

Helping Students in Distress

A Guide for Faculty and Staff



Acknowledgments

We wish to thank the many universities and their teams of professional whose combined efforts made their information, and thus ours, accessible and easy to use. Material in this guide has been gratefully adapted from the following institutions of higher learning:

- Cal Poly Pomona
- Cornell University, Gannett Health Services
- Emory University
- North Carolina State University
- University of Pennsylvania
- University of Rochester
- University of South Florida

Edition August, 2018

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Purpose of Guide and Role of Faculty and Staff

Although many students cope successfully with the demands of college life, for some the pressures can become overwhelming and unmanageable. The emotional and behavioral consequences are often played out on campus in classrooms, residence halls, or offices.

The purpose of this guide is to:

- Help you recognize students who may be experiencing emotional, physical, or developmental difficulties;
- Provide basic guidelines for addressing a wide range of student behaviors;
- Assist you in facilitating appropriate referrals to campus resources;
- Increase your awareness of the Behavioral Intervention Team.

Your Role as Faculty and Staff

As a faculty or staff member interacting with students, you play a central role in responding to student issues. First, you are in a direct position to observe students and be aware of their behavior. Often before seeking professional help, students frequently turn to informal guides like you to obtain advice and support.

Although you are not expected to provide counseling, it is helpful for you to understand the critical role you play in:

- Prevention of student distress
- Recognizing the signs that indicate a student is in need of help
- Responding to distressed students
- Understanding the steps in making appropriate referrals

Because you are likely to be the first person a student reaches out to for help, your ability to recognize the signs of emotional distress and potential health issues and to provide an initial intervention can have a significant impact on a student's future well-being.

Campus Climate and Prevention

What part do we play at CSUF in fostering a sensitized and responsive community to distressed students?

As human beings, we all have...

- Unique personality and communication styles
- Particular approaches to dealing with others
- Differing needs for structure/flexibility
- Unique set of strengths and areas of needed growth
- Differing ability to handle conflict
- Certain biases

As faculty and staff, we all have...

- Expertise in our field
- A desire to educate and, perhaps, help students develop holistically
- Differing years of teaching/mentoring experience
- Unique classroom/lab/office management styles
- Power to influence students – wanted or not
- Differences in desire/interest/ability to interact with students beyond the curriculum/co-curriculum

How do these characteristics blend? They are the basis for how we...

- View ourselves and others
- Create or set a tone for our unique classroom/lab/office environment
- Interact with colleagues and our students
- Problem solve situations that arise
- Are aware of and use “teachable” moments
- Model adult, professional behavior and responsibility

We aspire to...

- Create a positive environment where students can learn and grow
- Enhance student learning and self-confidence
- Set an example for appropriate interactions with others
- Use “teachable” moments to help students grow in responsibility and maturity
- Help students become self-advocates
- Encourage students to take responsibility for their behavior and reap the associated rewards and/or consequences
- Know and utilize appropriate resources that respond to distress and promote success and retention

Behaviors that contradict promotion of a healthy campus climate:

- Create an unsupportive environment
- Hamper student learning and decrease their self-confidence
- Model or create inappropriate or antagonistic interactions with others
- Incite or intensify problems rather than defuse or resolve them
- Impede students from taking responsibility for experiencing consequences of their behavior
- Blame/shame/humiliate students
- Leave colleagues open to criticism for following policies and procedures when we do not

Typical Concerns / Common Sources of Distress for CSUF Students

- Adjusting to College Life
 - Balancing multiple priorities and responsibilities, accountability
 - Higher expectations (from faculty)
 - Transitions/adjusting to college, graduation, career exploration
- Financial Pressures
 - Employment/unemployment
 - Debt
 - Housing insecurity/homelessness
 - Food insecurity
 - Reliable transportation
- Relationship Issues
 - Distress about romantic relationship
 - Problems with family
 - Conflicts with friends/roommates
 - Making new friends/social support network
 - Fitting in
- Psychological Issues
 - Anxiety
 - Depression
 - Substance Abuse
 - Previously diagnosed mental health conditions
 - History of self-harm
 - Temptation to self-regulate medications
- Academic Concerns / Learning or Other Types of Disabilities
 - Higher expectations (of self or parents)
 - Direction/What do I want to do with my life?
 - Workload/managing high demands

Concerns for Graduate Students

- Isolation / greater emphasis on the undergraduate experience
- Financial / “real life” responsibilities
- Roles and relationships - marriage/family
- Relationship with advisor (like parents / other authority)
- Time management / lack of imposed structure
- Pressure / job placement
- Perfectionist / high achievers
- Let down / disappointment / feeling behind / lost
- Compare to “real world” of friends
- Other transitions

What You Should Know About Student Distress?

- **Stress, pressures, and challenges** are a normal part of college life. While many students cope with these demands successfully, a significant number of students have difficulties which interfere with their performance.
- **Key findings from 2014 Healthy Minds Study Data – CSUF Students**
 - ❖ 21% had a positive screen for anxiety
 - ❖ 19% had a positive screen for depression
 - ❖ 15% reported engaging in non-suicidal self-injury in the last year
 - ❖ 10% had a positive screen for an eating disorder
 - ❖ 9% reported that they took psychiatric medications in the last year
 - ❖ 8% reported having suicidal ideation in the last year
 - ❖ Statistically CSUF is at national levels for depression and anxiety
- **An even greater number** of students experience developmental challenges adjusting to college life and adulthood, such as defining identity, relating to others, and identifying educational goals.
- **The more common difficulties** in adjustment as well as more serious emotional problems affect students' academic performance, personal effectiveness, and the quality of life in the campus community.
- Some **students with disabilities**, particularly **those with chronic conditions** can become distressed over access barriers or when they experience resistance in receiving accommodations. Managing the manifestations associated with their chronic condition can also be very tiring (resulting in absences, lateness, missed deadlines).
- **Thus, identifying students in need of help** and assisting them in getting help is important for all of us in the campus community.
- Connecting students to services that restore well-being in turn **promotes persistence and retention** and can ultimately help them achieve their goal of graduation.

Signs and Symptoms of Distressed Students

Sometimes it is very clear when a student is having difficulties coping, and at other times distress is masked with less obvious symptoms. Some obvious and not-so-obvious signs of distress may include:

CHALLENGES or DIFFICULTIES WITH ACADEMIC PERFORMANCE

- Poor academic performance and preparation, particularly if such behavior represents a change in previous functioning
- Excessive absences or tardiness, especially if representing a change in functioning
- Chronic indecisiveness or procrastination
- Repeated requests for special considerations
- Increased concern about grades despite satisfactory performance
- Increased dependence – student hangs around you or makes excessive appointments to see you during office hours

UNUSUAL BEHAVIOR

- Listlessness, lack of energy, or falling asleep in class
- Marked changes in personal hygiene
- Impaired speech or disjointed, confused thoughts
- Aggressive or threatening behavior
- Extreme mood changes or excessive, inappropriate displays of emotions
- Hyperactivity, irritability, or heightened anxiety
- Prolonged or extreme emotionality
- Dramatic weight loss or weight gain with no apparent physical illness/reason
- Bizarre or strange behavior indicating a loss of contact with reality
- Use of mood altering chemicals (e.g., alcohol or drugs)

TRAUMATIC CHANGE IN RELATIONSHIPS

- Death of family member or close friend
- Difficulties in marriage or close relationships
- Problems at home with family or roommates

REFERENCES TO SUICIDE OR HARM/THREAT TO OTHERS

- Overt (or veiled) references to suicide – verbally or in writing
- Statements of helplessness or hopelessness
- Indications of persistent or prolonged unhappiness
- Isolates self from friends and family
- Pessimistic feelings about the future
- Harm/threat to others – verbally or in writing

What You Can Do: Responding to Students in Distress

Because you come in frequent contact with many students, you are in an excellent position to observe students, identify those who are in distress, and offer assistance. Your care, concern, and assistance will often be enough to help the student. At other times, you can play a critical role in referring students for appropriate assistance and in motivating them to seek such help. A few guidelines for responding to distressed students are summarized below.

