

1996

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Recommended Citation

Brian Easton, *Crisis Intervention for Legal Counselors*, 1996 J. Disp. Resol. (1996)
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Crisis Intervention for Legal Counselors

*Brian Easton**

I. INTRODUCTION

Day-dreaming about financial success, family life, health issues, or an upcoming vacation while driving a car can be an irreversible mistake. A blur that appears on the right side, can within seconds be followed by a forced impact that rotates the car into the guardrail and a world that spins out of control. The next memory will not be of financial prowess or an exciting summer vacation, but of scattered images of doctors, family, and excruciating pain. When the ordeal is over, the tragedy begins as the loss of mobility confines the a hopeful person to a wheel chair and a life with restraints.

Farfetched? Perhaps, but tragedy and crisis strike the unexpected and unprepared. For some time the crisis may be nothing more than a simple disagreement between a husband and a wife over an unannounced Internal Revenue Service audit. For others, it may be the bonus not received or an expected promotion given to a less qualified employee. Crisis strikes at the heart strings of life and is an unwelcome visitor that lingers to inflict a tailor-made personal trial. What is the response of the victim? For the optimist it is a refiner's response that ennobles the sufferer, yet for the realist it carries seeds of embitterment and depression.

Although crisis is experienced in some form by all people, few understand the process and even fewer are willing to undergo the agony before growth can be realized from such a disruptive experience. Through this article, the definition of crisis and potential positive or negative reactions to crises are explored. This article is written with the hope that readers will gain understanding of the stages endured in crisis and knowledge of a sufferer's adaptive or maladaptive behavior. Such knowledge would greatly benefit attorneys in their lawyer-client relationships.

To assume clients phone for legal appointments with mere problems is to negate the initial thrust that propels the need for legal advice. A crisis is often this propelling factor, and an attorney must be able to understand, act from a knowledgeable position, empathize and know the legal and nonlegal implications facing the client. To be stationary, aloof, or combative when a client's situation roars toward a crisis peak, is to fail as a legal counselor.

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II. CRISIS THEORY

Gerald Caplan, a renowned author in the development of crisis theory, describes crisis as a state of being that blocks life goals and proves insurmountable when using customary coping behaviors.¹ His theory assumes that each individual attempts to maintain a homeostatic state of equilibrium during all phases of life.² Caplan theorizes that the individual is able to maintain equilibrium by employing adaptive maneuvers and problem solving strategies.³ His theory concludes that adaptive maneuvers are innate in every individual and are utilized as a relief from the tension and stress associated with crisis.⁴

As compelling as Caplan's rationale is for crisis solving, initially it appears fundamentally too basic and naive. Obviously equilibrium cannot be always maintained by each individual encountering every life crisis. It is unclear what experiences in life will push an individual over the edge and into crisis. Will it be the death of a loved one, the loss of a leg, a divorce, or a business transaction gone sour? Will any of these crises or a combination result in a state of uncontrollable crisis and disequilibrium?

Caplan recognizes the notion of disequilibrium in crisis, as he theorizes that if a given situation impedes life goals, then the individual experiences disequilibrium -- the beginning phase of a crisis.⁵ Caplan purports that if disequilibrium occurs, the individual attempts to reequilibrate by implementing normal adaptive maneuvers or problem solving strategies that have been effective in the past as a means of reequilibration.⁶ Sometimes these adaptive maneuvers or coping techniques are successful and the individual returns to equilibrium without ever experiencing a real crisis.⁷ When equilibrium is not achieved through normal coping mechanisms, the beginning stage of crisis becomes full blown, and the individual feels as if caught in the storm of life without a rudder and begins to experience actual crisis.

