

# Faculty Guide: Assisting the Emotionally Distressed Student

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## General Intervention Guidelines

### Faculty/Staff Role

As a faculty or staff member interacting daily with students, you are in an excellent position to recognize behavior changes that characterize the emotionally troubled student. A student's behavior, especially if it is inconsistent with your previous observations, could well constitute an attempt to draw attention to her/his plight "a cry for help." A student in distress may not be aware of his/her behavior. Your ability to recognize the signs of emotional distress, and your courage to acknowledge your concerns directly to the student, are often noted by students as the most significant factor in their successful problem resolution. Often times, "being seen" is the first step on the road to recovery.

## Signs of Distress

- Inability to concentrate
- Confusion
- Persistent worrying
- Social isolation
- Increased irritability
- Bizarre behavior
- Missed classes / assignments

Procrastination  
Restlessness  
Disheveled appearance  
Mood swings  
Indecisiveness  
Depression

## **Guidelines for Interaction**

Openly acknowledging to students that you are aware of their distress, that you are sincerely concerned about their welfare, and that you are willing to help them explore their alternatives, can have a profound effect. We encourage you, whenever possible, to speak directly and honestly to a student when you sense that she/he is in academic and/or personal distress.

1. Request to see the student in private.<sup>1</sup> This may help minimize the embarrassment and defensiveness.
2. Briefly acknowledge your observations and perceptions of the situation and express your concerns directly, honestly and with respect.
3. Listen carefully to what is troubling the student and try to see the issues from her/his point of view without necessarily agreeing or disagreeing.
4. Attempt to identify the student's problem or concern, as well as your own concerns or uneasiness. You can help by exploring alternatives to deal with the problem. Reflecting back the student's concerns is important.
5. Comment directly on what you have observed without interpreting or judging. Strange and inappropriate behavior should not be ignored.
6. Involve yourself only as far as you want to go. At times, in an attempt to reach or help a troubled student, you may become more involved than time or skill permits. Extending oneself to others always involves some risk--but it can be a gratifying experience when kept within realistic limits. If the burden becomes too heavy, however, you may refer to CaPS and we will provide direct intervention, and / or refer to an appropriate facility.

<sup>1</sup>How to accomplish this will probably vary by the circumstances, and by the nature of the student's distress. Although it is beyond the scope of this handbook to go into depth on how to do this for all situations, this is discussed in a little more depth under the specific categories of student distress.

## **Consultation is Available**

If you are unsure of how to handle a specific student, we encourage you to consult with one of the counselors on our staff. Call us at 510-885-3690, inform the receptionist who you are (faculty, staff, administrator) and ask to speak with one of our counselors. A brief consultation may help you sort out the relevant issues, explore alternative approaches and suggest new ways to cope with the anxiety or stress the student may be experiencing. Overall, when dealing with most students in crisis situations, conveying your concern and willingness to help in any way you can (including referral) is probably the most important thing you can do. Your

support, encouragement (including referral), and reassurance will be particularly valuable to a student in crisis.

## **Referral to Counseling and Psychological Services**

When you have determined that a referral to Counseling and Psychological Services (CaPS) is appropriate, you can be most helpful by clearly and concisely telling the student why you think counseling would be helpful. You might also tell the student a few facts about our services. For instance, all services are free to regularly enrolled students, and professional counselors provide counseling Monday through Friday from 9 am to 6 pm (7 pm on Wednesdays, 5 pm on Fridays). All discussions are confidential except when the student presents a danger to self, others, or when certain kinds of abuse are involved. Early intervention is preferable to crisis intervention. To ensure prompt attention, it is best to call in advance for an appointment. Having the student make the call increases her/his responsibility and commitment to come for counseling; however, there may be times, especially if the student is in crisis, when it is advantageous to accompany the student to our office. Remember that counseling is always voluntary and a student cannot be forced to come to counseling. We will schedule the student with one of our staff as quickly as possible.

