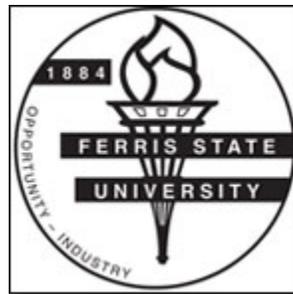


# **Effective Intervention: A How-To Primer for Interacting with a Distressed or Disturbed Student**



**A Guide for Faculty and Staff  
2008-2009**

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## INTRODUCTION

In your daily interactions with students, you may encounter someone who is experiencing a good deal of strain as they try to balance the demands of study with other issues in their lives. Some of our students may become quite anxious and behave in ways that affect learning, working environments, and/or may even threaten your safety and that of others. Distress affects educational outcomes. The earlier we intervene, the more likely we are to reduce its impact upon the student and others. Being proactive rather than reactive works to reduce the likelihood things could spiral out of control. However, there are also times when serious situations develop without warning and you must take immediate action.

Sometimes, the most difficult task is assisting someone in getting help. Often, a person in distress finds it hard to request or accept help, especially when they feel vulnerable, upset, or ashamed. Students may worry they're wasting someone's time or will be labeled crazy or weak for seeking or needing assistance. Some students are concerned they shouldn't talk to "strangers" about personal matters or family business, or that seeing a counselor means giving up control to make their own decisions. Sometimes, it's an issue of wanting to keep their "head in the sand" for as long as possible so they can continue to use magical thinking, believing if they don't acknowledge the situation it will work itself out or even better go away entirely.

If you're concerned about a student you might be tempted to reassure them by saying "I know exactly how you feel" or "You don't need to worry about that" or "Things aren't as bad as they may seem." This type of "help" comes across as judgmental and often shuts the student down, preventing them from getting the assistance they may need. Expressing a contradiction to the student's own perceptions can lead to unintentional results. They may get the impression they shouldn't be feeling what they're feeling or their problem isn't worthy of serious concern, both of which may make it even more difficult for the student to seek further help. Instead, offer the student a receptive ear without either agreeing with or contradicting their feelings. Practice being a sounding board and just let yourself listen without feeling the need to "fix" the student.

Even if a student expresses a reluctance to seek help, let them know their feelings are understandable; you assume they want to feel better or improve their situation; you're confident there are different ways of addressing his or her concerns; and you believe they might find it helpful consulting with someone who will be objective and helpful in making their decision. Explain that speaking with a counselor is typically a collaborative conversation that gives them the opportunity to use the counselor as a resource for developing the tools necessary for making change; as a support while deciding what plan of action they want to pursue; and as a guide while attempting the necessary steps needed to resolve their current difficulties.

It takes all of us to help. Anyone can do it. It requires a genuine desire to assist students with the tools you already have available to you. The following information and tips are offered to help you continue to be a good helper.

## COMMON CAUSES OF DISTRESS

There are times when you'll become aware of significant events in the life of a student. These might include:

- **Financial Issues** (*The student may be struggling to pay for school; juggling work and school; providing for dependents; having economic hardship in family/country of origin.*)
- **Interpersonal Issues** (*The student may be dealing with conflicts; illness of themselves or someone close to them; death of someone important to the student; divorce; break-up; abuse.*)
- **Significant changes in circumstance** (*The student may be struggling to adjust to a new place; new people; roommates; a new life situation; baby; a traumatic event or situation.*)
- **Academic or work Issues** (*The student may be having trouble getting to work or class; poor grades or performance reviews; interpersonal conflicts with authorities or peers.*)
- **Psychological/Emotional Issues** (*The student may be depressed; over-committed; suffering from performance/test/social anxiety.*)
- **Disability Issues** (*The student may have a lack of accommodation for disabilities; an undiagnosed disability; an inability to self-advocate.*)
- **Alcohol and/or Substance Abuse or Dependence** (*The student may have problems with alcohol or drugs.*)

## COMMON SIGNS AND SYMPTOMS OF DISTRESS

Our students arrive at Ferris State University with individual life experiences and expectations that are shaped by culture, race, ethnicity, social class, gender, sexual orientation, geographical location, disability, and by other cultural traits too numerous to name. In times of high stress some students will limit their contact with people and become isolated while others will seek out individuals to whom they can express their concerns and frustrations. There is no "correct" way to handle to stress yet some may be more productive than others. Very rarely will any two people experience stress in the same way. Some students may have better coping skills than others. Listed below are some of the more prevalent signs of a student in distress. This list is intended to provide basic information only and is not inclusive.

### Observable Behavioral Changes

- Becoming much quieter or more aggressive, withdrawing from others.
- Deterioration in quality of work and interaction in class.
- A negative change in performance or involvement in the classroom, athletics, extracurricular activities or social activities.
- Missed assignments and/or missed appointments.
- Repeated absences from class, athletic practice, work, or other important activities; especially if the student has previously demonstrated consistent class attendance.
- Disorganized or erratic performance; changes from consistently good grades to unaccountably poor performances.
- Essays or other creative works which have themes of hopelessness, social isolation, rage, or despair.
- Difficulty concentrating, difficulty carrying on normal conversation.