OBSERVE: The first important step in assisting distressed students is to be familiar with the signs and symptoms of distress and attend to their occurrence. An attentive observer will pay close attention to direct communications as well as implied or hidden feelings.

INITIATE CONTACT: Don't ignore strange, inappropriate, or unusual behavior – respond to it! Talk to the student privately, in a direct and matter-of-fact manner, indicating concern. Early feedback, intervention, and/or referral can prevent more serious problems from developing.

OFFER SUPPORT AND ASSISTANCE: Among the most important helping tools are interest, concern, and attentive listening. Avoid criticism or sounding judgmental. Summarize the essence of what the student has told you as a way to clarify the situation; provide hope that things can get better. Encourage positive action by helping the student define the problem and generate coping strategies. Suggest other resources that the student can take advantage of such as friends, family, clergy, or professionals on campus.

SUGGESTIONS:

- "I'm so sorry you're having difficulties. Would you like to talk about them?"
- "I noticed you missed some classes/ assignments and I'm concerned. Can we talk about it?"
- "Sounds like you are really struggling with _____. Many people find it helpful to talk with someone in confidence who is outside the situation."
- "You know... we really have some excellent counseling professionals on campus who can provide you with assistance. Would you like me to help get you connected with them?"
- "I'm concerned enough about you that I'd like to have you speak with someone at the counseling center. Would that be okay with you?"

DISCUSS OPTIONS TO HELP THE STUDENT:

- First clarify: What does the student want to accomplish?
- What has the student done to try to resolve the problem?
- What solutions can you and the student brainstorm?
- What other resources might be helpful, including a referral for counseling?

WHAT IF I'M UNEASY ABOUT MEETING WITH A STUDENT?

- Consult with appropriate staff: In your attempt to help a student, you may need input from a professional. Staff from various departments including but not limited to the Dean of Students Office (657) 278-3211, Counseling and Psychological Services (657) 278-3040, Student Conduct (657) 278-4436, or University Police (657) 278-2515, can suggest possible approaches, provide you with support, or intervene directly with students.
- Don't confront the person, but don't give in to inappropriate behavior. Set boundaries and be assertive immediately, e.g. "I'd like you to lower your voice."
- Stay in a public place or keep the door slightly open and make sure colleagues are around.
- Involve a third party; request to have an observer such as an assistant dean, associate dean, department chair, or supervisor.
- Use your office or departments protocol for responding to emergencies.

Identifying and Assessing Distressing Behavior: Descriptors and Interventions

Distressing Behavior (low to mild level of concern)

Distressing behavior from a student can usually cause us to feel worried or uneasy.

When faculty or staff members encounter distressing behavior, they should feel concerned about the student's well-being. Student's exhibiting distressing behavior may have difficulties in and out of the classroom. Some examples include students who:

- Appear to be struggling academically or are not attending classes regularly.
- Report feeling overwhelmed or uncomfortable transitioning to campus.
- Displays of intense emotion (anxiety, panic, paranoia) or inappropriate emotional outbursts (unprovoked anger/aggression, hostility or sobbing).
- Experience feelings of isolation, loneliness, or disconnection from peers.
- Going through family problems, relationship problems/break-up.
- Experience the loss of a loved one.
- Writing or thinking that appears disjointed and fragmented, as though they can't maintain a logical sequence of thought, or contains themes which are out of context with the assignment.
- Lack a social support network.
- Express hopelessness, fear or worthlessness.
- Always ask for help with personal problems beyond the scope of your role or abilities.

Interventions for Distressing Behavior

Faculty and staff have options for responding to student behavior that they find distressing. Here are some suggestions:

- Initiate a discussion with the student in private about the concerning behavior— remember, you are the first point of contact.
- Offer support and assistance: summarize the essence of what the student told you as a way to clarify the situation. Encourage positive action by helping the student define the problem and generate coping strategies.
- Discuss options: refer the student to campus departments or offices that have the necessary expertise and personnel to help them.
- If you're uneasy about meeting with the student, consult with your department chair, supervisor, or appropriate staff in CAPS (657) 278-3040 or Dean of Students Office (657) 278-3211.
- If you believe the situation deserves university attention or follow-up, submit a *Report A Student in Distress* [online referral form](#) or call (657) 278-3211.

Identifying and Assessing Troubling Behavior: Descriptors and Interventions

Troubling Behavior (moderate level of concern; greater or more pronounced than distressing behavior)

Troubling behavior causes us to feel upset or frustrated. It is conduct that interferes with or interrupts the educational process of other students or the normal operations of the university. Troubling behavior can sometimes lead to a disruption.

A student who displays troubling behavior might resist interventions or corrective action. Some examples include:

- A student who is verbally disrespectful when disagreeing with peers and/or instructor.
- A student who verbally abuses or intimidates others.
- A student who curses at peers and/or instructor.
- A student who is overly demanding of faculty or staff.
- A student who appears to be under the influence of alcohol or drugs.
- A student whose behavior may be troubling as a result of possible mental health problems.
- A student who expresses current thoughts to harm self in a paper, email, text, etc.
- A student whose writing contains themes and threats of violence.
- A student who interrupts the educational process in the class by:
 - o Making hostile remarks out of turn
 - o Aggressively taking over the lecture
- A student who notably interferes with or interrupts the environment outside the classroom.

Interventions for Troubling Behavior

You may find the following procedures helpful when dealing with troubling behavior:

- Ask the student to speak with you privately. Addressing the troubling behavior in a timely manner, when you first notice it, is critical.
- Inform the student of the problem behavior. It's important to focus on the behaviors and to avoid anything that might sound judgmental.
- Receive and consider the student's response - they might share problems or issues that explain the behavior. Or they may simply not be aware of the impact the specific behavior has on the instructor or other students.
- Inform the student of your expectations for their behavior going forward. Reiterate that the behavior described cannot continue and redirect the student towards appropriate behavior. For example, "Going forward, it will be important for you to save some of your comments until we have an opportunity for group discussion."

- Although it is best to frame this part of the intervention in terms of what you WANT the student to do, you can also define a timeline for when the change needs to be made and explain the consequences if the change does not occur.
- Additionally you can articulate the academic and behavioral expectations of your class -- the expectations that all students are held to and how these relate to academic success.
- Ask the student if they can abide by your expectations going forward. This question can be used to ensure the student received the message and understands that you plan to hold them accountable. An example might be: “Does what I’m sharing sound reasonable to you? Do you think you can continue in class without [describe behavior]?”
- Inform the student if they are unable or unwilling to meet these expectations then they *might* lose the privilege of remaining in your class and continued displays of the described behavior could result in a referral to Student Conduct.
- You may want or need to refer the student to campus departments or offices that have the necessary expertise and resources to help them based on the issues or challenges they self-disclose during this conversation.
- Afterwards, document the content of the meeting in writing. It is sometimes helpful and necessary to provide the student with a written copy of the expectations, requirements, and the consequences discussed.
- If you’re uneasy about meeting with the student, consult first with your department chair, supervisor, or appropriate staff in CAPS (657) 278-3040 or Dean of Students Office (657) 278-3211.
- Per your discretion, submit a *Report A Student in Distress* [online referral form](#) or call (657) 278-3211 if you believe the situation deserves university attention or follow-up.

