



# FACULTY/STAFF GUIDE

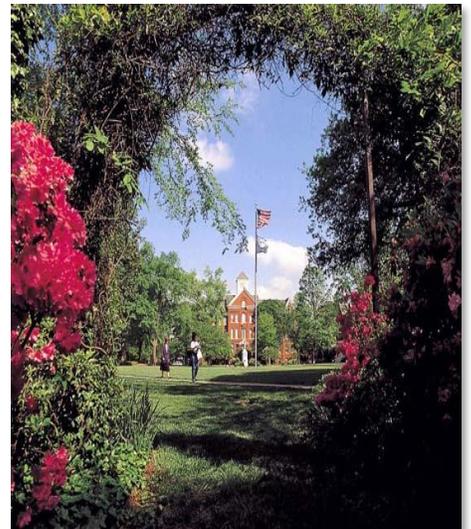


## Helping Emotionally Distressed Students

### Introduction

College years typically bring fond memories to many. Yet, some may also remember those days as having been quite stressful. Financial worries, relationships in conflict, peer pressures, loss of support, family problems, waning self-confidence, and academic struggles are common and acutely stressful challenges for many Spelman students. With a little help, most students successfully negotiate these developmental “traumas.” Unfortunately, some of our students’ personal/family problems may go unresolved and the level of emotional distress becomes overwhelming.

Many students seek counseling services on their own. However, faculty, teaching assistants, and staff are often the first to recognize a student’s inability to function well academically or emotionally. Students may turn to you because of your position and the respect they hold for you. Faculty and staff often handle these difficult situations themselves, while providing a critical link in helping the student locate the appropriate professional resources. Following is a guide, which might be helpful in executing critical and supportive first steps, when a concern or question presents during your interaction with a student. Also, this guide may be prove helpful until you can make a referral or obtain consultation.



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# Making Referrals to the Counseling Center

## Referrals

If you feel that professional counseling may be beneficial, refer the student to the Counseling Center. Let the student know that you believe a therapist would be of help in this situation. Inform the student that the services are strictly confidential and free of charge. However, do not force the issue.

If the referral is accepted, you can offer to walk the student over to the Counseling Center, for a walk-in session or to schedule an appointment for an initial chat. If the student says “no” to a referral, you may touch base at a later time. This will indicate that you do still care, despite the student’s initial rejection of the referral.

## Emergency Situations

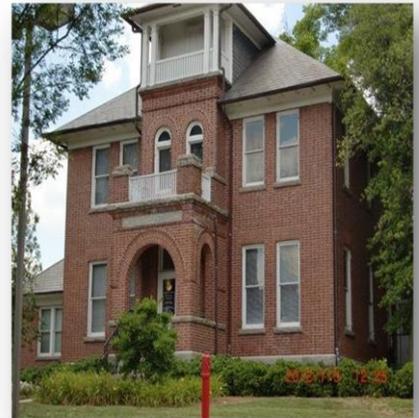
If an emergency situation occurs and a student proves unable or unwilling to reach out for help, it is critical that you immediately inform the Counseling Center (404-270-5293) and/or Public Safety (404-525-6401). This is particularly so, if the student is out of control and/or the student’s situation is life threatening to self or others.

The Counseling Center is located in MacVicar Hall, 2nd Floor. Hours of service are Monday-Friday 9am-4:30pm. Daily walk-in (unscheduled) sessions with therapists are Monday-Thursday from 9am-2pm and on Friday from 9am-12pm. Students may also call 404-270-5293, Monday-Friday to schedule an appointment. Scheduled appointments are Tuesday-Friday from 10am-3pm.

If you are unsure of how to handle a student’s issue call the Counseling Center at 404-270-5293, to consult with one of the therapists. A brief consultation may help you sort out the relevant issues, explore alternative approaches, and identify other resources.

*Not comfortable talking with a student who appears emotionally distressed?*

*Refer or walk the student to the Counseling Center.*



## MacVicar Hall 2<sup>nd</sup> Floor

Services: Free and Confidential

Hours of Services:  
Monday-Friday ■ 9am-4:30pm

Unscheduled Walk-In Session:  
Monday -Thursday ■ 9pm-2pm  
Friday ■ 9am-12pm

Scheduled Appointments:  
Tuesday-Thursday ■ 10am-3pm

# Faculty/Staff Role

Noted by students as one of the most significant factor in their successful resolution of an emotional problem has been the person who had the ability to recognize their signs of emotional distress, and who had the courage to acknowledge these concerns.

