

FACULTY AND STAFF GUIDE ASSISTING TROUBLED STUDENTS



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Introduction

The ever-increasing complexity of our society is reflected in the changing needs of the students that attend college today. Generally, interaction with our students is pleasant and productive. However, you may encounter student behavior which causes concern for their welfare or interferes with learning. In recognition of the demands this places on those who work directly with students, Counseling Services has prepared this guide. It is designed to be a tool that might be employed as a first step when a problem or question arises in working with a student. It offers some concrete initial steps that might be helpful in managing a problem and guidance on how to refer a student for further help, if needed.

This guide is not intended to be all-inclusive, nor does it attempt to provide all possible answers to a given situation. In many cases the satisfactory resolution of a problem may only be arrived at after careful consideration of all the circumstances of a particular case. The staff of Counseling Services is available to consult with you on any concern that might arise from your work with students.

Depression and Suicide

Depression is one of the most common problems to affect college students. It has been reported that about one third of college students will demonstrate some symptoms of depression in a given year. Not all of these students may experience a major depressive disorder, yet could have symptoms that warrant attention. Major depression differs from a state of sadness and can significantly impair a person's functioning while reducing hope for change and motivation to seek assistance. As with most problems, it is helpful to intervene as soon as possible. If you are better able to recognize symptoms of depression in your students and know what course of action to take, depressed students will be helped sooner.

Warning Signs of Depression

- Persistent sad or empty mood
- Tearfulness/emotionality
- Decreased energy or fatigue
- Significant weight change
- Restlessness, agitation, irritability
- Difficulty concentrating, indecisiveness
- Infrequent class attendance
- Expressions of hopelessness or worthlessness

Depression and problems with mood put some students at higher risk for suicide. Suicidal people may irrationally assess their situation as being bad now and in the future, though these beliefs may change in time and with treatment. It is important to view all suicidal comments as serious and make timely referrals.

Warning Signs and Risk Factors for Suicide

- Comments conveying a sense of hopelessness, helplessness, worthlessness or wanting to die
- Significant loss or threat of loss (through death, relationship break-up, academic failure)
- Talking or writing about death, dying or suicide
- Giving away possessions, taking care of business, thanking others for "all you've done for me"
- Feelings of alienation and isolation
- Prior suicide attempt

Depression and Suicide (Continued)

What to Do

Directly ask the student if he/she is feeling depressed or hopeless.
Directly ask the student if he/she feels like hurting him/herself.

If the answer is yes to either of these questions, refer the student to the Counseling Center by calling 814-362-5272 or Crisis Intervention at 362-4623 immediately, while the student is still with you, to set up an appointment. If the student refuses, spend some more time examining his or her objections and, if resistance is still present, contact the Counseling Center or Campus Police. Do not hide your concern for the student, and allow the student to remain present when you make the call. Explain why you are concerned and how you feel professionals can be helpful. Be caring, honest, and direct in your communications.

Do not ignore the expressions of depression or wishes to be dead. People often reach out directly or indirectly to those they think will take them seriously, particularly people older than themselves (professors and staff). Friends may be minimizing their feelings by telling them everything is "all right" or "everything will get better." Take suicidal thoughts seriously. You may not wish to leave the student alone.

Try not to threaten, admonish, or reproach a depressed student for not attending class or for falling behind in course work. Attempt to find ways of working out the problem with the student, (i.e. alternate projects, incomplete, G grades) while making the appropriate referral to the Counseling Center.

If in doubt about the seriousness of the emergency, err on the side of caution and contact the Counseling Center, Campus Police, or Crisis Intervention immediately

Anxiety

Anxiety is a commonly experienced emotion in response to stress and perceived threat to one's well-being. For some students, this may manifest itself in classroom experiences that may be viewed as challenging or demanding of their personal resources for coping, such as with test-taking or public speaking anxiety. In some situations, students may show symptoms of pronounced anxiety and panic which include the following: intense fear or discomfort, pounding heart, sweating, trembling, shortness of breath, feeling of choking, chest pain, nausea, dizziness, numbness, and fears of going crazy or dying. In other instances, a student may experience chronic and unrelenting anxiety and worry. He or she may experience restlessness, concentration difficulties, irritability, and report muscle tension or pain, headaches, and sleep difficulties. The following guidelines may assist you in responding to anxious students:

1. Permit the student to discuss his or her thoughts and feelings. This alone may relieve tension. You may want to reassure and normalize the anxiety where appropriate.
2. Don't minimize the perceived threat to which the student is reacting.
3. Inquire about other opportunities and resources they may have to discuss difficulties.
4. Don't overwhelm them with ideas or "how to" information if they are in acute distress. A period of intense anxiety may make it difficult to absorb information.
5. In instances of a panic attack, remain calm. Provide a safe and quiet environment until the symptoms subside. Suggest sitting down and doing slow breathing.
6. Consider referring to a health care provider to rule out physical causes of difficulties, as well as a counselor in the event there are no medical causes determined. The campus nurse in Health Services (362-5272) may assist in evaluating acute physical symptoms of distress.

