

Poster Session II – Friday, April 17, 9:00 a.m. – 7:00 p.m.

Poster # 3

Integrating Adlerian Theory and Techniques With Crisis Intervention

Category: Assessment and Intervention
Indicator: Contemporary Perspectives
Presentation Level: Introductory

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Crises are a normal part of human development, with over 90% of individuals experiencing at least one crisis in their lifetime. Crisis intervention skills, therefore, are an essential tool for professionals working with clients who are experiencing traumatic or overwhelming life events. Although many early counseling theorists, such as Freud, Adler, and Ellis, addressed interventions with the underlying psychological processes of suicidal clients, current crisis theory has developed separately from fundamental counseling theories. Crisis theory, however, shares many assumptions with these theories, and professionals may be able to make more effective interventions if they interpret crisis theory in concert with their overarching theoretical orientation. The purpose of this poster is to demonstrate the integration of crisis intervention theory with Individual Psychology/Adlerian counseling theory.

The poster will focus on interventions for situational crisis, including terminal illness and bereavement. The six-step model of crisis intervention will be integrated with writings on crisis and suicide interventions from an Adlerian orientation, and underlying theoretical similarities will be identified. Handouts discussing Adlerian rationale for crisis intervention techniques, including standard crisis techniques and uniquely Adlerian techniques that may be appropriate in crisis situations, will be distributed. The presenter will also be available to explore how Adlerian crisis intervention might compare to traditional interventions, strengths and limitations of Adlerian crisis intervention, and future directions of this crisis theory work.

Poster # 4

Public Health Team and The Experience of the Very Ill At Home

Category: Assessment and Intervention
Indicator: Professional Issues
Presentation Level: Introductory

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Public health professionals have significantly evolved over the past few years with the delivery of quality care for elderly patients as a focus point. This study explores factors that impact upon the delivery of quality care in Public Health Family Care in Brazil. A qualitative method using semi-structured interviews was conducted. Interviews were taped and content analyzed. Four main categories emerged from the data: Role change, Components of caring, Barriers to family care and Factors that facilitate the delivery of geriatrics and palliative care in the community. Professionals strive for evidence-based practice in Public Health; they acknowledged their inability to achieve this and referred to factors that inhibited them from reaching their goal. Enhanced education for health professionals will equip them in the delivery geriatrics and palliative care. Better communication is required between the multidisciplinary team. The delivery of community services need to be reviewed and developed further in accordance with the health strategy policy.

Poster # 5

Giving Information: Latino and Chinese Families in Pediatric Palliative Care

Category: Dying Process
Indicator: Cultural/Socialization
Presentation Level: Intermediate

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Although Pediatric Palliative Care (PPC) has grown in recent years, little research pertains to families of diverse cultural backgrounds despite the changing demographics of North America. The goal of this project was to describe the experiences of Mexican-American and Chinese-American families whose child had died from a life-limiting condition in order to enhance understanding and provide guidance to PPC practitioners. Bicultural/bilingual research associates interviewed 50 family members from 31 families whose child had died six months to five years prior, where at least one parent or grandparent was born in Mexico or China, and family members spoke Spanish, Cantonese, Mandarin, or English. Translated transcripts were analyzed using grounded theory procedures; rigor was ensured through adherence to procedures for trustworthiness.

Central to parents' experience with palliative care for their child was how they were given information by health care professionals. In some situations, parents were not given any information, receiving only false reassurances that everything was fine when it was clearly not. In most situations, parents were given information but it varied in the dimensions that were addressed: facts, the implications of those facts for action by health care professionals and by parents, and parents' responses to the information given. Parents' ability to speak English, as well as their educational level, greatly influenced the type of information they were given. Findings provide guidance for health care professionals who give information to parents whose first language is not English as well as to English-speaking parents of seriously ill children.

Poster # 6

Death Attitudes and Anxiety Across Cultures

Category: Dying Process
Indicator: Cultural/Socialization
Presentation Level: Introductory

Moretta Guerrero, Brenda, PhD, LPC, FT

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As part of a larger pilot study exploring death rituals, death anxiety, and attitudes toward death across cultures, this research represents the quantitative piece of that study which focused on death anxiety and attitudes toward death. Death anxiety, fear, and acceptance of death have been the topics of numerous studies over the years, leading some researchers and theorists to contend that death anxiety and negative attitudes toward death are universal. However, whether or not different cultural groups experience different levels of death anxiety or even if they experience death anxiety at all has not been adequately explored. Nor have other pervasive attitudes toward death been widely studied across cultures. Accordingly, this study involved a preliminary attempt to explore death anxiety and attitudes toward death across Asian Indian, Mexican, Mexican American and Indian American samples. Ten participants from each cultural group, ranging in age from 19-62, completed the Revised Death Anxiety Scale (RDAS) and the Death Attitude Profile-Revised (DAP-R), a multidimensional measure that taps general fear of death, death avoidance and death acceptance (neutral acceptance, approach acceptance, and escape acceptance). It was hypothesized that both Mexicans and Asian Indians, who are both raised in more death accepting cultures than are Americans, would report