

The Crisis Making Process & The Crisis Coping Process

EVIDENCE BASED PRACTICES (EBP): Integrated System of Care; Universal Dual Diagnosis Capabilities; Principles of Empathy and Hope; Motivational Interviewing Approach; Stages of Change Model Design; Strength Based; Skill Building; Solution Focused; Neurochemistry Based Disorders of the Brain; Symptom Identification; Symptom Management; EBP Curriculum Topics, i.e. Nutrition, Stress Management, Cognitive Behavioral, and more...

Consistency in the Group Setting

The importance of *consistency* in a treatment setting can't be overstated. This is especially true when people are placed in vulnerable situations. *Inconsistency* can, at best, increase uncertainty and insecurity for the person receiving services. At worst, unpredictability can create a sense of helplessness while simultaneously decreasing a person's development of self-reliance. In fact, all human beings benefit from a dependable approach in the treatment of chronic disorders. When a person learns they can rely on consistency, they are less stressed and more relaxed. Consistency in the group setting includes the group structure, psychoeducational material, and the approach.

Each agency or facility will have different requirements – such as group receipts or paperwork – however, consistency can still include a structure similar to the following:

1. Group members pick up: a. Clip Board, b. Paper, and c. Pencil/Pen as they enter the room.
2. Group facilitator picks up the group receipts from each person in the group, and/or the group facilitator passes out the sign-in sheet for the group members to sign.
3. Group facilitator provides a Positive Group Beginning, Consistent Psychoeducational Material, Consistent Approach, and a Positive Group Closure.

Psychoeducational Groups and Crisis Event Processing (when requested)

Notes to Facilitator(s):

1. *THE BASICS, Second Edition* meets the definitions and goals of Psychoeducational Groups, Skill Building Groups, and Cognitive Behavioral Groups.
2. Group participants who have become accustomed to Interpersonal Processing Groups – as well as staff who have facilitated them – may find it a challenge to now facilitate Psychoeducational Groups.
3. Likewise, facilitators who may have followed a more lecture-style education presentation, may find it challenging to now devote at least 1/3rd of group time to specific topic discussions and interactions.
4. Both types of groups (Interpersonal Processing Groups and Psychoeducational Groups) are extremely important, yet each has different goals and structure.
5. The structure of Psychoeducational Groups, Skill Building Groups, and/or Cognitive-Behavioral Groups in no way means that there will not be *interaction* – far from it. It just means that the interactions, discussions, and exercises will be about the topic(s) of each group.
6. Facilitators *may* – or not – still want to allow time in each group for the group member(s) to discuss a crisis that may have occurred since the last group.
7. We do know, of course, that *every* person in group is typically experiencing many challenges each and every week; however, most of these incidents are often best resolved in ways other than group time where the event does not pertain to every group member.
8. Suggested responses to a challenge, problem, or crisis can also include suggesting the person contact their primary care provider; schedule a 1:1 appointment; reschedule their next 1:1 to an earlier time; or, meet with the facilitator after group to explore options and develop a plan.
9. A facilitator would, of course, not “*grade*” an event as being worthy or not for group time. If a person requests individual time in the group, then that would be accepted as valid and time allotted at the end of the group.
10. Over time, the group begins to understand the differences between a situation, a challenge, a problem, or a crisis and can make decisions to utilize group time or continue with the current psychoeducational topic.

Prepare Professionals

Suggestions for professionals to prepare themselves for group typically includes:

1. Review all content material, appendices, and/or handouts *prior* to group to avoid a lecturing style.
2. Decide beforehand the *key points* to be covered in each group to produce flexibility for group responses, discussions, or questions.
3. Gain an overall understanding of the content so summarizing is possible in order to create an interactive facilitation style.
4. Determine the group structure to achieve the essential balance between education and discussions.
5. Check group room to be sure there are enough clipboards, pencils or pens, and markers or chalk for the board.
6. Make enough copies of any handouts *before* group.
7. Write any group content on the board *prior* to the beginning of group whenever possible.