- Lethargy, falling asleep in class.
- Requests for special consideration (e.g. deadline extension), especially if the student appears uncomfortable or highly emotional when questioned about the reasons for the request.
- Continual seeking of special accommodations (late papers, extensions, postponed examinations, and the like.)

#### **Observable Physical Changes**

- Deterioration in physical appearance.
- Lack of personal hygiene.
- Excessive fatigue.
- Visible changes in weight.
- Coming to class or other activities bleary-eyed or smelling of alcohol.
- Reports of sleeping much more or less.
- Mention of a greatly increased or lack of an appetite.
- Crying or swollen red eyes.

#### **Observable Personality Changes**

- Direct statements indicating distress, family problems, or other difficulties.
- Unprovoked anger or hostility.
- Irritability, constant anxiety.
- Exaggerated personality traits, more withdrawn or more animated than usual.
- Excessive dependency on others for company or support.
- Constant sadness, tearfulness.
- Expressions of hopelessness or worthlessness.
- Acting out of character or significantly odd, differently than usual.

#### **Observable Safety Risk Changes**

- Any written note or verbal statement which has a sense of finality or suicidal flavor to it.
- Talking explicitly about hopelessness or suicide.
- Essays or papers which focus on despair, suicide, or death.
- Severe depression.
- Statements to the effect that the student is "going away for a long time".
- Giving away of prized possessions.
- Self-injurious or self-destructive behaviors.
- Threats against other people.
- Any other behavior which seems out of control.
- Reporting feeling out of control of one's emotions, thoughts, or behaviors.

#### **Other Factors to Consider**

- A drop in grades.
- Personal losses, such as death of a family member or loved one, break-up of a relationship, failures in class or athletics, rejection.
- Expressions of concern about a student by peers.
- A hunch or gut-level reaction on your part that something is wrong.

## GENERAL RED FLAGS SIGNALING a DISTRESSED STUDENT

Any of the following signs *especially if they occur together and on more than one occasion*, send a warning the situation warrants further investigation by someone, either you, your department head, Dean of Student Life (591- 3619), or Counseling Center(591-5968). College students are often very comfortable self-disclosing. You can initiate the investigation by talking to the student about their academic studies and what you've observed. Attempt to assess whether the warning signs indicate a minor or more serious problem. Some situations may be resolved immediately with the student. If the situation appears more serious, or if the situation is outside of your area of expertise, you need to refer the student to the Counseling Center, Dean of Students or another appropriate resource in the University.

**Depression:** While we all may feel "depressed" from time to time, "normal" sadness consists of only one or two symptoms and usually passes within days. Students who are clinically depressed will exhibit multiple symptoms lasting for a longer period of time (generally two weeks or more.) Some of these symptoms are:

- Drastic decline in academic performance and/or class attendance.
- Inability to concentrate, focus on task, or to remain motivated.
- Noticeable gap between aspirations and achievements resulting in expressions of anger, frustration, despair, depression.
- Noticeable changes in mood and/or sudden outbursts.
- Noticeable changes in physical appearance (weight, dress, hygiene).
- Excessive dependency on others or extreme withdrawal and isolation from others.
- Difficulties in sleeping or talking.
- Withdrawal from others.
- Loss of self-esteem.
- Loss of interest in pleasurable activities.
- Expressions of helplessness, hopelessness, worthlessness.
- Preoccupation with death.

**Agitation or Acting Out:** This represents a departure from normal or socially appropriate behavior. It might include being disruptive in the classroom, restlessness or hyperactivity, and being antagonistic towards others.

**Disorientation:** Some distressed students may seem "out of it." You may witness a lack of awareness of what is going on around them, forgetting or losing things, misperception of facts or reality, rambling or disconnected speech, and behavior that seems out of context or bizarre.

**Drug and Alcohol Abuse:** Signs of intoxication during class or interaction with University officials are indicative of a problem that requires attention.

**Violence and Aggression:** You may become aware of students who may be dangerous to others. This may be manifested by physically violent behavior, verbal threats, threatening e-mail or letters, harassing or stalking behavior, and papers or exams that contain violent or threatening material. These should be reported to Campus Police (911 for emergencies, 591-500 for non-emergencies), to the Dean of Students (591-3619) and to the Counseling Center (591-5968).

