ABSTRACT

This research project was organised around the following two premises:

1. That the present conceptual models utilised for defining and assessing 'crisis' and 'crisis behaviour' were generally too vague. Each model focused on predominantly one aspect of the crisis experience at the expense of comprising a comprehensive, holistic frame of reference.

2. That limited staff and large case loads functioned to limit the amount of time that human service personnel could spend with clients in crisis. Hence, it was deemed necessary for a particular understanding of 'crisis' that would facilitate the implementation of management schemes that would effect the greatest degree of change in as many areas of the client's life within the shortest period of time.

The investigation was organised in three major parts. Part I presented an overview of the literature, critiquing the traditional approaches to the definition of crisis and tracing the evolution of the concept from its inception as a description of grief reaction, to the diversified concept that it is today. It introduced an alternative conceptual model that presented crisis as a 'process'. It was hypothesised that the process began with the precipitating factors and progressed through six stages. The stages reflected a progressive fragmentation of the components of the individual's identity.

Part II focused on hypotheses suggesting that the ethnic personality of the individual influenced his response-nature and pattern. Ethnic personality was defined as having two elements:
1. A socialised predisposition to act in ways reflecting prescribed behaviour patterns.

2. An innate predisposition to act in ways that express the composites of one's human nature. Human nature was defined as being a mental-spiritual-physical entity. The dominant component within this triad was deemed to be the spiritual element.

Part III of the project presents the results of an exploratory study conducted to assess the feasibility of the seven hypotheses that were formulated at the end of Part II of the theoretical overview. Using the clinical method, one and a half hour long interviews were conducted with forty adolescent girls between the ages of twelve and fifteen years old.

Results indicated that crisis could be conceptualised as a six stage process. Whether or not an individual proceeded through these stages depended on the nature of the hazardous event. Subjects did manifest concern about the fragmentation of their social status and identity. They also experienced predominantly hostile feelings.

Religious/affective responses reflective of the ethnic personality of the group were not apparent until the last stages of the crisis experience. Another component found to be influencing behaviour, was 'sense of mastery'.

Concluding remarks highlighted possible management schemes that might effect a more effective short-term approach to treating patients in crisis.