Caplan fails to note that the emergence or resolution of crisis coincides with the five step transformation process.⁸ These five steps are: 1) denial - denying that a problem or crisis exists; 2) acceptance - accepting the possibility that the individual may be part of the problem and moving towards an appropriate resolution of the problem; 3) sacrifice - humbling oneself by some ritual mortification process or sacrificing something such as greed, arrogance, or the possibility of winning; 4) leap of faith - willing to make a sacrifice to help resolve

1. ELLEN H. JANOSIK, *CRISIS COUNSELING, A CONTEMPORARY APPROACH* 7 (1984).

2. KIERAN O'HAGAN, *CRISIS INTERVENTION IN SOCIAL SERVICES* 17, 18 (1986).

3. *Id.*

4. JANOSIK, *supra* note 1, at 7.

5. *Id.*

6. KENNETH FRANCE, *CRISIS INTERVENTION: A HANDBOOK OF IMMEDIATE PERSON-TO-PERSON HELP* 5 (1982).

7. *Id.*

8. Gerald Williams, Handout from Legal Negotiation and Settlement Class, 12-14 (Winter 1995) (on file with the author).

the conflict, usually a risky process; 5) renewal - healing after the conflict or emergence from the crisis as a stronger, healthier person. The optimum outcome of crisis and the transformative process is for a person to reach renewal.⁹ Caplan fails to express that it is only through this transformation process that a proper resolution of a crisis can become a reality.

A. Crisis Can Be Beneficial

Any crisis situation may appear to be negative on the surface, but noted sociologists tend to associate crisis with opportunity for personal growth.¹⁰ W. I. Thomas, a social theorist, views crisis as "a catalyst that disturbs old habits, evokes new responses, and becomes a major factor in charting new development."¹¹ When taking the view of Thomas, crisis can be seen as a call to new action, a challenge to achieve new coping mechanisms, a strengthening of adaptive capacity, and an increase in personal-mental health.¹² This "upbeat" view of crisis turns the tragedy 180 degrees away from the focus of a stressful and often painful period to a center view of the positive consequences that result from a crisis situation being properly handled and resolved.

Is this optimism or "eye of the storm" realistically based? Professionals in the helping field claim: "YES!"¹³

III. CHARACTERISTICS OF CRISIS

The approach to crisis will differ for each individual in intensity, ability to resolve, and need for outside help, because every individual has different environmental challenges, personality traits, and personal subjective evaluations of the stressfulness of the event. However, two essential characteristics of crisis are common threads found in any crisis situation. These common elements are that a crisis is always precipitated by a specific event and that the crisis is always resolved quickly.¹⁴

The first common characteristic is that crisis is always precipitated by a specific, identifiable event.¹⁵ In psychological terms, this event is called a

9. *Id.*

10. JANOSIK, *supra* note 1, at 8.

11. E. Volkart, *Social Behavior and Personality Contributions of W. I. Thomas to Theory and Social Research*, SOCIAL SCIENCE RESEARCH COUNCIL, 12-14 (1951) (cited in, Lydia Rapoport, *The State of Crisis: Some Theoretical Considerations*, 36 SOC. SERVICE REV. 211-12 (1962)).

12. Rapoport, *supra* note 11, at 212.

13. *Id.*

14. JANOSIK, *supra* note 1, at 7. *See also*, LAWRENCE H. COHEN ET AL., *HELPING PEOPLE IN CRISIS* 14 (1980).

15. JANOSIK, *supra* note 1, at 7.

"precipitator."¹⁶ The effect of the precipitator is to thrust or hurl the individual from a homeostatic equilibrium into a state of disarray or confusion resulting in disequilibrium.¹⁷ Once disequilibrium occurs, the individual has begun to experience a true crisis; a full blown emergency.

The second common characteristic associated with crisis is that the crisis will always be resolved within a brief period of time, usually four to six weeks.¹⁸ Many query as to how this second characteristic could be true as problems and trials often last months or years without ever reaching a resolution. Can sight be restored to the blind? Can the lame run marathons? The answer to these queries and other similar questions is that although the problem might last for years or even a lifetime, the actual state of crisis experienced by the individual will only last four to six weeks. Crisis is not simply caused by the precipitating event, but it is the inability to cope with the new problem coupled with the event that forces the individual into disequilibrium and crisis.¹⁹ Because crisis is only present for a narrow six week window, quick action is necessary.