Identifying and Assessing Threatening Behavior

Descriptors and Interventions

Threatening Behavior (high, serious level of concern; student behavior has escalated to require immediate attention/response)

Threatening behavior from a student typically causes us to feel alarmed and to fear for our personal and physical safety. These behaviors should be taken very seriously.

Examples of threatening behavior include:

- A student who stalks or harasses another person.
- A student who displays a firearm or weapon.
- A student who sends threatening correspondence to another person.
- A student who implies or makes a direct threat to harm self or others.
- A student who physically confronts or attacks another person.

Interventions for Threatening Behavior

The safety and well-being of the campus community is the top priority when a student exhibits threatening or potentially violent behavior. **If you believe the student poses an imminent threat to you or others, call 911. Please also refer to the Red Folder.**

If the observed behavior does not pose an imminent threat, other interventions include:

- Immediately notify your department chair or supervisor for advice and support.
- Consult with staff in University Police (657) 278-2515, Counseling and Psychological Services (657) 278-3040, or the Dean of Students Office (657) 278-3211.
- Submit a *Report a Student in Distress* [online referral form](#), via email, or call (657) 278-3211.

The Behavioral Intervention Team (BIT)

The Behavioral Intervention Team (BIT) works with students who may be distressed or whose behavior is of concern to others. BIT was created to provide support and assistance to students before more significant problems arise. Our focus is to offer supportive intervention and guidance to any Cal State Fullerton student who is struggling. Our goal is to help the student achieve academic success, avert more serious difficulties, and promote the safety of both the student and the CSUF community.

BIT seeks to work in tandem with the university community in assisting students in emotional distress. This guide is provided as a first step intervention for the community. However, BIT also invites the community to consult with the team at any point in their intervention experience. Further information and resources can be located on our website at http://www.fullerton.edu/deanofstudents/behavioral_intervention_team/ or via email at dos@fullerton.edu.

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Referring a Student to Care Services

When to Refer

- If your efforts to manage a significant classroom behavioral issue have not resolved the problem or concern.
- If you are concerned about the welfare of a student, yourself, and/or others.
- If a student asks for help in dealing with personal issues that are outside your role as a faculty or staff member.
- If you have referred the student for assistance elsewhere in the past and there seems to be no improvement or things seem to be worsening.

You can start with a consultation

Remember that in any given situation, there are probably several ways to address your concern for a student's distress. Please contact the Dean of Students Office at (657) 278-3211 to discuss your concerns and options.

Does the referral need the student's participation?

Simply put, no it does not. There may be times when a student is not receptive to help or support, or when the student has left your class or office and the link between your concern and making a referral occurs.

How to Refer

Care Services Referrals can be made three different ways: 1) by completing an [online referral form](#); 2) by emailing deanofstudents@fullerton.edu; or 3) by calling (657) 278-3211. Students can also refer other students by following this process.

Information needed for an effective referral:

- Your name, position, and relationship to the student
*Online referrals can also be submitted anonymously
- Student name and CWID
- Dates, times, locations of events
- Your observations
- What was said and by whom
- What, if anything, has been done so far to address the concern and the student response to those efforts

What about confidentiality?

The Family Educational Rights and Privacy Act (FERPA) does not prohibit the sharing of personal observations and knowledge about a student among campus officials when there is a legitimate educational need to know or concern related to campus safety.

Referring a Student to Disability Support Services (DSS)

Should you Refer: If a student is struggling in your course, but has not disclosed they have a disability and requested accommodations, *don't ask them any disability-related questions. Details about a student's disability are confidential and only need to be disclosed to the DSS department.* If they request accommodations, let them know that they must connect with DSS and complete an Application for Services, which can be done online, in order to secure accommodations.

When to Refer: You will encounter students with disabilities in your courses who have connected with our office, Disability Support Services, and others who have not come to DSS. Many students with invisible disabilities or new conditions may be unknown to DSS. Some of these students may disclose to you that they have an impairment or you may notice something different in their course work and/or behavior. Talk with the student privately and focus on what you have observed (specific behaviors and/or academic issues, if they have not disclosed to you). Let them know that CSUF has many departments who can offer support: counseling, DSS, tutoring. Follow their lead. You could also suggest calling the DSS office while you are talking with the student and have them initiate an appointment or show them the online application link on the DSS web site.

Does the Referral Need the Student's Participation? Yes. Students with disabilities who want accommodations and assistance with access must voluntarily connect with DSS to secure them. The process involves four steps: 1) applying online for services; 2) providing documentation (medical and/or psychological); 3) having an interview; and 4) receiving a Letter of Accommodation from DSS. Letters are reviewed annually but can be done more often, at the student's request.

NOTE: faculty are not obligated to provide accommodations on their own, apart from DSS and encouraged not to do so, even if a student discloses to you personally. They should present a Letter of Accommodation before you assist with accommodations.

What about confidentiality? Students with disabilities do NOT have to disclose any details about their actual condition(s) to faculty or others, but do have to request assistance with implementing accommodations and present a Letter of Accommodation. DSS encourages students to disclose early, even if they haven't decided to use an accommodation, but students are not required to do so. If they delay disclosing their Letter, accommodations are not retroactive.

The DSS office keeps confidential records and approves accommodations for courses and other activities. *Sometimes DSS personnel will contact faculty about a particular student's accommodations, as consultation about the scope or limits of an accommodation will need to be discussed. Please call (657) 278-3112 about any concerns or questions you have regarding students and their accommodations.* Examples of accommodations that would require DSS consultation: attendance, participation, use of a memory card in testing and in some cases audio/video recording of a course.

Outreach and Education: The office of Disability Support Services (DSS) is engaged in extensive outreach and provides consultation and presentations to faculty (departments, chairs and coordinators meetings, individuals) on a variety of topics. For more information, please contact us at ext. 3112, dssservices@fullerton.edu or come to University Hall (UH) 101.

Referring a Student to Counseling and Psychological Services (CAPS)

When to Consult: You encounter a student who shows signs of distress but are unsure how serious it is and the interaction has left you feeling uneasy or really concerned about the student. Call (657) 278-3040 and ask to speak to the Triage Counselor. Triage Counselors are available Monday-Friday, 24 hours a day.

When to Refer: You have observed some signs and symptoms and the student is struggling academically or in their personal life. Some of the concerns students are referred to CAPS for include depression, anxiety, anger-management, relationship difficulties, identity development, eating disorders, substance use/abuse, and sexual assault.

When to Walk a Student in Crisis to CAPS – Students are seen on a same-day basis if they are experiencing a crisis. A crisis is present when a student reports any of the following:

- Thoughts of injuring/killing self or others
- Within the last month has experienced a severe trauma
- Within the last month was physically or sexually assaulted
- Seeing or hearing things that others do not typically see or hear
- Experiencing a mental health crisis so severe that they student believes that they may need to be hospitalized

How to Refer a Non-Crisis Student: You can walk the student over to CAPS or empower them to reach out on their own. Remind the student that services are **free and confidential**. Suggest that the student call CAPS at (657) 278-3040 to make an appointment. Sometimes it is useful to more actively assist students in scheduling an initial counseling appointment. You can offer the use of your phone or call the receptionist yourself while the student waits in your office.

Does the Referral Need the Student's Participation: **Yes.** CAPS' counseling is not mandated at CSUF, therefore, the student needs to be empowered to walk over or call to schedule an appointment.