### **— DO —**

Have the student call (510) 885-3690.  
Inform the receptionist who you are (student, faculty, staff, administrator).  
Identify the need for an assessment (indicate if it is urgent).  
Ask to speak with the walk-in crisis counselor if between hours or 11-1 or 3-5 each day.

## **Urgent Referral**

In some situations, it may be imperative to request the student be seen as soon as possible. These situations are considered urgent:

Suicide/Fear of losing control and possibly harming/hurting someone  
Sexual assault  
Physical assault or witness to an assault or accident  
Fear for her/his life or for the life of someone they know  
Abuse/Recent death of a friend or family member

### **— DO —**

Call or have the student call (510) 885-3690.  
Inform the receptionist who you are (student, faculty, staff, administrator).

Identify the need for an urgent assessment (indicate if it is urgent) and ask to speak with the walk-in crisis counselor if 11-1 or 3-5 daily. The counselor will make a professional assessment of how quickly the student needs to be seen and appropriate action will be taken.

### **When to Call University Police**

When there is an immediate threat of physical danger.  
When you believe that you or another person is in immediate danger.  
When you believe that the student is about to harm her/himself.  
When you believe that the student cannot control their own behavior.

### **The Dependent/Passive Student**

Typically, 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. You may find yourself increasingly drained and feeling responsible for this student in a way that is beyond your normal involvement. It is helpful if the student can be connected with the proper sources of support on-campus and in the community in general.

#### **— DO —**

Let students make their own decisions.  
Set firm and clear limits on your personal time and involvement.  
Offer referrals to other resources on- and off-campus.

#### **— DON'T —**

Get trapped into giving advice, special conditions, etc.  
Avoid the student as an alternative to setting and enforcing limits.

### **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, but for others it is difficult to pinpoint the source of stress. Regardless of the cause, the resulting symptoms are experienced as similar and include rapid heart palpitations; chest pain or discomfort; dizziness; sweating; trembling or shaking; and cold, clammy hands. The student may also complain of difficulty concentrating, always being "on the edge," having difficulty making decisions, or being too fearful to take action. In more rare cases, a student may experience a panic attack in which the physical symptoms occur spontaneously and intensely in such a way that the student may

fear she/he is dying. The following guidelines remain appropriate in most cases.

### **— DO —**

Let the student discuss her/his feelings and thoughts.  
Often this alone relieves a great deal of pressure.  
Provide reassurance.  
Be clear and directive.  
Provide a safe and quiet environment until the symptoms subside.

### **— DON'T —**

Minimize the perceived threat to which the student is reacting.  
Take responsibility for the student's emotional state.  
Overwhelm the student with information or ideas to "fix" his/her condition.

## **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 in 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, they are often the first to recognize that a student is in distress. Look for a pattern of those indicators.

Tearfulness / general emotionality  
Dependency (a student who makes excessive requests for your time)  
Markedly diminished performance  
Lack of energy / motivation  
Infrequent class attendance  
Increased anxiety/test anxiety/performance anxiety  
Irritability  
Deterioration in personal hygiene  
Alcohol or drug use

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.

## — DO —

Let the student know you've noticed that she/he appears to be feeling down and you would like to help.

Reach out and encourage the student to discuss how she/he is feeling.

Offer options to further investigate and manage the symptoms of the depression (e.g., referral to CaPS).

## — 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.

Chastise the student for poor or incomplete work.

Be afraid to ask whether the student is suicidal if you think she/he may be.

(See next section, e.g., "Have you thought of harming yourself?")

## The Student Who Has Been Sexually Harassed

Sexual harassment involves unwelcome and unwanted sexual attention and/or advances, requests for sexual favors, and other inappropriate verbal or physical conduct. It is usually found in the context of a relationship of unequal power, rank or status. It does not matter that the person's intention was not to harass. It is the effect it has that counts. As long as the conduct interferes with a student's academic performance, or creates an intimidating, hostile or offensive learning environment, it is considered sexual harassment.