Although the time frame for a crisis is brief, the stress and tension experienced can make this period seem eternal. The stress and tension surrounding a crisis, however, may be shortened if the individual employs adaptive techniques.²⁰ If new adaptive techniques are successfully implemented the individual will achieve better mental stability because the newly adaptive skills have been added to the subconscious and the individual experiences increased growth or a higher state of equilibrium as a result of the crisis.²¹

When confronted with a crisis that endures longer than six weeks, the individual has two options for resolution. The individual will either find a new coping mechanism which satisfies and resolves the crisis, or the individual will implement a maladaptive behavior that helps conclude the crisis and alee the stress, but does not actually resolve the problem.²² Although most individuals can sustain a great degree of stress and anxiety, this stress must be short-term or subconsciously the individual will implement a maladaptive behavior as a means of relieving the stress associated with the extended duration of the crisis.²³

If the individual adopts a new adaptive mechanism the individual will experience growth and increased mental health.²⁴ If the second option is chosen and a maladaptive behavior is adopted the individual will not experience growth, but will merely relieve the feelings of stress.²⁵ It is the adaptive behavior

16. *Id.*

17. *Id.*

18. COHEN, *supra* note 14, at 14.

19. JANOSIK, *supra* note 1, at 9.

20. FRANCE, *supra* note 6, at 11-12.

21. DOUGLAS A. PURYEAR, *HELPING PEOPLE IN CRISIS* 8 (1980).

22. *See*, discussion *infra* part IV.B.1, where adaptive and maladaptive coping mechanisms and behaviors are described and listed.

23. JANOSIK, *supra* note 1, at 9.

24. COHEN, *supra* note 14, at 14.

25. FRANCE, *supra* note 6, at 11.

implementation which leads noted sociologists to suggest that crisis provides a narrow six week window in which the individual has the opportunity to learn grow and become more mentally stable.²⁶

IV. STAGES OF CRISIS

A. Phase One: Impact

Once attorneys understand the definition, theory, and characteristics of crisis, they can begin examining the specific phases associated with crisis resolution. Crisis generally begins with a precipitator in the form of a hazardous event impeding the life goals of the individual.²⁷ The first phase of crisis focuses on the reactions to the precipitator and the feelings associated with a seemingly insurmountable problem.²⁸ In phase one of crisis, the individual implements normal coping strategies in an attempt to alee the stress and thereby avoid the problem.²⁹ If any of the normal coping strategies are successful, then crisis is averted and the individual returns to a state of equilibrium.³⁰ If the normal coping mechanisms do not resolve the problem or relieve the stress, however, the individual is impacted by the crisis and disequilibrium.³¹

B. Phase Two: Coping

The tension associated with the failure of customary coping mechanisms to return the individual to equilibrium begins the second stage of crisis.³² As tension increases, the individual realizes cognitive and emotional distortion, or in crisis terminology -- disequilibrium.³³ Characteristics of phase two of a crisis include feelings of being overwhelmed with the hazardous aspects of the crisis dominating thought, attention, and eventually one's entire life, and feelings of helplessness in finding a solution.³⁴

When the individual reaches this point in the crisis, sociologists concur that an opportunity for mental and emotional growth exists.³⁵ Becoming more desperate and realizing that the increase in pressure continues, the individual has a strong motivation to attempt new problem solving approaches and seek help

26. COHEN, *supra* note 14, at 14.

27. JANOSIK, *supra* note 1, at 7.

28. FRANCE, *supra* note 6, at 6.

29. O'HAGAN, *supra* note 2, at 13-14.

30. JANOSIK, *supra* note 1, at 7.

31. *Id.*

32. FRANCE, *supra* note 6, at 9.

33. JANOSIK, *supra* note 1, at 7.

34. *Id.*

35. Rapoport, *supra* note 12, at 211-12.

from outside sources.³⁶ Because of this strong motivation, individuals will often implement new approaches to the crisis in an attempt to relieve the tension.³⁷ As a result of these attempts growth, change, and improved mental health may occur.³⁸

Part of the growth process during this second stage of crisis is experienced as the individual turns to significant others in life for help, such as friends, family, and even attorneys.³⁹ In this stage the individual is extremely vulnerable because normal adapting techniques have failed to alee the problem.⁴⁰ A new willingness to consider alternatives and suggestions from others is apparent.⁴¹ Too often, good assistance is not readily available. If the individual feels that nobody is attempting to help resolve the crisis, often a dramatic "cry for help" is initiated.⁴² This cry may take the form of depression, anxiety, verbal outbursts or even suicide.⁴³ Sociologists estimate that two-thirds of all suicide attempts are a "cry for help and rescue" rather than an attempt at death.⁴⁴