Master Guide & Master Tips to Professionals

Note: *The Master Guide* (located at the beginning of Volume I & II) and the *Master Tips to Professionals* (located at the back of Volume I) have many topics to assist in the group process like Master Tip #39: Suggestions For Managing Handouts For Groups (pages Master Tips 64-67). Other tips include:

1. Master Guide: Interactive Style (pages Master Guide 10-11)
2. Master Tip #1: Suggestions for Beginning Group (pages Master Tips 1-4)
3. Master Tip #3: Empathetic Treatment Approach (pages Master Tips 7-9)
4. Master Tip #4: Promoting Hope (page Master Tips 9)
5. Master Tip #5: Maintaining a Consistent, Nonjudgmental, and Positive Attitude (pages Master Tips 10-13)
6. Master Tip #12: Responding to Requests for Copies of APPENDICES (pages Master Tips 27-29)
7. Master Tip #13: Depth of Psychoeducational Content (pages Master Tips 29-30)
8. Master Tip #14: Group Closure Suggestions (pages Master Tips 30-31)
9. Master Tip #16: Motivational Interviewing (pages Master Tips 31-32)

Present Curriculum/Topic

1. It is extremely important that each group participant leave every group with more Psychoeducation than they came in with – which may also include discussing a “familiar topic” yet with a “present-day” focus. Psychoeducational Groups are designed to provide education about all areas related to the management of Substance Use Disorders and Psychiatric Disorders. Psychoeducational Groups are not Interpersonal Processing Groups – even though interaction and processing the particular *psychoeducational topic(s)* is essential to individualizing the topic(s) or skill(s) presented.
2. It is recommended that a minimum of 1/3rd of group time be devoted to interaction (therapeutic counseling *topic* discussions). This can be accomplished – depending on the individual style of the group facilitator(s) – by any “present education-interact/discuss – present education-interact/discuss” combination while still structuring the group to include the curriculum/topic education to be covered.
3. The presentation of material will, of course, be modified by the facilitator to match the functioning skills of group participants. It is important to note, however, that *THE BASICS, Second Edition* was written in a conversational language while taking into consideration a wide-range of symptom acuity and severity. Persons with co-occurring psychiatric and substance disorders benefit from learning about their disorders and how to manage them, as do all individuals with any chronic disorder(s). Each group participant will retain what is meaningful to them at the present time.

Group Beginning Suggestions

A positive group beginning (and ending) is extremely important. Positive beginnings can include:



1. Reading the Thought For The Day from a meditation book. (Note: The daily meditation book *Easy Does It* also has an index of topics at the end of the book. This is helpful in choosing a specific reading to fit with the topics presented in group.)
 2. AA Slogan(s) with brief explanation or AA/NA/Dual Recovery inspirational reading.
 3. Inspirational or humorous curriculum handout reading from *THE BASICS*.
 4. Deep breathing or stretching exercise.
 5. Each person telling the group one thing they are grateful for.
 6. Each group member mentioning one positive thing they did that contributed to their recovery.
- * Recommended Beginning: Breathing Exercise (Master Tips-3)

Practice Curriculum/Topic

Practicing subject material is the best way participants can internalize and personalize the curriculum content. Practice includes the group interactions, worksheets, exercises, handouts, and content discussions.