**Suicidal Thoughts:** Most people who attempt suicide communicate early messages about their distress. These messages can range from "I don't want to be here," to a series of vague "good-byes," to "I'm going to kill myself." Non-verbal messages could include giving away valued items, and putting legal, financial, and University affairs in order. All of the above messages should be taken seriously. Call the Counseling Center (591-5968) or 911 immediately. The risk for suicide increases when:

- The student threatens/verbalizes self harm.
- Depression is severe, longer lasting.
- The student has a history of previous suicide attempts.
- The student has an impulsive nature.
- There is an absence of support from others.
- There is alcohol or other drug abuse.
- **When the person has a plan and means to do harm. Call 911 immediately!**

## HOW to TALK WITH a DISTRESSED STUDENT

Your response to the student is dependent upon their level of distress and the issues surrounding their distress. If a student is showing low levels of distress he or she is likely to benefit from a timely and caring response from you. Some important considerations for an intervention are listed below. ***If a student appears to be in imminent crisis with the potential to harm themselves or others, contact the Counseling Center (591-5968,) and/or 911 immediately.***

### **Step 1: It is important to understand the issue(s) creating distress for the student.**

Often the identification of the cause for the distress goes a long way towards resolving distress. When you talk to the student, be sure to:

- Provide privacy. It is best not to have these discussions in a public venue, unless there is a safety consideration or the student refuses to come to your office for further discussion. If necessary, notify a colleague or the department head to "stand by."
- Communicate your concern. Use "I" statements such as "I'm concerned about you," or "I think there are people at the Counseling Center who can help you." Specifically state your reasons for concern by focusing on behaviors and observations.
- Acknowledge the student's state of distress and offer to help or to find help for the student. Refrain from offering quick fixes or dismissing the seriousness of the situation.
- Encourage the student to talk and describe his/her situation and feelings in just enough detail so you can determine what help may be needed but DO NOT overstep your

boundaries. You are listening to offer help and NOT to solve the problem for the student. You do not need all of the details on this issue.

- Be non-judgmental, gentle and caring. Keep in mind your role is to listen and not to criticize or moralize. Try to see the situation through the student's eyes. Don't discount the student's thoughts or feelings.
- Listen respectfully and attend to the students verbal and nonverbal messages.
- Paraphrase, summarize and clarify what the student is saying (i.e. restate the meaning of what you understand the student is saying so both of you are clear about what is being said.)

**Step 2: Reframe this situation as a problem-solution brainstorming.** Consider what assistance you would be willing to provide, if that is what you decide to do. Sometimes the only assistance necessary is to listen and to refer. Some assistance you might consider includes:

- An option for extensions to assignments.
- Alternative assessment arrangements.
- Explanation of syllabus requirements, course content, and/or assessment procedures.
- Support in dealing with harassment.
- Support in dealing with a grievance.
- If possible, attempt to give the student alternatives so they can make the decision for solving the problem that works best for them.
- Strongly encourage the student to seek assistance through the Counseling Center or other appropriate resources. Reassure them you are not going to abandon them.
- Know and express your limitations. You are not expected to be a professional counselor. However, you can serve as an important link to the Counseling Center for the student.

**Step 3: Refer the student as necessary.** Consider what assistance others can provide, often students are unaware of other resources. Such assistance and referrals may include:

- Assistance with addressing personal issues. Refer to the Counseling Center (591-5968).
- Assistance with educational planning and career counseling. Refer to the Educational and Career Counseling Center (591-3057).
- Assistance in developing study skills. Refer to the Academic Support Center (591-3543).
- Support in resolving grievances. Refer to the Office of Student Conduct (591-3619), General Counsel (591-3894) or Dean of Students (591-3619).
- Emergency financial support and accommodation difficulties. Refer to Student Services (591-2020), Residential Life (591- 3745) or Financial Aid (591-2110).
- Assistance related to a disability. Refer to the Disabilities Services office (591-3057).
- General advice and support for International students. Refer to the International Student Advisor (591-2809).
- If a student has broken the Student Code of Conduct, this report should be submitted to University Police (591-5000 – if it is an emergency call 911 IMMEDIATELY) and Office of Student Conduct (591- 3619) or Dean of Students (591-3619).
- **Call the Counseling Center (591-5968) and Campus Police (911) if you think the person is contemplating harming self or others** or if you are not sure what to do. Take all threats, hints, and notes seriously.

- The Clery Act requires certain campus officials report sexual assaults to the Campus Police (591-5000).

**Step 4: Attempt to follow up with the student.** Make a follow up time for the student to talk with you again to review progress towards resolving the issue(s). With permission from the student, you may find it helpful to get feedback from the relevant student services staff member. Don't be surprised if the student does not want to do this. Often they will want to correct the issue without having to talk about it to someone outside of the loop. Don't push. If they opt to talk with you again they will. If they don't, it's not a reflection of who you are but rather how the student is choosing to maintain control and set boundaries.

**Step 5: Be sure to inform relevant people.** Think about whether you need to inform your department head/chair, dean, vice-president, or other academic staff teaching the student. Be clear about the level of detail to be reported. Consider the issue of confidentiality before passing on any information. It is advisable to get the student's permission before disclosing their personal information to a third party, unless **they are talking about harming themselves or others. In this instance, Call 911 or the Counseling Center (591-5968) immediately.**

**Step 6: Report sexual assault if you are a mandated reporter for the Clery Act.** The Clery Act, part of the Higher Education Act addresses campus crimes, timely reports and the reporting of sexual assaults. Many staff and faculty must report sexual assaults to the police. Included are advisors to student organizations, coaches, residence hall staff, deans, directors and department heads. Two exceptions are counseling and medical staff. Please see the General Counsel's website for more information.