1. Coping Techniques used during a Crisis

As the individual experiments with the coping stage of a crisis, new adaptive techniques and devices are attempted.⁴⁵ Because of the desperation felt by the individual, a greater willingness exists to try several new techniques, in an effort to relieve the stress and pain.⁴⁶ Unfortunately, often these new techniques are maladaptive resulting in no growth and increasing future susceptibility to emotional disturbance.⁴⁷ Occasionally, the new technique employed is adaptive and brings growth and maturity in mental health to the individual.⁴⁸

2. Maladaptive Coping Techniques

Social scientists may characterize a crisis in a positive connotation; however, the individual experiencing the crisis will face many unpleasant emotions and tension in a negative connotation.⁴⁹ These unpleasant feelings create an urgent

36. COHEN, *supra* note 14, at 14-15.

37. JAMES L. GREENSTONE & SHARON C. LEVITON, CRISIS INTERVENTION 14-15 (1982).

38. COHEN, *supra* note 14, at 14.

39. JANOSIK, *supra* note 1, at 8.

40. *Id.*

41. COHEN, *supra* note 14, at 14-15.

42. FRANCE, *supra* note 6, at 10.

43. *Id.*

44. *Id.*

45. JANOSIK, *supra* note 1, at 7-9.

46. FRANCE, *supra* note 6, at 9-10.

47. *Id.* at 11.

48. COHEN, *supra* note 14, at 14.

49. JANOSIK, *supra* note 1, at 7.

need to relieve the stress, anxiety, and pain.⁵⁰ Often these destructive emotions can be relieved by momentary stop-gap efforts which are merely maladaptive techniques which provide no opportunity for growth and merely relieve the amount of stress and tension felt by the individual.⁵¹ Stop-gap maladaptive techniques include: 1) denying the existence of the problem; 2) distorting the reality of the facts; 3) blaming or projecting the responsibility for the problem upon others; 4) developing an unbending attitude or restricted viewpoint; 5) converting psychological difficulties into physical symptoms, such as insomnia or headaches; and 6) avoiding the problem through drinking or other avoidance techniques.⁵²

Maladaptive techniques are closely linked to Freud's defense mechanisms.⁵³ Psychologist Sigmund Freud believed an individual will rely upon a defense mechanism when facing a problem.⁵⁴ Freud's defense mechanisms include: repression - unconsciously forgetting the event; sublimation - redirecting an impulse into a socially acceptable norm; projection - viewing feelings or ideals as if coming from the environment, not from within; denial - perceiving reality factors as if nonexistent; introjection - incorporating a trait in order to destroy it; reaction formation - employing a different attitude to prevent emergence of one more painful; undoing - implementing one act to neutralize a different objectionable act; regression - temporary movement to an earlier more appropriate stage of psychological development; rationalization - substitution of an acceptable reason for an unacceptable reason in order to explain behavior; and displacement--moving the affect of one object onto another.⁵⁵

If any of the above techniques are utilized by an individual, stress may be relieved, but the underlying problem and the crisis remain unresolved.⁵⁶ Stop-gap efforts or maladaptive techniques only relieve the stress and unpleasant feelings for the present, but do not promote increased learning, potential for growth, or long-term improvement in mental health.

Employing maladaptive stop-gap techniques will temporarily relieve the stress and unwanted emotions, studies have shown that similar problems will continue to be repeated throughout life until an adaptive solution to the problem is created.⁵⁷ Lydia Rapoport, a premiere crisis sociologist, feels that new threats will reactivate unresolved or partially resolved unconscious conflicts.⁵⁸ Rapoport concludes that the previous failure to resolve a crisis may act as an additional

50. FRANCE, *supra* note 6, at 9.

51. *Id.* at 10-11.

52. *Id.* at 11.

53. PURYEAR, *supra* note 21, at 5.

54. ANDREW S. WATSON, PSYCHIATRY FOR LAWYERS 151 (1978).

55. *Id.* at 156-74 (1978) (listing and defining the various Freudian defense mechanisms employed by individuals).