As a faculty or staff member, you are in an excellent position to recognize behavioral changes that characterize the emotionally distressed student. A student's behavior, especially if it is inconsistent with your previous observations, could well constitute a "cry for help." Extending yourself to others involves some risk, but it can be gratifying when kept within realistic limits.

## Guidelines for Interaction with Students

You can have a profound effect by openly acknowledging your awareness of students' distress, expressing your concerns, and demonstrating your willingness to help them explore alternatives. Whenever possible, speak directly and honestly to a student when you sense academic and/or personal distress. Here are a few guidelines:

- See the student in private. This may help minimize embarrassment and defensiveness.
- Acknowledge your observations and perceptions of the situation and express your concerns.
- Listen carefully to the student's issue and try to view it from the student's perspective without necessarily agreeing or disagreeing.
- Attempt to identify the student's concern, as well as your own concerns or uneasiness.
- Strange and inappropriate behavior should not be ignored. Comment directly on what you have observed.
- Your flexibility with procedures may allow an alienated student to respond more effectively.
- Limit your involvement. In an attempt to reach out and help a troubled student, you may become more involved than time or skills permit.

## Signs of Distress

- Inability to Concentrate
- Confusion
- Persistent Worrying
- Social Isolation/Withdrawal
- Increased Irritability
- Bizarre Behavior
- Missed Classes/Assignments
- Noticeable/Significant Weight Gain or Loss
- Restlessness
- Disheveled Appearance
- Loss or Change of Emotions
- Indecisiveness
- Talking about Death, Dying, or "Going Away"

# The Depressed Student

As staff or faculty you may notice a depressed student who presents in various ways: speaks slowly, has a lack of expression, sighs, exhibits difficulty in making decisions, struggles with concentration, presents as irritable or easily agitated, or shares statements of hopelessness or worthlessness. This student's class participation and/or attendance may decrease or cease over time.

## What to Do

- Share that you are aware that the student seems to be feeling down and that you would like to help.
- Reach out more than halfway and encourage the expression of feelings.
- Tell the student of your concern.

*Depressed students are often initially reluctant to talk. Yet, attention may help other students feel more significant.*

## What Not to Do

- Say, "Don't worry." "Crying won't help." "Everything will be better tomorrow." "You just need to work harder."
- Be afraid to ask whether a student is thinking of self-harm, if you think or feel this maybe a possibility.

*If the student expresses thoughts of self-harm, a lack of desire to live or a willingness to be harm, get professional help immediately – call the Counseling Center at 404-270-5293 and/or Public Safety at 404-525-6401. You can make your CARE Team Report at [https://cm.maxient.com/reportingform.php?SpelmanCollege&layout\\_id=10](https://cm.maxient.com/reportingform.php?SpelmanCollege&layout_id=10)*

# The Suicidal Student

Suicide is the third leading cause of death among college students. Suicidal persons are intensely ambivalent about killing themselves and typically responds to help. High-risk indicators include feelings of hopelessness, helplessness, and futility; a severe loss or threat of a loss; a suicidal plan; history of a previous attempt; history of alcohol or drug abuse; and feelings of alienation and isolation. Suicidal students usually want to communicate their feelings, and the inability to do so results in a rage or anger directed toward themselves.

## What to Do

- *Take it seriously* – 75 percent of all people who commit suicide give some warning of their intentions to a friend or family member.
- *Be willing to listen* – even if professional help is needed, a student will be more willing to seek help if you have listened.
- *Voice your concern* – take the initiative to ask what is troubling the student and share your concern.
- *Get professional help immediately*– call the Counseling Center at 404-270-5293 and/or Public Safety at 404-525-6401. You can make a CARE Team Report at [https://cm.maxient.com/reportingform.php?SpelmanCollege&layout\\_id=10](https://cm.maxient.com/reportingform.php?SpelmanCollege&layout_id=10)

## What Not to Do

- Assume the situation will take care of itself.
- Be sworn to secrecy.
- Act shocked or surprised at what the person says.
- Chastise, challenge or dare.

# The Anxious and Stressed Student

Most of us live, work, teach and learn in a complex and stressful world. Epidemiological studies indicate that at any given time 17 percent of the general population is suffering with clinical levels of anxiety. This suggests that at this moment a significant number of Spelman students are experiencing stress at levels high enough to compromise their ability to perform at their full academic potential.