What about confidentiality? CAPS staff members are required by law and professional ethics to protect the confidentiality of all communications with clients. Client information and client records cannot be released to anyone outside of CAPS without the client's written permission. Client records are kept separate from academic, administrative, disciplinary, and medical records. No information about a client's contact with CAPS (including whether a student is a client at CAPS) is released without the written consent of the client.

Legally mandated exceptions to confidentiality include:

Where there is reasonable suspicion of abuse or neglect of children, dependent adults, or elderly persons; the client presents a serious danger of violence to another; the client is likely to harm themselves unless protective measures are taken; a judge issues a court order to release information.

CAPS counselors may also consult with other CAPS counseling staff so that clients are given the highest quality of care.

If you need help in deciding whether or not it is appropriate to make a referral, call Counseling and Psychological Services at (657) 278-3040 to consult with a counselor.

What to Do in the Moment?

In the event of an emergency situation related to student behavior, it is helpful to follow the guidelines below:

1. Stay calm, as this will help you respond more effectively and also help to reduce the student's anxiety or agitation.
2. If possible, move the student to a quiet, private and secure place while further steps are taken.
3. Talk to the student in a clear, direct manner.
4. Listen attentively and respond in a straightforward, considerate way.
5. If the student appears to be dangerous to self or others, do not leave the student unattended.
6. Enlist the help of colleagues so you are not alone with the student.
7. Make arrangements for appropriate university intervention.

When contacting a campus resource, try to have the following information available:

- Student name
- If the student is no longer present, provide a physical description
- Your location
- Description of circumstances
- Type of assistance needed

Campus Resources

Identity-Based Centers

Race, ethnicity, cultural background, sexual orientation, gender identity, and other cultural identities are important to keep in mind as you help a distressed student. Reactions to racism, sexism, homophobia, transphobia, ableism, and other forms of oppression can affect the way in which emotional distress is manifested and also can impact help-seeking behavior. General barriers to seeking help – e.g., denial, fear of being labeled in a negative way, lack of information about campus resources – may be even more troublesome for students from underrepresented groups, especially if counseling is not a culturally relevant choice to make when help is needed. Communicating support, concern, and understanding is critical in reaching students who may feel isolated or marginalized.

Your sensitivity to the unique needs of international students, LGBTQ students, students of color, non-traditional-aged students, and other underrepresented groups can be important in helping students get assistance. Furthermore, being knowledgeable about campus resources that address the unique needs of underrepresented students is also important.

There are several identity-based resource centers on campus that provide all students with support and educational programs.

African American Resource Center (AARC)

Location: PLS-180, Room 182 | Phone: (657) 278-3230 | Email: aarc@fullerton.edu

Website: <http://www.fullerton.edu/aarc/>

Asian Pacific American Resource Center (APARC)

Location: PLS-180, Room 187 | Phone: (657) 278-3742 | Email: aparc@fullerton.edu

Website: <http://www.fullerton.edu/aparc/>

Chicana/o Resource Center (CRC)

Location: PLS-180, Room 184 | Phone: (657) 278-2537 | Email: crc@fullerton.edu

Website: <http://www.fullerton.edu/crc/>

LGBT Queer Resource Center

Location: PLS-180, Room 189 | Phone: (657) 278-4218 | Email: lgbtq@fullerton.edu

Website: <http://www.fullerton.edu/lgbtq/>

Titan Dreamers Resource Center (TDRC) - resources for undocumented students.

Location: PLS-180, Room 185 | (657) 278-3234 | Email: tdrc@fullerton.edu |

Website: <http://www.fullerton.edu/tdrc/>

WoMen's & Adult Re-Entry Center

Location: University Hall-205 | Phone: (657) 278-3298 | Email: womenscenter@fullerton.edu
Website: <http://www.fullerton.edu/womenscenter/>

International Programs and Global Engagement

Location: College Park -200 | Phone: (657) 278-2787 | Email: iss@fullerton.edu |
Website: <http://www.fullerton.edu/international/>

Veterans Resource Center

Location: University Hall – 230 | Phone: (657) 278-2373 | Email: vss@fullerton.edu |
Website: <http://www.fullerton.edu/veterans/>

Other Campus Resources

There are numerous individuals and departments on campus who can provide students with information, assistance, or the support they need to succeed. Some of these are listed below:

Academic Advisement Center

T: (657) 278-3606 | Location: University Hall-123B
Website: <http://www.fullerton.edu/aac/index.asp>

Records and Registration

T: (657) 278-7601 | Location: Langsdorf Hall-114
Website: <http://admissions.fullerton.edu/>

Career Center

T: (657) 278-3121 | Location: Langsdorf Hall-208 | Website: <http://www.fullerton.edu/career/>

College-Based Assistant Deans of Students

Website: <http://www.fullerton.edu/assistantdeans/>

College Legal Clinic

T: (657) 278-5850 | Location: TSU-258 | Website:
<http://asi.fullerton.edu/collegeLegalClinic/index.asp>

Dean of Students Office

T: (657) 278-3211 | Location: TSU-243 | Website: <http://www.fullerton.edu/deanofstudents/>

Financial Aid

T: (657) 278-3125 | Location: University Hall-146 | Website:
<http://www.fullerton.edu/FinancialAid/>

Student Health and Counseling Center

T: (657) 278-2800 | Location: SHCC – E- 116 | Website:
http://www.fullerton.edu/shcc/health_services/

Helping Students in Distress: A Guide for Faculty and Staff
Updated on 8/27/2018

ADDENDUM

The Absent/Disappeared From Class Student

You may notice a student that has been missing/absent from class and has not made contact with you or a student who is missing significant work or assignments.

What You Can Do:

- Initiate contact with the student.
- Share observations / facts: “I noticed you missed X# of classes” or “I haven’t seen or heard from you in 3 weeks.”
- Share concern: “Sorry you are having difficulties.”
- Offer to talk: “Would you like to talk.”
- Be clear and direct about your expectations and the consequences for not meeting expectations
- Be open/listen to the students’ perspective about why they missed class or assignments.
- Ask how the student believes they can better meet expectations for attendance or work.
- Inquire how the student is doing in other classes.
- Submit a *Report A Student in Distress* [online referral form](#) if you think it would be helpful to have someone from the BIT team contact the student.

Don’t:

- Disregard/invalidate the student’s feelings.
- Minimize concerns.
- Feel pulled to change expectations and make accommodations immediately. It’s okay to say “I’ll consider an alternative.”
- Lecture/scold: “You know you really should come to class.”
- Use scare tactics, threats/bribes: “If you don’t come to t class you might fail” or “I might fail you” said in a threatening way.

The Academically Underachieving Student

While it is easy to conclude that the academically underachieving student is simply unmotivated, the real situation is often more complicated. Students may be preoccupied with situational and family problems or have emotional problems that are distracting and disabling. They may have learning disabilities, attention deficit disorder, or substance abuse problems. Further, previous failures for any reason can engender a hopeless outlook and a defensive “I don’t care” attitude.

What You Can Do:

- Inquire compassionately as to what the challenges or issues are.
- Provide enough time for the student to open up. The students’ initial defensiveness might be off-putting to an instructor who values involvement and dedication in students.
- Help the student assess the source of underachievement, e.g., distractions, preoccupations, emotional problems, depression, difficulties with underlying academic and study skills.
- Sensitively address the difficulty of dealing with a “failure mentality.”
- Submit a *Report A Student in Distress* [online referral form](#) if you think the student would benefit by talking with someone.