**Step 7: Always keep a record – document everything!** It is useful to make a file note of your interaction with the student, including concerns raised by the student and your response. If you see the student again you will have the necessary background information to which to refer. It can assist in providing accurate information to appropriate people. It can also offer protection if the student lodges a complaint.

## INTERVENTION GUIDELINES

While your role is not that of "watchdog" or to provide any kind of psychological assessment, you may be the first contact for a student in distress. You can have a profound effect on a student by openly acknowledging you're aware of his/her distress, you're sincerely concerned about his/her welfare, and you're willing to help explore his/her alternatives. Whenever possible speak directly to a student when you sense he/she is in academic and/or personal distress. Following these guidelines can lead to a positive outcome for all parties:

- **Safety First! Last! Always!:** Always keep safety in mind as you interact with a distressed student. Maintain a safe distance and a route of escape should you need it. If danger to you or the student seems imminent, call 911 **IMMEDIATELY** or the Campus Police (591-5000). **Always Notify Others.**

- **Avoid Escalation:** Distressed students can sometimes be easily provoked. Avoid threatening, humiliating, and intimidating responses. It's usually not a good idea to "pull rank" and assert authority unless you're certain of the student's mental health status. Distressed students are in need of listening and support. They can always be reminded of the rules at a later time.
- **Ask Direct Questions and Listen to their Response:** Take a calm and matter-of-fact approach. Ask students directly if they have consumed any alcohol or other drugs, if they're confused, or if they have thoughts of harming themselves. Don't be afraid of asking these questions. You won't be "putting ideas in their heads" by asking; in fact, it might defuse the situation. Most distressed students are relieved to know someone has noticed and is paying attention.
- **Do Not Assume You Are Being Manipulated:** While it's true some students appear distressed in order to get attention or relief from responsibility, only a thorough assessment can determine this. Attention-seekers can have serious problems and may be in danger too.
- **Know Your Limits:** It's not your responsibility to solve the problem for the other person, but rather to try to help them solve it or help them get help. Remember that although you may be a special support for this person in some ways, there are also other caring helpers available who may offer forms of aid that you cannot. You'll be able to assist many distressed students on your own by simply listening and referring them for further help. However, some students will need much more than you can provide. Respect your feelings of discomfort and focus on getting them the assistance they require, it's not your job to fix this situation. Reinforce them for confiding in you, try to identify the problem area, and indicate seeking professional help is a positive and responsible thing to do.
- **Monitor your own reactions/feelings.** It can be stressful to interact with someone in distress. In addition to feeling compassion and sympathy, you may find yourself feeling helpless, fearful, frustrated, angry, empathetic (identifying with the other's sadness, anger, hopelessness, etc.), impatient, or you may develop "compassion fatigue." Some signs that you may have over-extended yourself include:
  - Feeling stressed out or overwhelmed by the situation.
  - Feeling angry at the student.
  - Feeling afraid.
  - Having thoughts of "adopting" or otherwise rescuing the student.
  - "Reliving" similar experiences of your own.
- **Never give someone in distress an absolute promise to keep a secret.** It's not unusual for someone in distress to be concerned about having control over their private issues. They may ask you to promise to keep what they tell you a secret. If you agree to such a promise, you may put yourself in an uncomfortable dilemma: it may be that in order to seek out essential, perhaps life-saving, support for you or the student, you'll have to betray that promise and often you may wait too long because you are holding on to a promise you never should have made in the first place. ***Safety for the student, yourself, and others ALWAYS supersedes a promise of secrecy.***

- **Assure the student you will not divulge a confidence unless you have no other choice.** Inform them if they want to share something very personal with you, you'll do everything you can to safeguard it. Explain to them you will make every attempt to talk things over with the student prior to divulging their secret to anyone else. Reassure the student you won't use anything they tell you to hurt them. **DO NOT** give an absolute promise to keep a secret.
- **Privacy is important.** Talk to the student in private when both of you have time and are not rushed or preoccupied. Give the student your undivided attention. It's possible that just a few minutes of effective listening on your part may be enough to help the student feel comfortable about what to do next.
- **Honesty is important.** It's usually best to be frank with a student about the limits of your ability to assist (e.g., limits of time, energy, training, objectivity). It's often reassuring to a student to hear you respect his/her willingness to talk to you and that you want to support him/her in getting the assistance he/she needs.
- **STRANGE AND INAPPROPRIATE BEHAVIOR should not be ignored.** The student can be informed that such behavior is distracting and inappropriate. Call the Counseling Center (591-5968), Dispatch (911) or Campus Police (591-5000) should you have any concerns.