As a response to situations that are perceived as uncomfortable, overwhelming, intimidating or frightening, anxiety can manifest in various situations. Examples of such anxiety producing situations include a need to perform or socialize, the separation from a significant person, an anticipation of or the actual experience of a test/quiz or the need to face a personal phobia. Feelings may present as worry, nervousness, unease, fear or panic. A student who is enduring anxiety may present in different ways. As faculty or staff you may notice a general state of agitation, panic in response to academic expectations, avoidance of interaction, irrational fearful when not in control, fatigue (due to sleeping disturbances) or what appears to be eating problems.

## What to Do

- If feasible, find a calm location to listen.
- Allow the student to express personal feelings and thoughts. Sincere listening alone often relieves a great deal of pressure.
- Remain calm, be clear, explicit, yet supportive.
- Encourage the student to make an appointment to see a counselor. While the student is with you, call 404-271-5293 to schedule a counseling appointment. If perceived as a crisis you may walk the student over to the Counseling Center.

*If the student refuses to engage with the Counseling Center, consult with a therapist to determine other strategies.*

## What Not to Do

- Minimize the severity of anxiety symptoms.
- Argue about how bad things are.
- Get frustrated when your suggestions are resisted.

# The Verbally Aggressive Student

This student typically becomes verbally abusive in frustrating situations, which are seen as being beyond the individual's personal control. Anger and frustration becomes displaced from the aggravating situations, and are directed towards you. The student often anticipates rejection. Therefore, there is an attempt to reject you first.

## What to Do

- Acknowledge the student's anger and frustration (e.g., "I hear how angry you are").
- Reduce stimulation. Invite the student to your office or to another quiet place (only if it is comfortable for you).
- Consider keeping your office door open or inviting another faculty or staff member to join you.
- Allow the student to vent, get the feelings out, and tell you what is so upsetting.
- Rephrase what is being shared by the student, identifying the emotion (e.g., "I can see how upset you are because you feel your rights are being violated and nobody will listen").
- Tell the student that you are not willing to accept verbally abusive behavior (e.g., "When you yell and scream at me that way, I find it hard to understand what is frustrating you").
- If the student is getting physically close and your personal space is being violated tell the student to move back, (e.g., "Please stand back; you're too close").
- Once the student is calm, help in problem-solving to deal with the issues - if this is feasible.

## What Not to Do

- 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 or reasons for the verbally aggressive behavior (e.g., "Now I'd like you to tell me exactly why you are being so obnoxious").
- Look away and not deal with the situation.
- Give away your own rights as a person.
- Hesitate to call Public Safety (404-525-6401) if the situation escalates.

# The Violent or Physically Destructive Student

Violence as a result of emotional distress is very rare. Such violence typically occurs only when the student is very frustrated and feels there are no other options.

## What to Do

- Stay in an open area.
- Prevent total frustration and helplessness by quickly and calmly acknowledging the intensity of the situation (e.g., “I can see you’re upset and really mean business and have some serious concerns on your mind”).
- Explain clearly and directly what behaviors are acceptable (e.g., “You certainly have the right to be angry, but screaming, hitting or breaking things are not okay”).
- Get necessary help immediately (other faculty/staff) and call Public Safety at 404-525-6401).

## What Not to Do

- Ignore warning signs that the student is about to explode (e.g., clenched fists, yelling or screaming statements like, “You’re leaving me no choice”).
- Threaten, dare, taunt, or push the student into a corner.
- Touch.

# The Substance Abusing Student

Given the stresses of college life, a student is especially susceptible to drug abuse. A variety of substances are available that provide escape from pressing demands. The problem with substance abuse is that these drugs soon create their own sets of problems in the form of addiction, accident proneness and poor health. The most abused substance is alcohol. Alcohol and other drug-related accidents remain the greatest single cause of preventable deaths among college students.

Common indicators of intoxication are slurred incoherent or too rapid speech; an inability to focus (both visually and mentally); an unsteady gait; nodding off; rambling train of thought; very slow responses to questions; muddled hair or a disheveled appearance; sullen, moody or overly loud, boisterous or animated behavior. An inebriated student may exhibit a combination of these common signs of intoxication or a sudden change in behavior.

## What to Do

- Be on the alert for signs of substance abuse (e.g., preoccupation with drugs, inability to participate in class activities, deteriorating performance in class, periods of memory loss or blackouts).
- Share your honest concern for the student.
- Encourage the student to seek help.
- Seek immediate help in instances of intoxication.  
(Student Health Services - 404-270-5249 and/or Public Safety - 404-525-6401).

## What Not to Do

- Ignore the problem.
- Chastise, lecture or shame.
- Encourage the behavior.