Don’t’:

- Don’t take the student’s problem personally or be insulted if they may not find the class or program engaging.
- Don’t assume too quickly the issue is mere laziness.
- Don’t punish the student for lack of involvement.
- Don’t dismiss the student and problem in one meeting.

The Student with Adjustment/Transition Issues

Facts about transitions:

- Transitions are times of change that usually involve both loss and opportunity.
- Entering college is one of life's most demanding transitions; arguably the most significant transition since the start of kindergarten.
- College students face many challenging transitions including graduating and entering the work force.
- The changes inherent in a transition produce stress and challenge a student's coping resources.
- Students commonly experience a decline in functioning (academic, social, emotional) during transitions.
- Transition stress can be compounded by counter-productive coping mechanisms such as avoidance of stress-producing situations and people, excessive partying, and alcohol abuse.
- Transitions can pose greater problems to students who have pre-existing psychological problems or difficult life circumstances.
- Students going through a transition may benefit from counseling to enhance their coping efforts or to prevent the onset of serious problems.

Signs that a student is having transition challenges or issues include:

- Anxiety symptoms such as nervousness, irritability, tearfulness, and sleep problems.
- Depressed mood.
- Difficulty managing responsibilities or relationships.

What You Can Do:

- Convey to the student that transition stress is normal and often brings a temporary decline in performance.
- Encourage the student to use positive coping strategies to manage transition stress including: regular exercise, use of social support, a reasonable eating and sleeping regimen, and scheduling pleasurable activities.
- Encourage the student to explore the full range of campus involvement opportunities including clubs and organization; leadership programs; etc.

- Submit a *Report A Student in Distress* [online referral form](#) if concerns persist or if you think the student could benefit by talking with someone.

Don't:

- Assume the student understands the impact of transitions and is aware of the source of stress
- Minimize or trivialize the student's feelings and reactions.
- Discount or overlook factors that put the student at risk of more serious problems.

The Anxious Student

Anxiety is a normal response to a perceived danger or threat to one's well-being. For some students, the cause of their anxiety will be clear. Dealing with unexpected events and conflicts are primary causes of anxiety. But for others, it is difficult to pinpoint the source of stress.

Students may experience rapid heart palpitations; chest pain or discomfort; dizziness; sweating; trembling or shaking; and cold, clammy hands. Students may also complain of difficulty concentrating, obsessive thinking, feeling continually "on the edge," having difficulty making decisions, or being too fearful/unable to take action. In rarer cases, a student may experience a panic attack in which the physical symptoms occur so spontaneously and intensely that the student may fear they are dying. The following guidelines remain appropriate in most cases.

What You Can Do:

- Encourage the student to discuss their feelings and thoughts, as this alone often relieves a great deal of pressure.
- Provide reassurance without being unrealistic.
- Remain calm and take the lead in a soothing manner.
- Be clear and direct about expectations.
- Provide a safe and quiet environment until the symptoms subside.
- Be patient.
- Help the student develop an action plan that addresses their main concerns.
- Submit a *Report A Student in Distress* [online referral form](#) if you think the student would benefit by talking with someone.

Don't:

- Minimize the perceived threat to which the student is reacting.
- Take responsibility for the student's emotional state.
- Overwhelm the student with complex information or ideas to "fix" their condition.
- Be judgmental / cynical.
- Get caught up in their anxiety.
- Disregard their feelings.
- Argue with student's irrational thoughts.
- Assume the student will "get over it".

The Demanding Student

Typically, the time and energy you give to the demanding student is never enough. They often seek to control your time and unconsciously believe the amount of time received is a reflection of their worth. Students who are demanding can be intrusive and persistent and may require much time and attention. Demanding traits can be associated with anxiety, depression, personality problems, and/or thought disorders, mania, drug use/abuse.

Characteristics of students who are demanding may include:

- A sense of entitlement
- An inability to empathize
- A need for control
- Difficulty in dealing with ambiguity
- Perfectionism
- Difficulty with structure and limits
- Dependency
- Fears about handling life
- Elevated mood
- Drug use or abuse

What You Can Do:

- Talk to the student in a place that is safe and comfortable.
- Remain calm and take the lead.
- Offer limited but positive feedback.
- Set limits on your time and keep to them (e.g., "I have only 10 minutes" or "Excuse me, I need to attend to other things").
- Emphasize behaviors that are and aren't acceptable.
- Be prepared for manipulative requests and behaviors.
- Respond quickly and with clear limits to behavior that disrupts class, student sessions, or consultations.
- Maintain clear boundaries in the relationship.
- Offer them other possibilities of places to get support/attention.
- Submit a *Report A Student in Distress* [online referral form](#) if concerning behavior persists beyond a reasonable amount of time; if your efforts to help the student have not resolved the problem or; if you have referred the student for assistance elsewhere in the past and there seems to be no improvement or things seem to be worsening.

Don't:

- Argue with the student.
- Give in to inappropriate requests, making exceptions, special "deals" bargains.
- Adjust your schedule or policies to accommodate the student.
- Ignore inappropriate behavior that has a negative impact on you or other students.
- Feel obligated to take care of the student, or feeling guilty for not doing more.
- Let the student use you as their only source of support.
- Get trapped into being bullied out of your comfort zone.

The Dependent Student

You may find yourself feeling increasingly drained and responsible for this student in a way that is beyond your normal involvement. It may seem that even the utmost time and energy given to these students is not enough. They often seek to control your time and unconsciously believe the amount of time received is a reflection of their worth. It is helpful if the student can be connected with proper sources of support on-campus and in the community in general.

What You Can Do:

- Let students make their own decisions.
- Validate when they take independent action.
- Set firm and clear limits on your personal time and involvement.
- Offer referrals to other resources.
- Submit a *Report A Student in Distress* [online referral form](#) if the behavior persists beyond a reasonable amount of time; if your efforts to help the student have not changed the behavior; if you have referred the student for assistance elsewhere in the past and there seems to be no improvement or things seem to be worsening or; if you think the student would benefit by talking with someone.

Don't:

- Get trapped into giving continual advice, special conditions/treatment, etc.
- Avoid the student as an alternative to setting and enforcing limits.
- Over commit.

The Depressed Student

Depression, and the variety of ways it manifests itself, is part of a natural emotional and physical response to life's ups and downs. With the busy and demanding life of a college student, it is safe to assume that most students will experience periods of reactive depression during their college careers. It is when the depressive symptoms become so extreme or are so enduring that they begin to interfere with the student's ability to function in school, work, or social environments, that the student will come to your attention and be in need of assistance.

Due to the opportunities that faculty and staff have to observe and interact with students, you are often the first to recognize that a student is in distress. Look for a pattern of these indicators:

- Tearfulness/general emotionality or a marked lack of emotion.
- Feelings of emptiness, hopelessness, helplessness and worthlessness.
- A deep sense of sadness.
- Dependency (a student who makes excessive requests for your time).
- Markedly diminished performance.
- Lack of energy/motivation.
- An inability to experience pleasure.
- Infrequent or sporadic class attendance.
- Increased anxiety/test anxiety/performance anxiety.
- Difficulties with concentration, memory, and decision-making.
- Irritability.
- Deterioration in personal hygiene.
- Irregular eating and sleeping.
- Fatigue and social withdrawal.
- Alcohol or drug use.

Sometimes depression includes irritation, anxiety and anger. In its most serious form, depression can be accompanied by self-destructive thoughts and intentions as a way to escape from the emotional pain. Research shows that depression can be highly responsive to both psychotherapy and medication.

Students experiencing depression often respond well to a small amount of attention for a short period of time. Early intervention increases the chances of the student's rapid return to optimal performance.