## REFERRING STUDENTS to the COUNSELING CENTERS

As a member of the campus community you will undoubtedly come into contact with a distressed student. Understanding distress signals, methods of intervention, and sources of help for the student can help you feel more in control of situations that may arise. The mental health professionals at the Counseling Center are available to faculty and staff for consultation regarding these issues. Refer students to the Counseling Center (591-5968) when they have questions or express concerns about any of the following:

- **Day-to-Day Living Concerns** – relationships, self-esteem, handling emotions, stress management, identity, sexuality, values clarification, unhappiness, loneliness, college adjustment.
- **Crisis Concerns** – suicidal thinking, alcohol or drug abuse, depression, anxiety, eating disorders, sexual assault and abuse, harassment, grief/loss.

**Refer students to the Educational and Career Counseling Center (591-3057)** when they have questions or express concerns about any of the following:

- **Educational/Academic Concerns** – uncertainty about major, decision-making, study skills, motivation, concentration, time management, test anxiety.
- **Career/Individual Testing Interests** – occupational interest inventories, personality inventories, learning and study skills, alcohol/drug assessment.

**When to Refer:** Consider referring a student to the Counseling Center (591-5968) when, in thinking about or talking with the student, you realize you are feeling a bit uneasy about being able to address the student's concerns by yourself. You may feel yourself running out of ideas or patience, or the student needs more or a different kind of help than you can offer.

**A referral is appropriate when:**

- The problem is more serious than you are capable of dealing with or feel comfortable discussing.

- You are extremely busy or are experiencing stress in your own life and are unable or unwilling to handle the student's needs.
- You have talked to the student and helped as much as you can but further assistance is needed.
- You think your personal feelings about the student would interfere with your ability to be helpful.
- The student admits there is a problem but does not want to talk to you about it.
- The student asks for information or assistance which you are unable to provide.

### **Be Prepared**

- Consult with an expert on the issues you are concerned about. For example, you may call the Counseling Center (591-5968), the Office of the Dean of Students (591-3619), the International Advisors Office (591-2809), Residence Life (591-3745), Educational and Career Counseling Center (591-3057), Disabilities Services Office (591-3057) or depending upon the nature of the problem, one of the many other supportive services on campus for a consultation about the student. Staff members generally will be glad to talk to you about your hunches, worries, and concerns. Because of the confidential nature of many offices, while specifics can be received only generalities can be discussed.
- Compile a list of services to which you could refer the student. Make sure you have phone numbers, locations, hours of operation, and, ideally, names of helpful staff people.
- Be aware of your role and what you can do to help the student. For example, you can offer concern, listening, and support, help with decision-making, and give referrals.
- Be aware of your limitations. You do not have to take on the role of counselor. You only need to care and refer. If you do have a counseling background and feel comfortable discussing a problem with a student, it would still be wise to consult with another professional because of the ethical concerns regarding a dual relationship with a student.

### **Make Contact**

- Talk to the student, in person, in as private a situation as possible.
- Stay calm. Express your concern. Tell the student you are worried and why.
- Avoid making sweeping promises of confidentiality, particularly if a student represents a safety risk to him or herself. Students who are suicidal need swift professional intervention, and assurances of absolute confidentiality may get in the way.
- Listen attentively. You need not be scared off by an intense emotional response. Talking about a problem or labeling a crisis does not make it worse. It is the first step toward resolving it.
- Be patient. Don't give up if the student doesn't talk easily. If the student declines to speak with you, tell them kindly you will ask them again in a couple of days. Then be sure to ask, especially if you haven't noticed any behavioral change.
- Deal directly with the issues, without judgment. Ask questions that relate to the circumstances of the student's life. Allow the student time to tell their story. Allow silences in the conversation, if they occur. Sometimes what follows can be especially productive.

### Offer Referrals

- Explain the limitations of your knowledge and experience. Be clear that your wanting the student to speak with someone else does not mean that you think there is something wrong with the student, or that you are not interested.
- Give referrals, normalizing the need for help as much as possible. It is helpful if you know the names of staff people and can speak highly of them. Convey the spirit of hopefulness; people can and do change.
- Realize that your offer of help may be rejected. People in severe distress sometimes deny their problems because it is difficult to admit they feel out of control. You do not need to take the rejection personally. Take time to listen to the student's fears and concerns about seeking help; maybe the student will come around. Try to end the conversation in a way that will allow you, or the student, to come back to the subject at another time.
- Keep the lines of communication open. Invite the student back.
- If you have immediate concerns about a student's safety, stay with the student and notify 911 and the Counseling Center (591-5968) immediately.

## HOW TO HELP SOMEONE GET HELP

Students (or anyone for that matter) can go into a crisis if their stress exceeds their coping resources. Most people's crises are resolved successfully within a few weeks, but some are not. Some crises escalate and may place affected individuals in shaky, even dangerous situations. At the same time, crises can present opportunities for significant personal growth, especially when help is provided. In order to assist students in avoiding dangerous situations and to maximize their potential to grow, it is important to identify difficulties when you see them and refer students to appropriate sources of help.

Asking for help can often be a daunting task. Having someone suggest you seek help can be a frightening experience. Preparing for the situation is important when it comes to referring a student for additional services.