# The Student in Poor Contact with Reality

This student has difficulty distinguishing fantasy from reality. Thoughts are typically illogical, confused or disturbed. The student may create new words, see or hear things that no one else can, have irrational beliefs or exhibit bizarre or inappropriate behavior. Generally, this student is not dangerous and may present as very confused, frightened and overwhelmed.

## What to Do

- See the student in a quiet atmosphere, if you are able to do so.
- Remove extra stimulation from the environment.
- Respond with warmth and kindness, but with firm reasoning.
- Acknowledge your concerns and state that you can see that the student needs help (e.g., “It seems very hard for you to integrate all these things that are happening. I am concerned about you, and I would like to help”).
- Acknowledge the feelings or fears without supporting the misperceptions (e.g., “I understand you think they are trying to hurt you. I know how real it seems to you, but I don’t hear the voices”).
- When appropriate, reveal your difficulty in understanding what is being stated (e.g., “I’m sorry but, I do not understand. Please repeat that or say it in a different way”).
- Focus on the “here and now”. Switch topics and divert the focus from the irrational to the rational or the real.
- Speak to the student’s healthy side. Also, it is okay to joke, laugh, or smile when appropriate.

## What Not to Do

- Argue or try to convince the student of the irrationality of the thoughts being experienced and shared. It causes the student to defend the thoughts (false perceptions) more.
- Play along (e.g., “Oh yeah, I hear the voices”).
- Encourage further revelations of craziness.
- Demand, command or order.
- Expect customary emotional responses.

# The Guarded Student

Typically, this student may seem capable and bright, yet presents as a loner - tense anxious, and mistrustful. Expressions of dissatisfaction or annoyance are usually about something other than personal psychological difficulties. Seeing self as the focal point of everybody's behavior, everything that happens may have a personal meaning for this student. Minor oversights are often interpreted as a significant personal rejection, with the student overreacting to occurrences usually viewed as insignificant. Intensely concerned with fairness and being treated equally, the student's feelings of worthlessness and inadequacy underline most of the exhibited behavior.

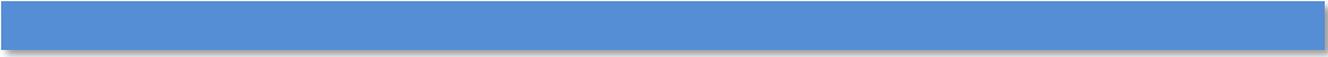
## What to Do

- Express compassion without intimate friendship. A suspicious student has trouble with closeness.
- Be firm, steady, punctual, and consistent.
- Be specific and clear regarding standards of behavior you expect.

## What Not to Do

- Assure the student that you are a friend. Instead, agree with the student that you are a stranger, but even strangers can be concerned.
- Be overly warm and nurturing.
- Flatter or participate in their games; you do not know the rules.
- Be cute or humorous.
- Challenge or agree with any mistaken or illogical beliefs.
- Be ambiguous.

# Confidentiality Guidelines



All members of the Counseling Center staff are governed by the principles of confidentiality, which are defined by federal and state laws, as well as our disciplines. Therefore, once you have made a referral, Center staff are unable to provide any information pertaining to the student, without a sign and dated release of information form (permission) provided by the student.

With a release form sign and dated by the student, the Center is able to indicate if the student presented for a walk-in session or an appointment. Specifics cannot be provided. However, we can listen as you share your concerns pertaining to the referred student.

During a consultation a Counseling Center clinician will be able to:

- Answer general questions about making referrals to the Counseling Center.
- Provide information about psychological concerns in general.
- Provide other referral ideas.
- Obtain from you any information regarding specific behaviors of the student.
- Provide supportive strategies for your consideration.

# Life Threatening Mental Health Emergencies

## On Campus

- Contact the Counseling Center at 404-270-5293 (Monday-Friday 9am-4:30pm)
- Contact Public Safety at 404-525-6401 (24 Hours/ 7 Days a Week)

## Off Campus

- Call 911 or Go to Your Nearest Emergency Room for Care (24 Hours/7Days a Week)

## National

- SAMHSA's National Helpline – 1-800-662-HELP (4357)  
SAMHSA's National Helpline is a free, confidential, 24/7, 365-day-a-year treatment referral and information service (in English and Spanish) for individuals and families facing mental and/or substance use disorders.



For Consultation Call 404-270-5293

The contents are the product of the combined efforts of Counseling Centers who comprise the Organization of Counseling Center Directors in Higher Education (OCCDHE).