Sexual harassment usually is not an isolated one-time only case but a repeated pattern of behavior that may include:

Comments about one's body or clothing

Questions about one's sexual behavior

Demearing references to one's gender

Sexually oriented jokes

Conversations filled with innuendoes and double meanings

Displaying of sexually suggestive pictures or objects

Repeated non-reciprocated demands for dates or sex

Sexual harassment of students is covered by the California Education Code, section 89535. Common reactions by students who have been harassed is to doubt their perceptions, wonder if it was a joke, or wonder if, in some way, they have brought it on themselves. A student may begin to participate less in the classroom, drop or avoid classes, or even change majors.

## — DO —

Separate your personal biases from your professional role.  
Listen carefully to the student, and assure the student you understand.  
Encourage the student to keep a log or find a witness.  
Help the student seek informal advice through a department chair, supervisor or advisor. If unresolved, help the student approach a dean or vice president on campus.  
Encourage the student to read the Sexual Harassment Policy for Students (<http://www.aba.csueastbay.edu/HR/deo/SHStudentPolicy.pdf>)

### — DON'T —

Ignore the situation:  
Taking no action reinforces the student's already shaky perception that she/he has been wronged. Ignoring the issue can also have legal implications.  
Overreact.  
(Listen, support, and guide the student to appropriate channels.)

### The Suicidal Student

Suicide is the second leading cause of death among college students. It is important to view all suicidal comments as serious and make appropriate referrals. High risk indicators include feelings of hopelessness, helplessness and futility; a severe loss or threat of loss; detailed suicide plan; a history of a previous attempt; history of alcohol or drug abuse; feeling of alienation and isolation; and preoccupation with death.

### — DO —

Take the student seriously--80 % of suicides give warning of their intent.  
Be direct--ask if the student is suicidal, if she/he has a plan, and if she/he has the means to carry out that plan. Exploring this with the student may actually decrease the impulse to commit suicide.  
Be available to listen, but refer the student to Counseling and Psychological Services or a community hotline for additional help. Attempt to make sure the student actually gets some help.  
Take care of yourself. Suicide intervention is demanding and draining work.

### — DON'T —

Minimize the situation.  
Be afraid of planting the idea of suicide in an already depressed mind by inquiring about it (they will very likely feel relieved that someone has suspected).  
Ignore your limitations.

## **The Student Suspected of Substance Abuse/Addiction**

Alcohol is the most widely used psychoactive drug. Alcohol abusers in college populations abuse other drugs, both prescription and illicit. Patterns of use are affected by fads and peer pressure. Currently, alcohol is the preferred drug on college campuses. The effects of alcohol on the user are well known to most of us. Student alcohol abuse is most often identified by faculty when irresponsible, unpredictable behavior affects the learning situation (i.e., drunk and disorderly in class <sup>2</sup>), 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.

<sup>2</sup> See *The Verbally Aggressive Student* section

### **— DO —**

Confront the student with her/his behavior that is of concern.  
Address the substance abuse issue if the student is open and willing.  
Offer support and concern for the student's overall well being.  
Maintain contact with the student after a referral is made.

### **— DON'T —**

Convey judgment or criticism about the student's substance abuse.  
Make allowances for the student's irresponsible behavior.  
Ignore signs of intoxication in the classroom.

## **The Suspicious Student**

Typically, these students complain about something other than their psychological difficulties. They are generally tense, anxious, mistrustful, isolated, and have few friends. They tend to interpret minor oversights as significant personal rejection, and often overreact to insignificant occurrences. They see themselves as the focal point of everyone's behavior, and everything that happens has special meaning to them. They are overly concerned with fairness and being treated equally. Feelings of worthlessness and inadequacy underlie most of their behavior, even though they may seem capable and bright.

**— DO —**

Express compassion without intimate friendship. Remember, suspicious students have trouble with closeness and warmth.

Be firm, steady, punctual, and consistent.

Be specific and clear regarding the standards of behavior you expect.

**— DON'T —**

Assure the student that you are her/his friend. (Acknowledge that you are a stranger, if appropriate, but even strangers can be concerned.)