Substance Abuse

The use of alcohol and drugs is a problem that is present at many universities. The serious problems that students can encounter with substance abuse may follow them after college and, in some cases, cause a student to withdraw from school. Students with substance abuse issues are often difficult to handle due to their denial of the usage being a problem. Some warning signs will present themselves in your classrooms and during advising. Any one symptom may be misconstrued as its own problem. Identifying symptoms in combination, however, allows one to view the situation as a possible substance problem. Bringing it to the student's attention may help intervene in the development of further progression.

Warning Signs of Substance Abuse

- Frequently late or missing classes
- Falling asleep in class
- Change in quality of work or failing grades
- Unexplained mood swings
- Manipulating or bargaining behavior
- Defensiveness on approach
- Deterioration of personal appearance and hygiene
- Wearing inappropriate clothing, i.e., long sleeves when hot, sunglasses when cloudy or in class
- Dramatic weight change
- Difficulty walking and talking
- Frequent red eyes, runny nose, and sore throat
- Classmates may express concerns

Do confront the student with their behavior that is of concern during a private interaction and when they do not appear to be currently under the influence. Addressing the issue will require some patience and persistence because denial of the problem is a predominant feature of substance abuse issues. A suggestion for approaching a student about substance abuse is to communicate your caring and concern for his or her well being, while speaking honestly about your observations. Sticking to the facts of your observations will help combat the defensiveness you may encounter.

Don't convey judgment or criticism about the student's substance abuse. Don't make allowances for the student's irresponsible behavior or ignore signs of intoxication in the classroom. You may contact Campus Police to remove an intoxicated student from the classroom. The Student Code of Conduct and Drug-Free Schools Policy outline student responsibilities and standards.

Students may be referred to the Counseling Services for evaluation by calling 362-5272. The Associate Dean of Student Affairs serves as the conduct officer and may be reached at 362-7653.

Angry Students

Dealing with Angry Students

Students may become angry and upset when dealing with frustrations and stressors. At times faculty and staff may be in a position to intervene or de-escalate the anger in a given situation. Following are some suggestions:

1. Do not physically touch the student. Respect the student's personal space.
2. Invite the student to a quiet place away from others so you can talk with your student in private if this is comfortable and safe for you.
3. Keep your voice soft and your speech pattern a bit slower than normal so the upset or angry student will have to listen more carefully in order to hear you. Acknowledge the anger. "I see how frustrated you are."

Angry Students (Continued)

4. Seek clarification of the problem. What is it that the student sees as the real problem? What does the student believe would be the solution to the problem?
5. Apologize if the fault is yours or if the fault is inherent to the system (e.g. students kept waiting for their appointment): "I am sorry you had to wait to see me but I can give you my full attention now. How can I help you?"
6. In any disagreement remember that a satisfactory conclusion has to leave both parties feeling they can accept the conclusion. It is prudent to do the following
 - Try to see the problem from the student's point of view, as well as your own.
 - Listen carefully; do not work on counter arguments while the student is speaking.
 - Solicit suggestions from the student about a possible solution to the problem.
7. In extreme situations, where it appears that no reasonable compromise can be attained, be pleasant but firm, "I am sorry that you are not satisfied with any of the options we have discussed. Since this is the case, I suggest you think about a different course of action that may meet your needs."
8. If you perceive there to be a risk of violence, avoid threatening or authoritarian statements that could escalate the situation. Allow plenty of personal space, speak calmly, and keep an escape route open. In cases where you fear for your own or other's safety, you may wish to contact Campus police at 10333.

Grieving Students

Losing a loved one is hard at any time. Losing a loved one while in college can be especially difficult because of the inherent stresses of being in school. It has been estimated that a quarter of students experience the loss of a close relative or friend during their college years. Reactions to the loss of a family member or friend are varied. Initial reactions are often intense; the student may attempt to deny the loss or possibly "shut down" emotionally. It is important to recognize the additional support your students will need during their time of bereavement. There is no single pattern of how one will grieve. Some students may need to reduce their course load, or take a semester off from school because of their inability to concentrate or function effectively. Other students may value the routine and structure of classes to help them. Expect each student to respond in her or his own manner.

Working With a Grieving Student

1. Be willing to listen, especially if the student is talking about a lost loved one.
2. Avoid clichés and platitudes like "time will help," "it will be okay" or other things that may minimize or invalidate someone's experience.
3. Suggest counseling or talking with a religious advisor as a means of obtaining help.
4. Be flexible and willing to extend deadlines, allow opportunities to make up work, or provide other support.
5. Anticipate that time will be required for the student to return to where he or she was before the loss occurred.