The Crisis *Making* Process & The Crisis *Coping* Process


Volume II; Subject Eight; Pages: 8-1 – 8-5

Based on a 2-Hour group: Two 50 minute segments	Time-Frame
Group Beginning	20 Minutes Total
Positive group beginning (suggestions are located on the previous page).	5 Minutes
<ol style="list-style-type: none"> 1. Brief Group Introductions: (Note: The <i>interactions</i> in a psychoeducational group are discussions about the <i>topics</i>, not inter-personal processing or case management questions which do not apply to the entire group.) <ol style="list-style-type: none"> a. Ask the group members to tell the group their name. b. Welcome any group members who are new to this group or phase. 2. Crisis Processing (when requested and optional): <ol style="list-style-type: none"> a. Ask the group if anyone has experienced a crisis since their last group, and if they need/want additional time in this group to discuss it, i.e. what happened, how they managed the crisis, and/or explore options and develop a plan. b. Let the person(s) know that you will allow time at the end of this group for them to share their experience and receive support from their fellow group members. 	10 Minutes 
<p><u>Summarize Introduction of the Group Topic and Why It's Important:</u> <i>Information abounds. Information captured and personalized becomes knowledge.</i> (Ken Hickey, personal communication, March 23, 2001)</p> <p>With time, recovery becomes a gift of a new life. A gift that must be <i>protected</i> and <i>maintained</i> or, quite frankly, it will be lost. Just as a home or a garden requires upkeep, so does a sound recovery program. (Subject 8-1)</p> <p>Recovery can mean healing, renewal, mending, or improvement. The term <i>recovery</i> applies to the <i>process</i> of <i>managing</i> the symptoms of a Substance Use Disorder or a Psychiatric Disorder or both. All of these disorders cause problems in a person's life. In other words, recovery means managing the <i>symptoms</i> and reducing or eliminating the <i>problems</i>.</p> <p>Protecting recovery also involves coping with crisis. Coping with crisis includes identifying the crisis response and developing ways to cope with times of crisis whenever they arise. Today we will talk about the “crisis <i>making</i> process” and the “crisis <i>coping</i> process.”</p>	5 Minutes 

The Crisis Making Process & The Crisis Coping Process; Volume II; Subject Eight; Pages: 8-1 – 8-15

Psychoeducation Part I: Topics & Focus	Pages & Location	Presentation Suggestions	Time- Frame									
Coping With Crisis	Subject 8-1	Summarize one paragraph.	30 Minutes									
“Crisis Making” Process	Subject 8-1	1. Summarize one line introduction. 2. Discuss the five factors in TABLE ONE below using the explanations in the text.										
TABLE ONE												
<table><tr><td>1</td><td>PERCEPTION</td><td>2</td><td>COGNITIONS</td><td>3</td><td>EMOTIONS</td><td>4</td><td>PERSONALITY</td><td>5</td><td>BEHAVIORS</td></tr></table>				1	PERCEPTION	2	COGNITIONS	3	EMOTIONS	4	PERSONALITY	5
1	PERCEPTION	2	COGNITIONS	3	EMOTIONS	4	PERSONALITY	5	BEHAVIORS			
Unmanaged Crisis	Subject 8-2 – 8-3	1. Summarize the beginning paragraph. 2. Name the three STAGES of the GENERAL ADAPTATION SYNDROME shown in TABLE TWO below.										
TABLE TWO												
<table><tr><td>STAGE I: ALARM REACTION</td><td>STAGE II: RESISTANCE</td><td>STAGE III: EXHAUSTION</td></tr></table>				STAGE I: ALARM REACTION	STAGE II: RESISTANCE	STAGE III: EXHAUSTION						
STAGE I: ALARM REACTION	STAGE II: RESISTANCE	STAGE III: EXHAUSTION										
STAGE I: ALARM REACTION	Subject 8-2	Summarize the three phases in STAGE I: ALARM REACTION.										
STAGE II: RESISTANCE	Subject 8-2	Summarize the two phases in STAGE II: RESISTANCE.										
STAGE III: EXHAUSTION	Subject 8-2 – 8-3	1. Summarize the three phases in STAGE III: EXHAUSTION. 2. Illustrate and discuss the CRISIS CYCLE shown in GRAPHIC ONE below. 3. Focus on the explanations of <i>halt</i> the cycle and how “ <i>non-helpful thoughts</i> ” can increase the cycle (this information will be used later in this group.)										
GRAPHIC ONE												

The Crisis Making Process & The Crisis Coping Process; Volume II; Subject Eight; Pages: 8-1 – 8-15