What You Can Do:

- Talk to the student in private.
- Listen carefully and validate the student's feelings and experiences.
- Be supportive and express your concern about the situation.
- Let the student know you've noticed they appear to be feeling down and you would like to help.
- Reach out and encourage the student to discuss how they're feeling.
- Offer options to further investigate and manage the symptoms of depression. Discuss clearly and concisely an action plan such as having the student immediately call for a counseling appointment.
- Refer the student to Counseling and Psychological Services (CAPS) 657-275-3040.
- Be willing to consider or offer flexible arrangements (e.g., extension on a paper or exam), if appropriate, as a way to alleviate stress and instill hope.
- Ask student if they have thoughts of suicide. If so, do not leave the student alone. Walk the student to CAPS. If it is after 5:00pm Monday-Friday or on the weekend, access emergency service by calling 911 or our on-call service at 657- 278-3040.
- Submit a *Report A Student in Distress* [online referral form](#) if you have referred the student for assistance elsewhere in the past and there seems to be no improvement or things seem to be worsening or; if you think the student would benefit by talking with someone.

Don't:

- Minimize the student's feelings, e.g. "Don't worry. Everything will be better tomorrow."
- Bombard the student with "fix it" solutions or advice.
- Argue with the student or dispute that the student is feeling depressed.
- Provide too much information for the student to process.
- Chastise the student for poor or incomplete work.
- Expect the student to stop feeling depressed without intervention.
- Be afraid to ask whether the student is suicidal if you suspect they may be (e.g. "Have you had thoughts of harming yourself?" See page entitled "The Suicidal Student" for further information.).
- Assume they are suicidal.
- Assume the family knows about the student's depression.

The Grieving Student

During the course of most college student's academic careers, it is likely they will have someone close to them die (e.g., sibling, parent, grandparent, close friend, partner). Each person will grieve in slightly different ways.

What You Can Do:

- Ask the student if they would like to talk about the person who has died (e.g., "Would you like to tell me about your friend?").
- Listen carefully and compassionately (e.g., "I am so sorry you have lost your grandmother, and I feel sad as I listen to you talk about her").
- Consider the option of allowing students to postpone turning in assignments or taking exams.
- When appropriate and if you are comfortable, share similar experiences you have had so the student doesn't feel alone or "crazy" (e.g., "When my mother passed away, I couldn't concentrate on anything either").
- Be on the alert for signs that the student is feeling a need to harm themselves as a way to cope with the pain. (See section on "The Suicidal Student.").
- Let the student know that if the grief becomes overwhelming, they can seek counseling to help deal with the loss.
- Submit a *Report A Student in Distress* [online referral form](#) if you think the student would benefit by talking with someone.

Don't:

- Be afraid of tears. Tears are a natural, healthy way to release very intense emotions.
- Avoid discussing the deceased person with the student. They are often grateful to find someone who will listen.
- Say, "It's not that bad," "Things will get better," "Crying won't help," or "I know exactly what you are feeling."

The Suicidal Student

Although suicide is not often seen as a common event, it is the second leading cause of death among college students. People who are suicidal often tell people about their thoughts or give clues to others about their feelings. It is important to view all suicidal comments or behavior as serious and make appropriate referrals. Suicidal states are often associated with major depression, a combination of acute anxiety and depression, post-traumatic stress disorder, and bipolar disorder.

Some factors associated with suicide risk are:

- Suicidal thoughts.
- Pessimistic view of the future.
- Intense feelings of hopelessness, especially when combined with anxiety/feelings of alienation and isolation.
- Viewing death as a means of escape from distress.
- Previous suicide attempts.
- Personal or family history of depression or suicide.
- Personal or family history of suicide attempts.
- Substance abuse.
- In some cases, a history of self-injurious behaviors. Please note: not all self-injurious behavior is associated with suicide.

A student who is suicidal and who confides in someone is often ambivalent about suicide and open to discussion. Suicidal students usually want to communicate their feelings; any opportunity to do so should be encouraged.

Students who are at high risk usually have a specific plan, have a means that is lethal (e.g., medication, knife, gun), and tend to be or feel isolated.

What You Can Do:

- Call 911 if the student is in immediate danger to self.
- Talk to the student in private.
- Remain calm and take the lead.
- Take the student seriously --- 80% of those attempting suicide give warning of their intent.
- Be direct --- ask if the student is suicidal, if they have a plan and if they have the means to carry out that plan. Exploring this with the student may actually decrease the impulse to commit suicide.

- Express care and concern. Be available to listen. Do not leave the student alone.
- Refer the student to Counseling and Psychological Services (CAPS) at (657) 278-3040 for additional help. You may need to walk the student to CAPS to make sure the student actually receives help.
- Take care of yourself. Allow yourself to receive support from those close to you or those trained to provide it. Suicide intervention is demanding and draining work.
- Submit a *Report A Student in Distress* [online referral form](#) if your efforts to help the student have not been effective; if you have referred the student for assistance elsewhere in the past and there seems to be no improvement or things seem to be worsening or; if you think the student would benefit by talking with someone.

Don't:

- Minimize the situation. All threats must be considered potentially lethal.
- Leave the student alone if they have a plan.
- Be afraid to ask the student about suicide. Asking a student if they are suicidal will not put the idea in their head if it isn't there already.
- Over commit yourself. Doing so may leave you eventually feeling overwhelmed or unable to deliver on what you promised.
- Ignore your limitations.
- Allow friends to assume responsibility for the student without getting input from a professional.
- Assume the family knows that the student has suicidal thoughts.

The Student in Poor Contact with Reality

These students have difficulty distinguishing fantasy from reality, being out of touch with reality. Their thinking is typically illogical, confused, or irrational; their emotional responses may be incongruent or inappropriate; speech that makes no sense; and their behavior may be bizarre or disturbing. They may experience hallucinations, often auditory, and may report hearing voices. They are socially withdrawn, unable to connect with or track normal communication, extreme or unwarranted suspicion.

While this student may elicit alarm or fear from others, they are generally not dangerous and are more frightened and overwhelmed by you than you are by them. If you cannot make sense of their conversation, they may be in need of immediate assistance.

Bipolar disorder involves periods of serious depression combined with periods of extreme euphoria and frenzied thinking and behavior, the latter of which can reflect a poor reality. A person with bipolar disorder can become psychotic.

Psychological illnesses that involve psychotic features often have an onset between the late teens and early 30s.

What You Can Do:

- Respond with warmth and kindness, as well as with firm reasoning.
- Speak to the student in a direct and concrete manner regarding your plan for getting them to a safe environment.
- Remove extra stimulation from the environment (step outside of a noisy room).
- Acknowledge your concerns and state that you can see they need help.
- Acknowledge their feelings or fears without supporting the misperceptions, e.g., "I understand you think someone is following you, but I don't see anyone and I believe you're safe."
- When appropriate, acknowledge your difficulty in understanding them and ask for clarification or restatement, e.g., "I'm not sure I understand what you're trying to tell me, can you try to explain it more clearly?"
- Focus on the "here and now." Ask for specific information about the student's awareness of time, place, and destination.
- Speak to their healthy side, which they have. It's okay to laugh and joke when appropriate.
- Recognize that psychotic states can involve extreme emotion or lack of emotion and intense fear to the point of paranoia.

- Accompany the student to CAPS or call 911 if the student is highly impaired and is a danger to self or others.
- Submit a *Report A Student in Distress* [online referral form](#) if your efforts to help the student have not been effective; if you have referred the student for assistance elsewhere in the past and there seems to be no improvement or things seem to be worsening or; if you think the student would benefit by talking with someone.