Consultation and Referral

Consultation with Counseling Services staff is available over the phone or in person to help the faculty/staff member provide the student with the best course of action. (Phone or face-to face contact may be preferable to email in cases of highly confidential matters.) Feel free to call us with any questions you may have. Should you decide that a referral for counseling is appropriate, the following guidelines may assist you in your interaction with a student:

Guidelines for Intervention and Referral

1. Request to see the student in private to minimize embarrassment and resistance. This might be your office or an empty classroom. Avoid isolating yourself with a student who may be aggressive or unpredictable.
2. Provide your observations about the student's behavior and communicate concerns without making interpretations or judgments. "I'm concerned about your inconsistent attendance and the changes I've seen in your work." "I've noticed that you look down and tired, and you haven't been participating in class as much as you usually do." "When you were at work here last week, I noticed your speech was slurred and you seemed to be 'under the influence.'"
3. Inquire and listen carefully to what the student is troubled about and try to understand the person's perspective without necessarily agreeing or disagreeing. Avoid arguing if the student does not agree with your viewpoint.
4. Clarify and identify the student's problem as well as your own concerns. Express your willingness to help by exploring alternatives to deal with the problem.
5. If there is room for you to be flexible with procedures a troubled student may be more receptive to your observation and assistance. On the other hand, adhering to you policies is appropriate if the student seems to be avoiding responsibility for his or her behavior.
6. Recognize when a student's needs exceed your ability to help. Do not hesitate to consult and refer to Counseling Services. Several ways of making the referral can be considered:
 - A. After talking over problems and concerns with the student, suggest the student contact Counseling Services him/herself. Provide the phone number (362-5272) or directions (room 233 in the Frame-Westerberg Commons building). You may later wish to ask if he or she followed through, e.g., "Were you able to make that appointment?"
 - B. Offer to call Counseling services in the student's presence and give the phone to him/her to schedule the appointment. A student may become more committed to follow through if he or she has been an active participant in the referral process.
 - C. Accompany the student to the Counseling Services office. For some individuals, an introduction to the setting or staff may facilitate the referral.
7. In the event of an emergency (student is at risk for harming him/herself or others), call Counseling Services for assistance during regular business hours (8:30-5:00 M-F) or Campus Police at 362-7506. Campus Police can also be reached in an emergency by calling 10333 from any campus phone. For students who are having a mental health emergency and not on campus, you may wish to contact Crisis Intervention at 362-4623.
8. Unless there is an acute risk to safety, counseling is optional and it is the student's right to refuse intervention or counseling. You may recommend that the student think it over and discuss it at another time. Respecting the student's wishes and maintaining your rapport may be preferable to pressuring him or her. Simply re-state your concern and desire to be of assistance.
9. Keep in mind that, for ethical and legal reasons, once a student becomes a client of Counseling Services, information about that student's participation cannot be shared with faculty or staff without a student's permission.

Disability Resources and Services

The University of Pittsburgh is committed to providing equal opportunities in higher education to academically qualified students with disabilities. Students with disabilities will be integrated as completely as possible into the University experience. A student in distress also may have disability-related concerns to contend with. With that in mind, here are some points to consider.

1. Avoid assuming that you understand a student's disability, even though you may have worked with another student with the same diagnosis. There is a wide variation of symptoms and manifestations within each diagnosis.
2. Many conditions that cause disabilities are not static; students may experience an exacerbation of symptoms due to the course of their illness, stress, changes in medications, or environmental factors.
3. If a student is having difficulties communicating with you, let the student know your level of understanding. Contact the student's disability coordinator to facilitate communication.
4. Listen to a student's concern but be aware that a student with a disability must adhere to the behavioral guidelines set forth in the Student Code of Conduct.
5. If students request an accommodation that is not listed on their Accommodation Letter, you are not required to provide the accommodation.
6. Remember that it is the student's decision whether to disclose a disability. The student may be registered with Disability Resources and Services, but also choose not to disclose to faculty.
7. If you suspect a disability because of a student's attendance or performance, talk to the student about your observations without labeling. If the student continues to experience difficulties, refer the student to Disability Resources and Services for consultations.
8. Maintain confidentiality regarding all communications with students who have disabilities. Requests for information should be sent to Disability Resources and Services.
9. Always consult with Disability Resources and Services with any disability-related questions or concerns. The DRS Coordinator can be reached at 362-7609, Room 215, Academic Success Center, Hanley Library.

Acknowledgement: Thanks to the Counseling Center of the University of Pittsburgh at Oakland for providing some material used in this guide.

Campus Resources	
Campus Police	362-7506
Counseling Center	362-5272
Disability Resources	362-7609
On-Campus Emergency	10333 Or 368-3211
Student Affairs (Dean's Office)	362-7650
Student Health	362-5272
Residence Life	362-7630
Non-Campus Resources	
Alcohol and Drug Abuse Services-Out-Patient Center	362-6517
Bradford Regional Medical Center-Emergency Department	362-8274
Bradford Recovery Systems (in-patient psychiatric services)	800-446-2583
Crisis Intervention, The Guidance Center (Telephone crisis service providing crisis counseling, and On-site emergency psychiatric evaluations)	362-4623 Or 800-459-6568
The Guidance Center (community out-patient mental health Center)	362-6535
Off-Campus Emergency	911
Victims Resources (Domestic Violence & Sexual Assault)	368-6325