Skill Building Exercise and Discussion - Suggestions for topic discussion:			Time-Frame
<u>To the Group:</u> <ol style="list-style-type: none"> 1. Have you experienced a crisis? 2. Do you relate to STAGE I: ALARM REACTION of a perceived crisis or shock? 3. Many times an ALARM REACTION is the result of us perceiving or viewing what is actually a <i>problem</i> as a <i>crisis</i> instead. Do you personally relate to a reaction like that? 4. An event can be a <i>situation</i> to one person, a <i>problem</i> to another person, and a yet a <i>crisis</i> to another. The difference many times can be what each person actually <i>tells</i> themselves about the event. Does that sound familiar? 5. Have you experienced a <i>situation</i> that you were able to feed and fester into a full blown <i>crisis</i>? Human beings have a way of doing that from time to time. 6. Do you relate to STAGE II: RESISTANCE where the body stays revved up? 7. Have you found that sometimes your <i>perception</i> of something along with non-helpful thoughts makes it difficult to calm down or to feel balanced? 8. Do you relate to STAGE III: EXHAUSTION where you experience exhaustion or even physical illness? 9. How does that feel? Can you tell that your response to the crisis really wore down your body and affected your emotional stability? 10. When a person is not able to slow down or even halt the crisis cycle by changing their thinking about the event – can you see how a person's <i>perception</i> that an event is a crisis can cause a chain reaction in the brain that leads to the full-blown <i>fight-or-flight</i> response? 11. Once a person is in the fight-or-flight, they are at great risk for relapsing back to the use of alcohol and other drugs. And they are at great risk for the recurrence of psychiatric symptoms. 12. This is why managing a crisis is so important to continued recovery. 			continued 
Psychoeducation Part I: Topics & Focus (continued)	Pages & Location	Presentation Suggestions	
Physical Response to a Crisis	Subject 8-3	<ol style="list-style-type: none"> 1. Summarize first paragraph. 2. Very briefly illustrate and summarize the Physiological Reactions of a Crisis Response shown in GRAPHIC TWO on the next page. 	
<u>To The Facillitator(s):</u> <ol style="list-style-type: none"> 1. You can put the major headings on the board – like PERCEIVED CRISIS → CORTEX, ETC. – and explain the process of the graphic as the parts of the brain respond to a perceived crisis, as shown on the left side of the graphic on the next page. 2. You can also illustrate the outline of the brain on the right side of the graphic and walk through 1. CORTEX, 2. THALAMUS, & 3. HYPOTHALAMUS (or you can actually point to the locations on your own head explaining the process.) 			

The Crisis Making Process & The Crisis Coping Process; Volume II; Subject Eight; Pages: 8-1 – 8-15

Psychoeducation Part I: Topics & Focus (continued)	Pages & Location	Presentation Suggestions	Time- Frame
GRAPHIC TWO			continued
Break			10 Minutes

Psychoeducation Part II: Topics & Focus	Pages & Location	Presentation Suggestions	Time-Frame with Crisis Processing	Time-Frame without Crisis Processing
Crisis Response Results in Physical Changes	Subject 8-3	Summarize the eight common physical changes found in the table located in the text.	 20 Minutes	 25 Minutes
Crisis Response Grid	Subject 8-4	<ol style="list-style-type: none"> 1. Illustrate and summarize the <i>Crisis Response Grid</i> shown in GRAPHIC THREE on the next page. 2. Use the examples provided in the graphic for each of the four columns. 		