### Ways to Assist a Student Reluctant To Accept a Referral

- **Let the student know why you are concerned about them** in terms of the student's own worries or needs. It's all about them. This is the time to use what they've said or done and to place it into the context of why you're concerned about them.
- **Avoid labeling the student or their behavior.** For example, don't say "You're depressed," or "You have an eating disorder," or "You should be in therapy." Labeling, whether accurate or inaccurate, can frighten or discourage a student from getting help because it comes across as judgmental. Also you don't have the expertise to diagnose, and even if you do, you shouldn't because of the dual relationship inherent within a student-faculty/staff relationship. Also, remember different families and cultures have different ways of expressing their distress; what looks strange to you may be "normal" for the other person.
- **Reassure the student that making a referral isn't a rejection.** Express your genuine concern for the student and explain your desire for the student to be able to work with someone

with specialized training who doesn't have an already established relationship with the student. Explain how it helps to be able to touch base with someone who you don't have to see every day but also express to the student how you'd like to stay in the loop and with their permission check with the student to be sure things are going okay for them.

- **Let the student know what they will gain** from meeting with a counselor. Work to normalize the need for additional input from a nonbiased third party. Acknowledge and discuss the student's fears and concerns about seeking help. Point out that a situation does not have to reach crisis proportions for him/her to benefit from professional help. Emphasize that, although some people believe that seeking counseling is an admission of weakness and failure, in fact is often takes considerable courage to face your fears, to seek help and to acknowledge one's limitations. Counseling usually generates strength, autonomy, confidence, and increased happiness.
- **Offer to keep the student company** while they call for an appointment or to walk them over to the Counseling Center or to call on behalf of the student while they are sitting there with you. Offer to come with the student to their first appointment. Realize your role is to facilitate their getting help. Although you may make the phone call, the Counseling Center will want to speak to the student one-on-one. While you may come to their first appointment don't plan on staying in during the entire session.
- **Suggest that the student learn more** before making an appointment and refer the student to the Counseling Center web site. They generally have information about services as well as links to helpful web sites on a variety of topics. Explain to the student that counseling sessions are strictly confidential. Remind the student that counseling at the counseling center is free.
- **Let the student know what to expect** if they speak with a counselor. Reduce the stigma and focus on how counselors work to help students make the most of their university experience and that seeing a counselor doesn't mean someone is "crazy or sick." Check with the Counseling Center to see how intake assessments work and be sure to flag the information if the intake is one that is an urgent situation. Typically, there is a triage system in place and the more urgent the situation the sooner the student will be seen. Explain to the student that generally during the first appointment, the student will discuss with the counselor the situation or feelings that are troubling them, and what sort of assistance the student might find helpful. The counselor and student will work together to locate and access whatever the student needs, whether that is a brief consultation, ongoing counseling, a specialized treatment program, a support group, psychiatric medication, etc. The student is in control of what decisions they make as to their behaviors and what they choose to discuss. All discussions and records at any counseling center are confidential, though certain limits to confidentiality do exist.
- **Follow up with the student.** Ask the student to let you know how their appointment went reassure them you don't need to know details; you just want to know whether or not they found someone helpful with whom to talk. Also remember the student's contact with the Counseling Center is confidential, so the student's counselor will not be able to give you any information without the student's explicit written permission. If you hear the student's appointment with a counselor wasn't helpful, suggest the student make an appointment

with a different counselor or to bring their concerns to the attention of the director of the center so a better match can be made.

### **What to Do If the Student Continues to Refuse Help**

While it is important to care about the emotional well-being of students, we cannot make their decisions for them. Staff and faculty may wish to consult with their Department Head/Director/Supervisor or the director of the Counseling Center (591-5968) to explore strategies for assisting the student.

## ***IF A STUDENT IS TALKING ABOUT SUICIDE OR VIOLENCE OR IS BEHAVING IN SELF-HARMING OR VIOLENT WAYS***

**DO NOT ignore a student's comments or behavior regarding suicide or violence.** You should not assume it will pass, the student is only kidding, or the student just "wants attention." If you are not comfortable bringing your concerns to the student or you feel the student is not responding, bring your concerns to the Counseling Center (591-5968), campus police (911 if an emergency or 591-5000 if it is a non-emergency), your department chair/head, your Dean, etc.

Don't assume that all a student needs is your sympathy and support. A student who talks or behaves in suicidal or violent ways does need your empathy and compassion, but that is not all they need. Students who are unable to control their feelings or impulses may also require counseling, medication, and/or hospitalization.

## **MANAGING A SERIOUS SITUATION**

Sometimes a student may be highly distressed and will disrupt your class or threaten to harm her/himself or others. If this is an immediate crisis call situation call 911 IMMEDIATELY or request a student in the classroom to do so.

- Calm the situation as much as possible. Take it slow and easy. Don't make any threatening moves.
- Stay as composed and relaxed as possible.
- Maintain a quiet and reassuring voice.
- If possible provide some privacy for the student.
- Don't leave the student alone, unless you feel concerned for your own safety.
- Try to communicate with the student by:
  - Acknowledging their feelings.
  - Paraphrasing what they are saying.
  - Requesting that they modify their behavior.
  - Suggesting they talk with a counselor.