56. FRANCE, *supra* note 6, at 11.

57. Rapoport, *supra* note 11, at 213.

58. *Id.*

burden in the present crisis situation.⁵⁹ This conclusion has proven valid. Several studies have shown that during a crisis memories of old problems symbolically linked to the present situation may emerge and link into consciousness with the emergence of a new crisis.⁶⁰ Because crisis elicits extreme energy, it can operate as a "second chance" in correcting earlier problem solving techniques where the individual relied upon maladaptive behaviors.⁶¹

Although maladaptive stop-gap techniques may seem like a quick fix to a major problem, they only cover the injury instead of treating the actual problem, and just like a wound, the crisis will continue to fester and bother the individual until appropriate action is taken. Because stop-gap techniques are only a temporary fix, it is important to employ adaptive coping techniques and resolve the problem permanently.

3. Adaptive Techniques

If the individual is willing to face the crisis and employ adaptive coping mechanisms then the individual will experience a decrease in helplessness, frustration and anxiety.⁶² Implementing adaptive behavioral changes will help the individual know that the problem was realistically confronted, resolved, and that the unpleasant circumstance is in the past.⁶³ Utilizing an adaptive technique will also provide one more arrow in the unconscious arsenal for dealing with similar crisis situations in the future.

Several adaptive coping mechanisms are available for implementation in crisis intervention and resolution. To employ an adaptive technique, an individual must: 1) recognize the problem, not some type of distortion or reaction to that problem; 2) explore and understand the situation that created the crisis; 3) develop a goal to move from the crisis phase to problem solving; 4) recognize and express the negative as well as the positive emotions surrounding the crisis; 5) determine whether the situation can be changed, and if change is not possible express grief, anger, frustration and then move toward acceptance of the new situation; 6) redefine the problem in workable terms or in "bite size" portions; 7) maintain confidence in the ability to persevere and move forward in life; and 8) take time-out from wrestling with the problem (perhaps days or weeks) and allow a restorative process before making a new thrust.⁶⁴

It may sound simple to presuppose that these adaptive techniques will change behavior and ultimately attitude towards crisis; yet, if adaptive techniques are implemented, the individual will experience growth and increased mental health

59. *Id.*

60. Mary A. Sarvis et al., *A Concept of Ego-oriented Psychotherapy*, 20 *PSYCHIATRY* 277, 87 (1959) (cited in Rapoport, *supra* note 11, at 213).

61. Rapoport, *supra* note 11, at 213.

62. FRANCE, *supra* note 6, at 11.

63. *Id.*

64. *Id.* at 11-12.

because a new adaptive coping technique has been added to the arsenal of unconscious coping mechanisms.⁶⁵ The emergence from the fire of crisis to a better person, with stronger mental health and more adaptive techniques to deal with future problems will be the lasting result. The try for adaptability is worth the effort.

C. Phase Three: Withdrawal

Withdrawal, the title of the third phase of crisis, results when all efforts to cope with the crisis in phase two have failed.⁶⁶ No matter what techniques were attempted, either adaptive or maladaptive, the tension, stress, and anxiety never abated.⁶⁷ Ill feelings and emotional instability combine in individuals and run chaotically rampant as phase two (coping) fails to achieve even momentary equilibrium.⁶⁸ Because of the continual pressure associated with the failure of any coping mechanisms to resolve problems, individuals withdraw from the search for solutions and admit failure.⁶⁹ This withdrawal mechanism, when triggered by the failure to cope, becomes closely aligned within the unconscious escape strategy.⁷⁰ The most extreme form of escape is suicide, but even the mildest form used in phase three can result in severe psychological difficulties signalling failure and a lack of self-worth.⁷¹

Fortunately, most individuals accept some type of adjustment, whether adaptive or maladaptive, before being thrust into withdrawal and complete failure. If a resolution is not achieved in phase two, individuals will be unable to endure the mounting tension and will continue seeking a release from the unpleasant feelings through implementation of an escape mechanism.⁷² It is imperative that there be an escape and a final conclusion to the crisis, even if the conclusion is mental illness or suicide.⁷³