The Crisis Making Process & The Crisis Coping Process; Volume II; Subject Eight; Pages: 8-1 – 8-15

Psychoeducation Part II: Topics & Focus (continued)	Pages & Location	Presentation Suggestions	Time-Frame with Crisis Processing	Time-Frame without Crisis Processing																
To The Facillitator(s): Once you have illustrated GRAPHIC THREE (shown below), you can continue this exercise using this same CRISIS RESPONSE GRID illustration. GRAPHIC FOUR and GRAPHIC FIVE of the “CRISIS COPING GRID” actually have the same structure. GRAPHIC FOUR adds “Perception Checks” and “Thought Stopping.” And GRAPHIC FIVE adds the “Challenge Negative Thoughts” and the “Problem Solving Behaviors.”																				
GRAPHIC THREE	<table><tr><th colspan="4">CRISIS RESPONSE GRID</th></tr><tr><th>FOCUS</th><th>PHYSIOLOGICAL</th><th>COGNITIVE/THINKING/PERCEPTION</th><th>BEHAVIORS</th></tr><tr><td>PROBLEM FOCUS Examples: Car Problems Money Problems Housing Problems</td><td>Anxiety, Fear, Nerves (Racing Heart; Sweaty Palms; Agitation; Anger)</td><td>Self-Defeating Thoughts “I’m stupid.” “I always screw up.” “It’s never going to get better.”</td><td>Self-Defeating Behaviors Get drunk. Attempt suicide. Binge and purge. Cut or self-mutilate.</td></tr><tr><td>EMOTIONAL FOCUS Examples: Relationship Not Achieving Goals</td><td>Same as above.</td><td>“I’m responsible for all the bad things.” “I make my friends angry.” “Everyone hates me.” “I’m no good.”</td><td>Self-Defeating Behaviors Let down boundaries. Self-blame. Self-abuse.</td></tr></table>		CRISIS RESPONSE GRID				FOCUS	PHYSIOLOGICAL	COGNITIVE/THINKING/PERCEPTION	BEHAVIORS	PROBLEM FOCUS Examples: Car Problems Money Problems Housing Problems	Anxiety, Fear, Nerves (Racing Heart; Sweaty Palms; Agitation; Anger)	Self-Defeating Thoughts “I’m stupid.” “I always screw up.” “It’s never going to get better.”	Self-Defeating Behaviors Get drunk. Attempt suicide. Binge and purge. Cut or self-mutilate.	EMOTIONAL FOCUS Examples: Relationship Not Achieving Goals	Same as above.	“I’m responsible for all the bad things.” “I make my friends angry.” “Everyone hates me.” “I’m no good.”	Self-Defeating Behaviors Let down boundaries. Self-blame. Self-abuse.		
CRISIS RESPONSE GRID																				
FOCUS	PHYSIOLOGICAL	COGNITIVE/THINKING/PERCEPTION	BEHAVIORS																	
PROBLEM FOCUS Examples: Car Problems Money Problems Housing Problems	Anxiety, Fear, Nerves (Racing Heart; Sweaty Palms; Agitation; Anger)	Self-Defeating Thoughts “I’m stupid.” “I always screw up.” “It’s never going to get better.”	Self-Defeating Behaviors Get drunk. Attempt suicide. Binge and purge. Cut or self-mutilate.																	
EMOTIONAL FOCUS Examples: Relationship Not Achieving Goals	Same as above.	“I’m responsible for all the bad things.” “I make my friends angry.” “Everyone hates me.” “I’m no good.”	Self-Defeating Behaviors Let down boundaries. Self-blame. Self-abuse.																	
Coping With Crisis – Hardiness Factors	Subject 8-4	1. Summarize one paragraph. 2. State the four hardiness factors in the table located in the text.																		
Crisis Coping Grid	Subject 8-4 – 8-5	1. Summarize the four coping skills in the table located in the text. 2. Illustrate and summarize the <i>Crisis Coping Grid</i> shown in GRAPHIC FOUR on the next page. 3. Use the examples provided in the graphic for each of the four columns. 4. Emphasize the changes in BEHAVIORS based on the PERCEPTION CHECKS and THOUGHT STOPPING skills. 5. Illustrate and summarize the <i>Crisis Coping Grid</i> shown in GRAPHIC FIVE on the next page. 6. Emphasize the changes in BEHAVIORS based on the CHALLENGE NEGATIVE THOUGHT skills.																		