Don't:

- Argue or try to convince them of the irrationality of their thinking as this commonly produces a stronger defense of the false perceptions.
- Play along with or encourage further discussion of the delusion processes, e.g., "Oh yes, I hear the voices (or see the devil)."
- Demand, command, or order.
- Expect customary emotional responses.
- Assume the student will be able to care of self.
- Agitate the student with questions, pressure, etc.
- Assume the student understands you.
- Allow friends to care for the student without getting professional advice.
- Get locked into one way of dealing with the student. Be flexible.
- Assume the family knows about the student's condition.

The Student Suspected of Substance Abuse/Addiction

Alcohol is the preferred drug on college campuses and is the most widely used psychoactive drug. Alcohol abusers in college populations tend to abuse other drugs, both prescription and illicit. Patterns of use are affected by fads and peer pressure.

The effects of alcohol on the user are well known. Student alcohol abuse is most often identified by faculty and staff when irresponsible, unpredictable behavior affects the learning, work, or living environment (i.e. drunk and disorderly in class, or office), or when a combination of the health and social impairments associated with alcohol abuse sabotages student performance. Because of the denial that exists in most substance abusers, it is important to express your concern about the student not in terms of suspicions about alcohol and other drugs, but in terms of specific changes in behavior or performance.

Signs that a student may have an alcohol problem:

- Specific school problems such as poor attendance, low grades, and/or recent disciplinary action.
- Failure to fulfill major work, school, or home responsibilities.
- Mood changes such as temper flare-ups, irritability, and defensiveness.
- Physical or mental problems such as memory lapses, poor concentration, bloodshot eyes, lack of coordination, or slurred speech.
- Drinking in situations that are physically dangerous, such as driving a car.
- Having recurring alcohol-related legal problems, such as being arrested for driving under the influence of alcohol or for physically hurting someone while drunk.
- Continued drinking despite having ongoing relationship problems that are caused or worsened by drinking.

Signs that a student may have a drug problem:

- Neglecting school, work, or family responsibilities.
- Spending a lot of time getting, using, and recovering from the effects of a drug.
- Abandoning previously-enjoyed activities, such as hobbies, sports, and socializing, in order to use drugs.
- Taking risks while high, such as starting a fight or engaging in unprotected sex.
- Continuing to use despite physical problems (e.g., blackouts, flashbacks, infections, injuries) or psychological problems (e.g., mood swings, depression, anxiety, delusions, paranoia) the drug has caused.
- Experiencing withdrawal symptoms (e.g., nausea, restlessness, insomnia, concentration problems, sweating, tremors, anxiety).
- After reducing or stopping chronic drug use, taking a drug in order to avoid withdrawal symptoms.
- Legal troubles because of drug use, such as arrests for disorderly conduct, driving under the influence, or stealing to support drug habit.

What You Can Do:

- Treat the situation as serious.
- Be alert for signs of alcohol and drug abuse, especially if you observe these signs during class.
- Confront the student with the behavior that is of concern and encourage the student to seek help.
- Encourage the student to make an appointment with Counseling and Psychological Services at (657) 278-3040.
- Offer support and concern for the student's overall well-being.
- Consult with the Office of Student Conduct at (657) 278-4436.
- When appropriate call University Police at (657) 278-2515.
- Recognize that denial is a powerful aspect of substance problems and that it can involve conscious or unconscious lying and distorting the truth.
- Submit a *Report A Student in Distress* [online referral form](#) if your efforts to help the student have not been effective; if you have referred the student for assistance elsewhere in the past and there seems to be no improvement or things seem to be worsening or; if you think the student would benefit by talking with someone.

Don't:

- Ignore signs of intoxication in the classroom or workplace.
- Convey judgment or criticism about the student's substance abuse.
- Make allowances for the student's irresponsible behavior.
- Assume problem is temporary – minimize symptoms.
- Encourage the behavior in any manner.

The Verbally Aggressive Student

Students may become verbally abusive when they encounter frustrating situations which they believe are beyond their control. Aggression varies from threats to verbal abuse to physical abuse and violence. It is very difficult to predict aggression and violence. Students can displace anger and frustration from those situations onto the nearest target. You may have become a convenient object for their pent-up frustrations.

Explosive outbursts or ongoing belligerent, hostile behavior become this student's way of gaining power and control in an otherwise out-of-control experience. It is important to remember that the student is generally not angry at you personally, but is angry at their world. These students often feel they will be rejected and, therefore, reject you before you reject them. They often realize the drama and intimidation behind their anger and are aware of their impact. This behavior is often associated with the use of alcohol and other drugs.

What You Can Do:

- Assess your level of safety. Call 911 if you feel in danger.
- Defuse and de-escalate the situation by remaining calm, speaking in a calm tone, and modeling appropriate behavior.
- Acknowledge the student's anger and frustration, e.g., "I hear how angry you are."
- Rephrase what they are saying and identify their emotion, e.g., "It appears you are upset because you feel your rights are being violated and nobody will listen."
- Reduce stimulation; invite the person to a quiet place if this is possible. However, do not invite the person to a quiet place if you fear for your safety. In all instances, ensure that another person is easily accessible to you in the event that the student's behavior escalates.
- Enlist the help of a co-worker.
- Allow them to tell you what is upsetting them.
- Be directive and firm about the behaviors you will accept, e.g., "Please stand back; you're too close," and/or "I cannot listen to you when you are yelling."
- Use a time-out strategy (that is, ask the student to reschedule a meeting with you once they have calmed down) if the student refuses to cooperate and remains aggressive or agitated.
- Help the student problem-solve and deal with the real issues when they become calm, e.g., "I'm sorry you are so upset; I'd like to help if I can."
- Be honest and genuine; do not placate aggression.
- Submit a *Report A Student in Distress* [online referral form](#) if your efforts to help the student have not been effective; if you have referred the student for assistance

elsewhere in the past and there seems to be no improvement or things seem to be worsening or; if you think the student would benefit by talking with someone.

- Consult with the Office of Student Conduct

Don't:

- Stay in a situation in which you feel unsafe.
- Meet alone with the student.
- Get into an argument or shouting match.
- Become hostile or punitive yourself, e.g., "You can't talk to me that way."
- Press for explanations for their behavior.
- Ignore the situation or signs that the student's anger is escalating.
- Touch the student, as this may be perceived as aggression or otherwise unwanted attention.
- Ignore a gut reaction that you are in danger.

The Violent or Physically Destructive Student

Violence due to emotional distress is rare and typically occurs when the student's level of frustration has been so intense or of such an enduring nature as to erode all of the student's emotional controls. The adage "An ounce of prevention is worth a pound of cure" best applies here. Violent behavior is often associated with the use of alcohol and other drugs.

What You Can Do:

- Assess your level of safety. Call 911 if you feel in danger.
- Defuse and de-escalate the situation by remaining calm, speaking in a calm tone, and modeling appropriate behavior.
- Prevent total frustration and helplessness by quickly and calmly acknowledging the intensity of the situation, e.g., "I can see you're really upset and may be tempted to lash out."
- Explain clearly and directly what behaviors are acceptable without denying their feelings, e.g., "You certainly have the right to be angry, but breaking things is not okay."
- Get necessary help (send someone for other staff, security, etc.)
- Stay safe: have easy access to a door; keep furniture between you and the student; keep door open if at all possible/appropriate; make certain that a staff, faculty, or another person is nearby and accessible; in some instances, you may wish to see the student only with another person present --- do not see the person alone if you fear for your safety.
- Consult with the Office of Student Conduct at (657) 278-4436.
- Consult with University Police at (657) 278-2515.
- Submit a *Report A Student in Distress* [online referral form](#) if your efforts to help the student have not been effective; if you have referred the student for assistance elsewhere in the past and there seems to be no improvement or things seem to be worsening or; if you think the student would benefit by talking with someone.