D. An Example of an Individual in Crisis

Before addressing why an attorney should be knowledgeable about the crisis theory and the characteristics and phases an individual in crisis experiences, it is helpful to review an example of an individual experiencing crisis. The example is taken from a book written by Douglas A. Puryear.⁷⁴

65. RAPOPORT, *supra* note 11, at 211-12.

66. FRANCE, *supra* note 6, at 13.

67. *Id.*

68. CHARLES EWING, CRISIS INTERVENTION AS PSYCHOTHERAPY 14 (1978).

69. FRANCE, *supra* note 6, at 13.

70. *Id.*

71. EWING, *supra* note 69, at 14.

72. JANOSIK, *supra* note 1, at 9.

73. FRANCE, *supra* note 6, at 13-14.

74. PURYEAR, *supra* note 21, at 15-17.

Puryear describes a character, Mrs. T, who separated from her husband because she believed he was sexually abusing her teenage daughter.⁷⁵ About five months after the initial separation Mr. T, the estranged husband, committed suicide.⁷⁶ Following the suicide Mrs. T began dating heavily and spending many nights bar hopping and staying out past dawn.⁷⁷ One evening when Mrs. T arrived home about 1:30 in the morning and discovered her teenage daughter drinking beer with some of her friends.⁷⁸ This blatant indulgence pushed Mrs. T over the edge, and in the ensuing argument Mrs. T struck her daughter with a shoe.⁷⁹ The daughter reacted to her mother's outbursts by running away from home and reporting Mrs. T for child abuse.⁸⁰ In psychological therapy, Mrs. T complained of stomachaches, heart murmurs, and other health problems.⁸¹ After several weeks of therapy, Mrs. T and her daughter were reunited.⁸²

Even a brief analysis of this short scenario can be very intricate and difficult. Clearly, Mrs. T experienced a crisis, but what was the precipitator to the crisis? Was the crisis the conclusion that her husband was sexually abusing her daughter? The suicide of her husband? The beer party attitude of the mother mimicked by the daughter? The daughter running away from the home? Or, the accusation of child abuse? It is vitally important to correctly identify what exactly began or precipitated the crisis because the first step in utilizing adaptive coping techniques is to recognize the problem.

Although several possible events could be the precipitator of the crisis, Mr. T's suicide appears to be the trigger event. The problems faced by Mrs. T. did not begin at separation, but started after the suicide. Apparently, Mrs. T. was unable to adjust to the suicide with her normal coping mechanisms. She could not compensate for the added stress and guilt feelings associated with the premature death of her estranged husband. The partying and physical ailments used by Mrs. T. were inadequate coping mechanisms. The abuse Mrs. T. heaped upon her daughter was a discharge of stress in an attempt to relieve the unpleasant emotions surrounding the crisis. Fortunately, Mrs. T. and her daughter endured the crisis by discovering some type of coping technique, either adaptive or maladaptive, and averted stage three (withdrawal). Perhaps psychological counselors could claim that adequate coping mechanisms were employed by Mrs. T. once counseling began, but it is much more likely that one of the maladaptive techniques resolved the problem. In either situation, the six week crisis period elapsed and both Mrs. T. and her daughter were once again able to continue in a state of equilibrium.

75. PURYEAR, *supra* note 21, at 15-17.

76. *Id.*

77. *Id.*

78. *Id.*

79. *Id.*

80. *Id.*

81. *Id.*

82. *Id.*

V. AN ATTORNEY MUST BE CONCERNED ABOUT CRISIS

With an understanding of the stages, processes, and coping mechanisms of crisis, it is appropriate to consider why an attorney should be concerned with crisis. An attorney is often termed a "counselor." Counseling has been defined as a professional service designed to accelerate the growth of the client.⁸³ When a client comes to an attorney, the client is usually seeking to resolve a difficult problem so growth can continue.⁸⁴ Obviously the principal role of the counselor (attorney) is to help clients achieve effective solutions to their problems.⁸⁵

Too often, the attorney is characterized as a legal/factual analyzer: the attorney only needs to know the law and how to apply the facts of the law to the client's situation to solve all of the client's problems.⁸⁶ When solving a client's problem, however, the legal counselor must do more than simply relate relevant legal principles. The attorney must also know the client's individual circumstances and understand each client's unique goals, including a client's nonlegal agenda.⁸⁷