The Crisis *Making* Process & The Crisis *Coping* Process; Volume II; Subject Eight; Pages: 8-1 – 8-15

Psychoeducation Part II: Topics & Focus (continued)	Pages & Location	Presentation Suggestions		Time-Frame with Crisis Processing	Time-Frame without Crisis Processing										
GRAPHIC FOUR				continued	continued										
<table><tr><th colspan="4">CRISIS <i>COPING</i> GRID</th></tr><tr><th>FOCUS</th><th>PHYSIOLOGICAL</th><th>COGNITIVE/THINKING/PERCEPTION</th><th>BEHAVIORS</th></tr><tr><td>PROBLEM FOCUS Same as in Crisis Response Grid (Examples: Money Problems Housing Problems)</td><td>The Same as in the Crisis Response Grid Anxiety, Fear, Nerves (Racing Heart; Sweaty Palms; Agitation; Anger)</td><td>Perception Checks “What are my options?” “What resources can I utilize?” Thought Stopping “I will succeed if I try.” “I am in control.”</td><td>Problem Solving Behaviors Assert self. Solicit help. Utilize resources.</td></tr></table>						CRISIS <i>COPING</i> GRID				FOCUS	PHYSIOLOGICAL	COGNITIVE/THINKING/PERCEPTION	BEHAVIORS	PROBLEM FOCUS Same as in Crisis Response Grid (Examples: Money Problems Housing Problems)	The Same as in the Crisis Response Grid Anxiety, Fear, Nerves (Racing Heart; Sweaty Palms; Agitation; Anger)
CRISIS <i>COPING</i> GRID															
FOCUS	PHYSIOLOGICAL	COGNITIVE/THINKING/PERCEPTION	BEHAVIORS												
PROBLEM FOCUS Same as in Crisis Response Grid (Examples: Money Problems Housing Problems)	The Same as in the Crisis Response Grid Anxiety, Fear, Nerves (Racing Heart; Sweaty Palms; Agitation; Anger)	Perception Checks “What are my options?” “What resources can I utilize?” Thought Stopping “I will succeed if I try.” “I am in control.”	Problem Solving Behaviors Assert self. Solicit help. Utilize resources.												
GRAPHIC FIVE															
<table><tr><th colspan="4">CRISIS <i>COPING</i> GRID</th></tr><tr><th>FOCUS</th><th>PHYSIOLOGICAL</th><th>COGNITIVE/THINKING/PERCEPTION</th><th>BEHAVIORS</th></tr><tr><td>EMOTIONAL FOCUS Same as in Crisis Response Grid (Examples: Relationship Not Achieving Goals)</td><td>Still the same as above.</td><td>Challenge Negative Thoughts Don’t expect to change others. Evaluate expectations. Establish your needs. Use “I” statements.</td><td>Problem Solving Behaviors Confront old behaviors. Use recreation. Learn to enjoy time outs. Socialize with others.</td></tr></table>						CRISIS <i>COPING</i> GRID				FOCUS	PHYSIOLOGICAL	COGNITIVE/THINKING/PERCEPTION	BEHAVIORS	EMOTIONAL FOCUS Same as in Crisis Response Grid (Examples: Relationship Not Achieving Goals)	Still the same as above.
CRISIS <i>COPING</i> GRID															
FOCUS	PHYSIOLOGICAL	COGNITIVE/THINKING/PERCEPTION	BEHAVIORS												
EMOTIONAL FOCUS Same as in Crisis Response Grid (Examples: Relationship Not Achieving Goals)	Still the same as above.	Challenge Negative Thoughts Don’t expect to change others. Evaluate expectations. Establish your needs. Use “I” statements.	Problem Solving Behaviors Confront old behaviors. Use recreation. Learn to enjoy time outs. Socialize with others.												
Skill Building Exercise and Discussion - Suggestions for topic discussion:															
To the Group: 1. Have you experienced times that changing your <i>perception</i> or <i>thinking</i> has changed or stopped a crisis? 2. Have you been able to perhaps change a crisis to a problem or even to a situation by changing your thinking? 3. Do you think it might be helpful to change thinking or practice changing thinking in the future?What example does someone have of a “problem” or a “crisis” they have experienced? 4. What physical responses did you have or do you typically have when in crisis? 5. What were/are some <i>self-defeating thoughts</i> or <i>perceptions</i> you had/have about this problem or crisis? 6. How did you behave or what were your <i>behaviors</i> that resulted from any self-defeating thoughts or behaviors?															