Depending on the level of distress, the student may calm down enough for you to revert to the previous steps for "responding to a student who is distressed". However if the student continues to be at risk to self or others you may need to take the following steps.

## RESPONDING TO A STUDENT WHO IS SUICIDAL

Any person contemplating suicide is in enormous emotional pain and unable to find solutions to their pain. They are considering a permanent solution to a temporary issue. You have a crucial role in providing immediate support, sound advice, and help. Crisis intervention is not counseling or therapy. The goal in crisis intervention is to achieve problem management rather than problem resolution. It is facilitating a safe place for the student, a sense of equilibrium, and directional support by referring them to appropriate professionals.

**Step 1: Listen** actively, calmly, and non-judgmentally.

**Step 2: Assess Risk.** Assess the present state of the student's mental and emotional condition. Do this by getting as much information about the crisis situation, their thoughts, past actions, and plans.

**Step 3: Take Charge**

- **Ensure Safety.** If the person is **actively or dangerously suicidal** (they have a plan and means to end their life), stay with them and get help immediately. **Contact 911 for immediate help.**
- If a student is **contemplating suicide** make it clear to the student you are concerned about their well being and safety and you want to be sure that they will be all right.
  - A suicidal person often has difficulty in thinking clearly and following through on any alternative to their suicidal plan.
  - Together explore possibilities acceptable to both of you.
  - Make the person aware that you will be obliged to seek help if their intention is detrimental to themselves. **Confidentiality does not apply to suicide.**
- **Provide Support.** A suicidal person often perceives they have no support. Show willingness to help and take all threats seriously. Aim to establish a state of relative calm by reassuring the student you are there to support and help them.
- **Involve Others.** Help the student identify other caring adults with whom the person can relate. Help them make the calls or make the calls yourself. Contact your superiors. Contact the Counseling Center (591-5968). Contact Community Mental Health (796-5825) they have someone on-call for emergency services 24/7 – 365 days a year.
- **Examine alternatives.** Suicidal people feel overwhelmed with their problems. Encourage problem solving by helping the person to break down their problem(s) into more manageable pieces. Focus on handling one hour/day/problem at a time. Where possible help the student find alternatives to the immediate problems precipitated by the crisis. **DO NOT** provide housing or money yourself, that is not your role and may alter your important relationship to this person.
- **Make Plans.** Make clear plans with the student about what their next steps will be. You may need to write these down for the distressed student because they may not recall all the details of the discussion. One of the plans needs to involve mental health services. You do not have the training to diagnosis suicidality, they **MUST** be informed.

- **Obtain Commitment.** Obtain a commitment from the student they are going to follow the steps you've both agreed on. Police departments often do wellness checks on individuals. If you have no clear-cut commitment the police need to be informed. You cannot hold a student in your office or your classroom against their will.

**Step 4: Refer Out.** At any time during the interaction you may decide that, because of the level of distress or the nature of the issues raised, you should refer the student to a Counselor.

## RESPONDING TO A STUDENT WHO IS THREATENING THE SAFETY OF OTHERS

**Step 1: Contact an authorized person and/or Police/Security Officials.** When a student does not respond positively to your attempts to calm the situation, or your requests for them to moderate their behavior or talk with a counselor, you need to take steps to safeguard your safety, the safety of the student, and the safety of any other students in the vicinity. It may be appropriate to advise others to leave the area if the student posing the threat is unwilling to leave themselves. **Call 911 IMMEDIATELY.**

Even if you manage to calm the situation it may still be appropriate to call campus police (911 if an emergency situation or 591-5000 to file a report) to ensure the safety of all concerned and to assist the student to access appropriate support.

Explain clearly to law enforcement officials what has happened and your concerns. You can advise them what action you think will be useful (e.g. call an ambulance, escort them to a safe place) but they will decide on the best course of action.

**Step 2: Inform relevant people and keep a record.** Following serious incidents such as this it is advisable to inform your Department Chair/Head of your Area. It is useful to make a file note of your interaction with the student and others. If you see the student again you'll have the necessary background information to which to refer. It can assist in providing accurate information to appropriate people. It can also be a protection if the student lodges a complaint.

**Step 3: AFTER THE EVENT – Be sure to take care of yourself.**

Dealing with a distressed student is likely to impact on you and may increase your level of stress. After the event it may be helpful to:

- Give yourself some time and space to think through what has occurred.
- Relax (e.g. going for a walk. Use strategies that have worked for you in the past).
- Talk it through with someone who will have some understanding of the situation. You should do this without breaking confidentiality i.e. not using the student's name or any other information which will identify the student to the third party.
- Talk it through with staff counselors from the Employee Assistance Program (EAP) if it has been a particularly stressful experience.
- Decide whether you need to see the student again. If so, contact the student and make an appointment.

- Remind yourself that you cannot control all outcomes. While you must do the best you can for each individual, there may be a limit to how much you can help.