To be a true counselor the attorney must gather information about all of the client's concerns, both legal and nonlegal.⁸⁸ This means the attorney must intertwine the client's legal and nonlegal goals, including the economic, social, and psychological consequences of a proposed decision.⁸⁹ Attempting to solve a client's legal and nonlegal agenda is termed the "client-centered approach."⁹⁰ Utilizing this approach gives clients a greater sense of security and trust because the problem is jointly identified, potential solutions are carefully formulated, and proper decisions are made by both the attorney and the client.⁹¹ Incorporating the client into the decision making process will help resolve both the legal and nonlegal concerns of the client, resulting in the correct resolution of the problem.

When a client enters a legal office he or she is usually experiencing extreme stress and anxiety and somewhere in the second stage of crisis. Recall that in stage two, individuals turn to attorneys in the hope that an attorney will suggest a workable solution and an effective adaptive coping mechanism to the problem.⁹² If an attorney suggests an adaptive mechanism which effectively resolves the crisis, the attorney will not only have helped solve the legal problem, but will also diminish the stress felt by the client and serve as a catalyst for growth and self-learning on behalf of the client. This help not only will benefit

83. JOHN J. PIETROFESA ET. AL., *THE AUTHENTIC COUNSELOR* 4 (1978).

84. See, e.g., DAVID A. BINDER ET. AL., *LAWYERS AS COUNSELORS CALL ON A CLIENT CENTERED APPROACH* 2 (1991).

85. *Id.* at 3.

86. See, e.g., THOMAS L. SHAFFER & JAMES R. ELKINS, *LEGAL INTERVIEWING AND COUNSELING IN A NUTSHELL* 3 (1987).

87. BINDER ET AL., *supra* note 85, at 5.

88. *Id.* at 3-5, 8-10.

89. *Id.* at 8-9.

90. *Id.* at 16-17.

91. *Id.* at 17-19.

92. See *supra* notes 33-42 and accompanying text regarding stage two of crisis.

the client, but will strengthen the legal result; a more favorable solution will be achieved because it encompasses both the client's legal and nonlegal concerns.

VI. CRISIS INTERVENTION PRINCIPLES SHOULD BE APPLIED BY AN ATTORNEY WHEN INTERVIEWING CLIENTS

Crisis intervention attempts to mobilize and channel an individual's personal resources toward finding an alternative adaptive coping mechanism as a means of resolving the personal crisis.⁹³ The task associated with an intervener is to identify possible adaptive resolutions to the crisis, move the individual away from maladaptive behaviors, and provide a solid base for problem solving.⁹⁴

Successful interveners possess common characteristics and personal attributes. These attributes compromise effective communication which includes empathy, warmth, and the ability to give reassurance and advice to the client.⁹⁵ Sincere care, the skill of listening, and approachability are a given in the legal profession.⁹⁶ Successful interveners also will pose economic, social, and psychological questions, stating each question in an explicit manner so as to gather the most pertinent information possible in a nonthreatening manner.⁹⁷

Legal counsel should comply with the three guidelines suggested for successful intervention. When dealing with a client experiencing crisis, the first criterion an attorney or intervener must follow is to act immediately.⁹⁸ It is unacceptable in intervention to wait, pause, or put the client on hold because the more time that is spent by the client wrestling with the problem, the greater the likelihood that a maladaptive defensive mechanism will be employed.⁹⁹ After the individual experiencing the crisis contacts the attorney, intervention should begin as soon as possible.¹⁰⁰ Generally, crisis intervention should begin within twenty-four hours of the initial application. If a delay of two or more weeks occurs prior to seeing a client, one sociologist suggests that a loss of "spontaneously generated receptivity" to treatment will result and may preclude the effectiveness of crisis intervention.¹⁰¹ When help is sought, the six week window for effective intervention starts. The longer an intervener waits, the shorter the six week window becomes for effective intervention.