Don't:

- Meet alone with the student.
- Ignore warning signs that the student is about to explode, e.g., yelling, screaming, clenched fists, threats.
- Threaten, dare, taunt, or "push" the student into a corner.
- Touch the student.
- Stay in a situation in which you feel unsafe.
- Ignore a gut reaction that you are in danger.

Other Concerning Behaviors and Campus Referrals

If students report or if you otherwise observe or become aware of the behaviors listed below, please (provide the student with appropriate care and attention and) consult with designated staff.

Bias or Hate Incidents

- Refer the student to the Diversity Initiatives and Resource Centers (DIRC) department, 657-278-4391, PLS-180.
- The distress a student can experience as a result of such an experience can be very overwhelming. Remind the student that they can seek counseling at Counseling and Psychological Services 657-278-3040.

Hazing

- Advise the student to report the incident to the Office of Student Life and Leadership (657) 278-7622.
- Advise the student to report the incident to the University Police (657) 278-2525.
- Advise the student to report the incident to the Office of Student Conduct (657) 278-4436.
- The distress a student can experience as a result of such an experience can be very overwhelming. Remind the student that he/she can seek counseling at Counseling and Psychological Services at (657) 278-3040.

Abusive Dating Relationships, Sexual Harassment or Assault, and Stalking

- Refer the student to the appropriate members of the community including: Confidential Advocate in the WoMen's Center, 657-278-3928, UH-205; Title IX Coordinator, 657-278-
- Encourage the student to connect with family and friends.

Faculty and staff are also encouraged to refer to the **RED FOLDER** --a reference guide that contains safety tips and contact information for a wide variety of on-campus emergency resources to help any student in distress. The **RED FOLDER** appears on all faculty and staff computer desktops and is also available on the Behavioral Intervention Team website:

http://www.fullerton.edu/deanofstudents/behavioral_intervention_team/

APPENDIX

Tips for Supporting and Encouraging Students

- Request to see the student in private.
- Briefly acknowledge your observations and perceptions of the student's situation and express your concerns directly and honestly.
- Listen carefully to what the student is troubled about and try to see the issue from his or her point of view without agreeing or disagreeing.
- Follow-up with the student to see how he or she is doing.
- Strange and inappropriate behavior should not be ignored.
- The student can be informed that such behavior is distracting and may be inappropriate.
- Your ability to connect with an alienated student will allow him or her to respond more effectively to your concerns.
- Help the student identify options for action and explore possible consequences. If possible, offer to phone or accompany the student to the appropriate resources.
- Avoid labeling the student's behavior or the issues presented.
- Be open about the limits on your ability to help the student.
- Inform the student about what can be gained by meeting with a counselor or other professional to talk about his or her problems.
- If the student appears to be in imminent danger of hurting self or others, contact University Police immediately at 9-1-1.
- Do not promise to keep threats to self or others confidential.



More Resources and Tips from the **Red Folder**

Safety First: The welfare of the campus community is the top priority when a student displays threatening or potentially violent behavior. Do not hesitate to call for help.

Be Proactive: Engage students early on, pay attention to signs of distress, and set limits to disruptive behavior.

Be Direct: Don't be afraid to ask students directly if they are under the influence of drugs or alcohol, feeling confused, or having thoughts of harming themselves or others.

Listen Sensitively and Carefully: Use a non-confrontational approach and a calm voice. Avoid threatening, humiliating, and intimidating responses.

Follow Through: Direct the student to the physical location of the identified resource.

Consultation and Documentation: Always document your interactions with distressed students and consult with your department chair/supervisor after any incident.

Responding After a Tragedy: An-In-The-Classroom Guide

For those of you who have contact with students in the classroom, you may wish to help students through tragic events by providing time for discussion. It is probably best to consider a discussion within a week of the tragic event.

Even if you prefer not to provide discussion time during class, it is probably best to acknowledge the event. A national, local, or international tragedy can result in students having difficulty with focus, concentration, and motivation. Failure to mention the event can result in students becoming more upset or angry. If you choose not to devote discussion time to the tragedy, you might mention to students that there are resources on an off campus where they can obtain support.

Some useful off-campus links:

- Managing Your Distress in the Aftermath of a Shooting
- <http://www.apa.org/helpcenter/mass-shooting.aspx>
- Anxiety and Sadness May Increase On Anniversary of a Traumatic Event
- <http://www.apa.org/helpcenter/anniversary.aspx>
- Building Resilience to Manage Indirect Exposure to Terror
- <http://www.apa.org/helpcenter/terror-exposure.aspx>

If you decide to provide an opportunity for discussion in your classroom, here are some important considerations:

- **Discussions can be brief.** Consider providing an opportunity at the beginning of class. Often, a short time period is more effective than a whole class period. This serves the purpose of acknowledging that students may be reacting to a recent event, without pressuring students to speak. You can even consider stating ahead of time, if appropriate to the circumstance, that time will be made available at the next class for discussion so students can plan ahead.
- **Acknowledge the event.** Introduce the opportunity by briefly acknowledging the tragic event, and suggesting that it might be helpful to share personal reactions students may have.
- **Allow brief discussion of the “facts”, and then shift to emotions.** Often the discussion starts with students asking questions about what actually happened and debating certain details. People are often more comfortable discussing facts than feelings. So, it’s best to allow this exchange for a brief time. After facts have been exchanged, you can try to shift the discussion toward sharing personal and emotional reactions.

- **If you are not aware of the facts, or are not comfortable leading this discussion,** consider inviting someone to come to the class to provide this information from University Police, Counseling and Psychological Services, Dean of Students or other campus office.
- **Invite students to share emotional, personal responses.** You might lead off by saying, “Often it is helpful to share your own feelings and hear how others are responding. It doesn’t change the reality of what’s happened, but it may take away from the sense of loneliness that sometimes accompanies stressful or traumatic events. I would be grateful for whatever you are willing to share.”
- **If students begin “debating” the “right way” to react to a tragedy:** It may be important to point out that we all cope with stress and trauma in different ways. There is no right way to react.
- **Be prepared for blaming.** When we are upset and confused, we often look for someone or something to blame. Essentially, this is a displacement of the strong emotion we are feeling. Attributing blame is a way of coping. The idea is that if someone did something wrong, then future tragedies can be avoided by doing things right. If the discussion gets stuck in blaming, you may try to move the discussion forward by saying, “We have been focusing on our sense of anger and blame, and while that is a normal part of the process, it might be helpful to move on to other thoughts and feelings you may be having.”
- **It is normal for people to seek an explanation for why the tragedy occurred.** Through understanding, we seek to reassure ourselves that a similar event could be avoided or prevented in the future. We might comment, “As human beings it is in our nature to seek a deeper understanding of traumatic events. It is a challenge to understand an unthinkable event. By their very natures, tragedies are especially difficult to explain. Uncertainty is particularly distressing, but sometimes necessary. “ As faculty and staff, we should resist the temptation to make meaning of the event. This is often not helpful as it interferes with a person’s natural process to derive their own meaning which is filtered through their own life experiences as well as their culture, gender, and belief systems.
- **Thank students for sharing and remind them of resources on campus.** In ending the discussion, it is useful to comment that people cope in a variety of ways. If a student would benefit from a one-on-one discussion, encourage them to make use of the support services available to them as noted above.