



MOOC 2 - Learning Unit 4

Chapter 5 - Methods

GOOD PRACTICES

Title: Group intervention in a crisis situation

This is a fictional case study.

Intervention during a 5-day seminar in a High School, with the teaching staff, and also the school psychologist and the nurse. The seminar was organized by a group of psychologists.

Setting

The structure of the seminar included daily theoretical lectures and experiential groups of different sizes (median, and large groups), as well as lunch and coffee breaks, where all 40 participants gathered in a common venue. For five days, they all experienced a community setting.

The stressor event

During the 3rd day of the seminar, an incident occurred while all the participants were gathered for a lecture. During the presentation, one of the female members felt unwell, something that was noticed by her nearby colleagues, who worried about her. Suddenly she fell from her chair, with a thump, having lost her consciousness. The person who was sitting next to her screamed, others got off their seats and began to run in a panic, seeking for medical help. Of course, the lecture was interrupted.

Despite the confusion, someone finally called for an ambulance, that arrived after a while, which seemed like a century to all. The woman was still unconscious, and many became frozen with fear,



as they believed she was dead. The ambulance took the unconscious woman to the nearest hospital.

After the ambulance left the building, there was a heavy silence that lasted at least for 5 minutes, while the members of the seminar returned to the room, waiting for news from the hospital. Some of them were praying. Gradually, small talks began, as people gathered in groups of three or four persons.

The Intervention

Then, one of the female staff members, who was a mental health practitioner, invited all the participants to take their seats again and form a big circle, which they did. Then, she asked them to feel free to express whatever came to their mind, regarding the incident that just happened.

Different feelings, thoughts, and perceptions of what they had just experienced were reported. The encouragement by the mental health professional gave voice to all different perceptions and views and, slowly, the capacity of recollecting the event was achieved. From an initial state of speechlessness, overwhelmed by their emotions, the participants began slowly to respond and communicate with each other, openly. At the beginning, their feelings and thoughts were randomly expressed: from shock to confusion and then to fear and anxiety for their colleague and the possibility of losing her life. Feelings of helplessness and hopelessness became more intense. Also, a sense of incapability and impotence was revealed by the nurse who was present.

Talking about the event, putting everybody's personal perception in the right temporal sequence, as well as talking about their emotions, allowed the group to proceed into thinking, regaining calm and control. In the next day, staff and participants were informed that the hospitalized colleague was getting better from a heart attack.

Questions:

1. In this situation, what type of group intervention did the mental health professional choose, in order to ease the emotional burden of the participants of the seminar?
 - a. Reflective Practice
 - b. Debriefing
 - c. Psychoeducation
 - d. Peer Group

2. Which are the signs/indications that led the mental health professional to choose this specific intervention?
 - a. confusion and freezing
 - b. heavy silence in the room
 - c. screaming and panic
 - d. availability of the mental health professional



3. Why didn't the mental health professional oblige all members to participate in the group intervention?
 - a. Participation must be open and willing
 - b. The mental health professional thought that not all the participants needed it
 - c. The intense feelings were expressed during the small talks in subgroups
 - d. In order to allow the reenactment of the stressor event
4. Why did the mental health professional invite the participants to freely express whatever came to their mind, regarding the incident?
 - a. To achieve more intimacy between the participants
 - b. To avoid extreme emotional expressions
 - c. To organize their thoughts
 - d. To enable down warding the trajectory of distress
5. How was it possible to achieve a more realistic perception of the facts?
 - a. By giving a new version of the facts
 - b. By expressing emotions
 - c. By enabling the participants to share their recollection of the facts
 - d. By speculating on the medical condition of the colleague who fainted
6. In this intervention, the reaction phase enabled
 - a. Normalization of the emotional responses
 - b. Realistic recollection of the facts
 - c. Avoidance of traumatization
 - d. Intimacy between participants

You may also update your knowledge:

Diaz-Navarro, C., Leon-Castelao, E., Hadfield, A., Pierce, S., Szyld, D. 2021. Clinical debriefing: TALK© to learn and improve together in healthcare environments. *Trends in Anaesthesia and Critical Care*.
<https://doi.org/10.1016/j.tacc.2021.07.004>

