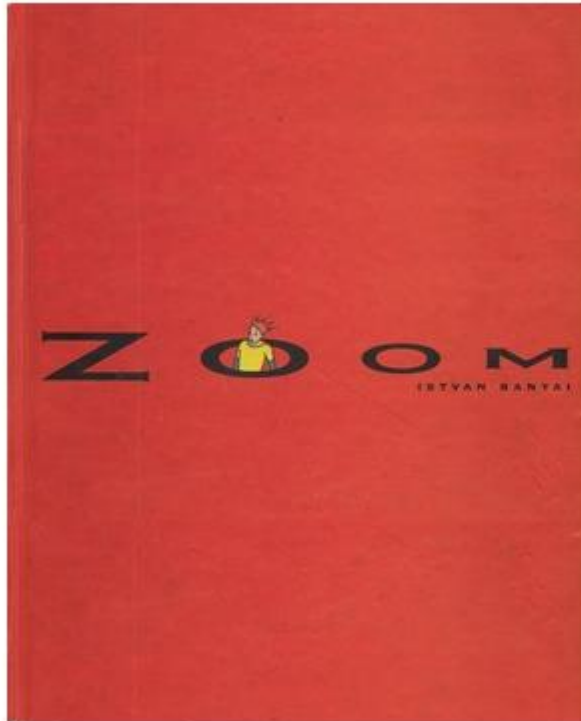


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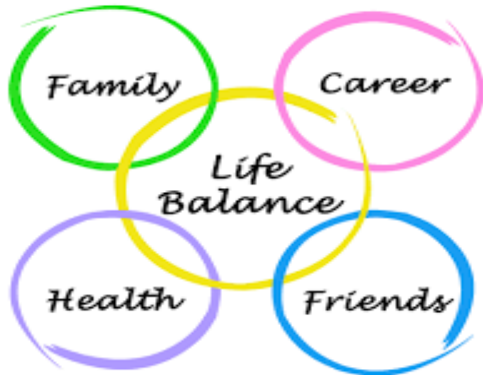
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Scales









The key to life is balance

Thank you for listening!