The Crisis *Making* Process & The Crisis *Coping* Process; Volume II; Subject Eight; Pages: 8-1 – 8-15

Skill Building Exercise and Discussion - Suggestions for topic discussion: (continued)										Time-Frame with Crisis Processing	Time-Frame without Crisis Processing		
<u>To the Group: (continued)</u> 7. What was your EMOTIONAL FOCUS or how did you feel? What <i>unhelpful</i> thoughts did you have? How did those unhelpful thoughts affect your behavior? 8. Now taking that same problem and the same physical responses – what PERCEPTION QUESTIONS can you ask yourself? 9. What THOUGHT STOPPING statements can you make? 10. How can that make a change in your PROBLEM SOLVING BEHAVIORS? 11. Now given the same Problem and the same EMOTIONAL FOCUS – what thoughts can you have to CHALLENGE NEGATIVE THOUGHTS? How would that make a difference in your PROBLEM SOLVING BEHAVIORS? 12. Great...let’s go with another example from someone else in the group for more practice with this skill. Who’s got an example of a problem or a crisis?										 continued 	 continued 		
Psychoeducation Part III: Topics & Focus			Pages & Location		Presentation Suggestions					Time-Frame with Crisis Processing	Time-Frame without Crisis Processing		
Self-Instruction to Cope With An Event			Subject 8-5		1. Summarize one paragraph. 2. Discuss the four points in TABLE ONE below using the explanations located in the text.					 10 Minutes 	 15 Minutes 		
TABLE ONE													
1	BEFORE THE FEARED EVENT		2	JUST BEFORE THE EVENT		3	DURING THE EVENT		4	RIGHT AFTER THE EVENT			
Evaluating Crisis Event			Subject 8-5		1. Summarize one paragraph. 2. Discuss the five points in TABLE TWO below using the explanations located in the text.								
TABLE TWO													
1	COGNITIVE/THINKING DISTORTIONS		3	EMOTIONAL RESPONSE			5	BEHAVIORAL RESPONSE					
2	PERCEPTION OF THE EVENT		4	COPING STRATEGIES									

The Crisis *Making* Process & The Crisis *Coping* Process; Volume II; Subject Eight; Pages: 8-1 – 8-15

Skill Building Exercise and Discussion - Suggestions for topic discussion: (continued)	Time-Frame with Crisis Processing	Time-Frame without Crisis Processing
<u>To the Group:</u> 1. How do you think the self-instruction suggestions can be helpful to you personally? 2. What situation would you use one or more of these instructions to cope with an event? 3. How do you relate to the points of evaluating crisis and coping skills? 4. Which of these statements do you currently use successfully? 5. Which one will you begin practicing? 6. What situation or perceived crisis might that be the most helpful in coping with?	 continued 	 continued 
Crisis Processing	Time-Frame	
1. Ask the group member(s) to tell the group what happened. 2. Explore options and/or develop an immediate plan for coping. 3. Allow the group to offer support.	10 Minutes	
Group “Paper Work”	Time-Frame	
Group participants fill out Group Notes.	5 Minutes	
Group Closure	Time-Frame	
1. Read a daily brief meditation for the day, <i>or</i> 2. Ask each group member to name something they are grateful for today, <i>or</i> 3. Ask a group member to read aloud an inspirational reading or message of your choice.	5 Minutes	