## **WORK to FACILITATE “TEACHABLE MOMENTS” RATHER THAN “ENABLING” the STUDENT to REMAIN STUCK**

- Be aware that your helping behavior may either positively or negatively "enable" a distressed student. Students who consistently minimize a serious problem; constantly vent to you about a problem but won't seek additional help; repeatedly lies, fails, hurts themselves or others (including you) because they are experiencing distress; blackmails you (“I won't tell you unless you promise ...”, “if you're really my friend you'll ...”, “if you tell anyone I'll ...”) most likely have placed the responsibility for their issues on your shoulders. It goes from being their problem to your problem. When interacting with them remember who owns the problem.
- Positive enabling happens when you respect a student's views and struggles; challenge their perceptions of the issues, question their behaviors; maintain your boundaries all while working to help the student solve their problems and get the help they need.
- Negative enabling happens when you allow or accept a student's problematic perceptions or behaviors and fail to question or challenge them, by staying silent or agreeing with them; allowing the student to become dependent upon you for things they need to do themselves; allowing the student to “act out” their feelings rather than dealing with the issues; or allowing the student to manipulate you. It results in the student not getting the help they need.
- With either kind of "enabling," your efforts may not change the way the student is seeing things or result in the student getting help, but negative enabling will almost certainly prolong the student's difficulties.

## **FACULTY, STAFF AND FERPA aka Don't Fear the FERPA**

- While the Family Educational Rights and Privacy Act (FERPA) limits the disclosure of information from educational records, you can share information about students with other school personnel who have “legitimate educational interests.” This means that a Ferris employee who is concerned about a student's statements or behavior related to threat or disruption could and should share the information with their supervisor, department head, director, dean, police, counseling center, or other university officials whose job it is to deal with such issues.
- If you observe a student engaging in threatening or erratic behaviors, you can disclose your impressions, concerns, and other specific information to others mentioned above. This applies even if it turns out that the student is okay in the final analysis.
- In the event that there is any specific health or safety issue, you may also disclose such information to appropriate campus officials and ultimately, a decision will be made about calling parents or family about such a situation.

- FERPA is a federal law that is currently being revised. It is likely that the above provisions will become more liberal and not more restrictive. Updates will be noted to faculty and staff as they become available.

## **A SPECIAL NOTE for CLERICAL – TECHNICAL and OTHER STAFF WORKING in OPEN AREAS**

Staff members who work in open areas, workstations, kiosks, and reception areas often have contact with many students and multiple staff. While you are not necessarily more vulnerable compared to closed offices, you are presented with a different set of circumstances and actually have some great opportunities to help distressed students.

Please learn and practice all safety guidelines according to department and university procedures. You may wish to contact the Human Resources Safety Office (591-2147), Counseling Center (591-5968), or Campus Police (591-5000) for additional training specific to your work area.

At the same time, all information and guidelines contained here apply to opportunities that you have in helping students, referring them to resources, and reporting behaviors of concern to your supervisor, Campus Police (911 of an emergency or 591-5000 if a non-emergency), the Counseling Center (591-5968) or the Dean of Students (591-3619).

## Web Resources

Depression And Bipolar Disorder:	<a href="http://www.dbsalliance.org">www.dbsalliance.org</a>
College Student Mental Health/Depression:	<a href="http://www.ulifeline.org">www.ulifeline.org</a>
National Institute of Mental Health:	<a href="http://www.nimh.nih.gov">www.nimh.nih.gov</a>
National Suicide Prevention Lifeline:	<a href="http://www.suicidepreventionlifeline.org">www.suicidepreventionlifeline.org</a>
Anxiety Disorders Association:	<a href="http://www.adaa.org">www.adaa.org</a>
Mental Health American:	<a href="http://www.nmha.org">www.nmha.org</a>
Substance Abuse and Mental-Health:	<a href="http://www.samhsa.gov">www.samhsa.gov</a>

## References

- American University Counseling Center  
[http://www.american.edu/ocl/counseling/worried/worried\\_howtohelp.html](http://www.american.edu/ocl/counseling/worried/worried_howtohelp.html)
- Ball State University Counseling Center <https://bsu.edu/students/cpsc/fsinfo/fshowtalk/>
- Bureau of Study Counsel: Center for Academic Development  
<http://bsc.harvard.edu/refer.html>
- Cornell University Counseling and Psychological Services and Office of the Dean of Students <http://www.dos.cornell.edu/guide/>
- Harvard Bureau of Study Counsel: Center for Academic Development  
<http://bsc.harvard.edu/refer.html>
- Louisiana Tech University Counseling Services  
<http://www.latech.edu/students/counseling/distressed-students.shtml>
- Memorial University Counselling Centre  
<http://www.mun.ca/counselling/home/distress.php>
- The University of Adelaide Counselling Services  
[http://www.adelaide.edu.au/counselling\\_centre/staff/distressed.html](http://www.adelaide.edu.au/counselling_centre/staff/distressed.html)