Be overly warm and nurturing.

Flatter or participate in their games. You don't know their rules.

Be cute or humorous.

Challenge or agree with any mistaken or illogical beliefs.

Be ambiguous.

**The Student in Poor Contact with Reality**

These students have difficulty distinguishing fantasy from reality, the dream from the waking state. Their thinking is typically illogical, confused or irrational; their emotional responses may be incongruent or inappropriate; and their behavior may be bizarre and disturbing. They may experience hallucinations, often auditory, and may report hearing voices. 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 trouble.

**— DO —**

Respond with warmth and kindness, but with firm reasoning.

Remove extra stimulation from the environment (turn off the radio, step outside of a noisy classroom).

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."

Acknowledge your difficulty in understanding them and ask for clarification or restatement.

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 OK to laugh and joke when appropriate.

## — 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, e.g., "Oh yeah, I hear the voices (or see the devil)."  
Encourage further discussion of the delusion processes.  
Demand, command or order.  
Expect customary emotional responses.

## The Verbally Aggressive Student

Students may become verbally abusive when they encounter frustrating situations which they believe are beyond their control. They can displace anger and frustration from those situations onto the nearest target. 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 her/his world and you are the object of pent-up frustrations. This behavior is often associated with the use of alcohol and other drugs.

## — DO —

Acknowledge the student's anger and frustration, e.g., "I hear how angry you are."  
Speak calmly and clearly.  
Remember to breathe.  
Rephrase what the student is saying and identify her/his emotion, e.g., "It appears you are upset because you feel your rights are being violated and nobody will listen."  
Reduce stimulation; invite the student to a quiet place if this is comfortable.<sup>3</sup>  
Allow student to tell you what is upsetting her/him.  
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 yell and scream at me that way."  
Help the student problem solve and deal with the area issues when she/he becomes 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.

<sup>3</sup> Do not do this if you fear for your safety. In all instances, ensure that a staff or a faculty person is easily accessible to you in the event that the student behavior escalates.

## — DON'T —

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.  
Touch the student, as this may be perceived as aggression or otherwise unwanted attention.

## The Violent Student

Violence because of 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. This behavior is often associated with the use of alcohol and other drugs.

### — DO —

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, e.g., "You certainly have the right to be angry, but breaking things is not OK."  
Get necessary help (send a student for other staff, University Police, etc.).  
Stay safe: have easy access to a door; keep furniture between you and the student. Keep door open if at all possible/appropriate. As with the verbally aggressive student, make certain that a staff or faculty 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.

### — DON'T —

Ignore warning signs that the person is about to explode, e.g., yelling, screaming, clenched fists, threats.  
Threaten or corner student.  
Touch the student.

## Personal Counseling Available to CSUEB Students

**Counseling and Psychological Services** provides free, short-term personal counseling services to all registered students at California State University, East Bay. Our professional staff provides a range of counseling, outreach, emergency and wellness services. We offer culturally sensitive support dealing with many issues and concerns. We are your student counseling service on campus. For more information call us at (510) 885-3690 or visit us online at [wwwsa.csueastbay.edu/counseling](http://wwwsa.csueastbay.edu/counseling)

## Useful Telephone Numbers

### **Counseling and Psychological Services**

(510) 885-3690

Located in Student Health

Monday - Friday, 8:30 am - 6 pm (Wednesday 7 pm, Fridays 5 pm)

### **Student Disability Resource Center**

(510) 885-3868

### **Student Health Center**

(510) 885-3735

Monday - Thursday, 8:30 am - 5:00 pm (Monday & Thursday 7 pm)

### **Student Judicial Affairs**

(510) 885-3763

### **University Police Department**

(510) 885-3791

24 Hours/Day, 7 Days/Week Call 911 for emergencies

### **Crisis Support Services of Alameda County**

(800) 309-2131, 24 hour crisis line

*Call Counseling and Psychological Services for a more extensive referral list.*

## Acknowledgements

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