The second guideline for interveners and attorneys who are attempting to help individuals through a crisis is to limit the amount of disorganization experienced by the client. The attorney can achieve this by assuming some amount of control

93. JANOSIK, *supra* note 1, at 13.

94. GREENSTONE & LEVITON, *supra* note 37, at 20.

95. See, e.g., FRANCE, *supra* note 6, at 24-25.

96. GREENSTONE & LEVITON, *supra* note 37, at 19-20.

97. *Id.*

98. See, e.g., FRANCE, *supra* note 6, at 15.

99. *Id.*

100. GREENSTONE & LEVITON, *supra* note 37, at 17.

101. EWING, *supra* note 69, at 20.

over the situation; thereby, providing structure to the life of the individual in crisis individual.¹⁰² Taking control of the situation will reduce the tension, turmoil, and unpleasant emotions the client feels because a majority of the problem solving effort has been removed from his or her shoulders. The amount of control assumed should be dictated by either the enormity of the crisis, or the stress and anxiety of the client.¹⁰³ Some situations may require dominance by the attorney in order to bring some stability and tension release to the chaos created by the crisis.¹⁰⁴ Other crisis situations may warrant leaving the client, who is more reasonable, with some degree of control and responsibility.¹⁰⁵ In either case, the amount of control assumed is determined by the intervener or attorney.

When intervening on behalf of a client, the legal counselor should attempt to calm and relieve as much of the client's anxiety and stress as possible.¹⁰⁶ Relieving the stress can be accomplished by explaining the situation to the client and calmly relating possible remedies to the situation.¹⁰⁷ In a legal context, this means that the attorney should inform the client what is being done to resolve the case, and what remedies are possible. The attorney should also tell the client that this crisis is only a temporary state.¹⁰⁸ Finally, the attorney or intervener should remain confident that a favorable solution eventually will be achieved.¹⁰⁹ The intervening attorney, however, must remember that unreasonable solutions are not helpful and it is important to maintain a firm grasp on the crisis situation.

The third criterion which attorneys and interveners must follow is to encourage the client to speak freely and ventilate positive and negative feelings.¹¹⁰ One simple way to encourage conversation and the necessary venting by the client is to avoid interrupting the client while the crisis situation is verbally unfolded.¹¹¹ Often, if no interruption is made by the attorney, the individual experiencing crisis skims over points and further clarification is needed. The attorney or intervener should wait until the client has finished speaking, and only then return the focus of the client back to the issues that need more detailed information.¹¹² Should discrepancies arise surrounding the crisis incident, outside information may be obtained from others who are aware of the crisis situation, but the intervener should not argue with the client concerning the facts of the crisis.¹¹³

102. GREENSTONE & LEVITON, *supra* note 38, at 17.

103. See, e.g., FRANCE, *supra* note 6, at 21.

104. See, e.g., GREENSTONE & LEVITON, *supra* note 37, at 17.

105. *Id.*

106. *Id.* at 20.

107. *Id.*

108. *Id.*

109. *Id.*

110. *Id.*

111. *Id.*

112. *Id.*

113. *Id.* at 21.

Utilizing these three criteria for proper crisis intervention will help enable a legal counselor be successful in intervening on behalf of a client in crisis. Following these three criteria will also allow the client to view the attorney as a stable resource for problem solving, and effective client-centered outcomes will be achieved. These intervention criteria will also help the client return to equilibrium quicker and he or she will have a greater chance of employing adaptive techniques in resolution of the crisis.

VII. CONCLUSION

Crisis is the unwelcome foe which stalks the unprepared and even the undeserving. If precautions are not taken to avoid the debilitating grasp of a crisis, sooner or later the crisis will defeat even the most noble. To negate the precipitating impact on the individual in crisis is to discount and devalue the worth of crisis sufferers. Persons in crisis need a friend or counselor, perhaps for some even a legal counselor, who understands the stages of crisis and knows how to empathetically act on the situation.

The attorney must not be content as a mere problem solver. Problems are a day-to-day occurrence, but crisis moves the client to a feeling of "red alert." If the attorney fails to respond correctly to the urgency of the situation, the trust, confidence, and reliance on the attorney-client relationship may be permanently damaged. More importantly, the client may be left without hope of resolution and implement a maladaptive behavior. If the attorney implements proper crisis intervention, then the attorney can be a catalyst for a renewal of hope. Thus, knowledge and application of crisis theory, adaptive behavior, and techniques of crisis intervention prove invaluable to the client and the attorney.