

Assisting the Emotionally Distressed Student

A guide for Staff, Faculty, and Administrators at Imperial Valley College

2019-2020

v.6

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Acknowledgements

This guide is a result of the collaborative efforts of many community college educators throughout the state dedicated to providing an optimal learning environment for all students.

INTRODUCTION

Dear Colleagues,

Attending college is a journey that brings moments of excitement, challenge, and reward for many of our students. At times, however, our students' educational path is impeded by psychological, financial, social, and family pressure that overwhelms many, even the well-adjusted student.

At Imperial Valley College, we have several programs in place to address our students' myriad needs. Included in these programs are ongoing mental health counseling, crisis support, campus safety, student services, and student development.

Additionally, IVC has a Student of Concern Team, comprised of campus members trained and experienced in working with students who pose a risk to the safety of the campus community. The Crisis Team is also available, and will be called by Campus Security as needed.

We, as faculty, staff, and administrators, are often a student's first point of contact when s/he is experiencing emotional distress. This guide was created to provide you with resources in the event that you encounter a student who demonstrates a need for support outside of your scope of duties. If you are unsure about how to handle a situation on campus involving a student, please feel free to contact any of the individuals on page 18 for guidance.

On behalf of our students, we thank you for your ongoing support of student success and safety.

Warm Regards,

The Student of Concern Team

Guadalupe (Lupita) Castro, Victor C. Torres, Henry Covarrubias, Norma Nava, and Bianca Bisi.

YOUR ROLE AS FIRST RESPONDER

As a faculty, staff or administrator interacting with students, you are in an excellent position to recognize behavior changes that characterize the emotionally distressed student. A student's behavior, especially if it is inconsistent with your previous observations, could well constitute an inarticulate attempt to draw attention to his/her plight--"a cry for help". Your ability to recognize the signs of emotional distress and to acknowledge your concerns directly to him/her is often noted by students as the most significant factor in their successful problem resolution.

Be Prepared

- Be aware of early signs of distress
- · Locate the closest phone to your work site
- Know your surroundings
- Memorize emergency numbers
- Read confidentiality and mandated reporting laws

Emergency Numbers

- IVC Deputy Sheriff: 760-483-7411 (Cell phone) or ext. 1111 (from ShoreTel)
- IVC Campus Safety: 760-355-6308
- Imperial County Crisis Line (24/7): 1-800-817-5292
- Imperial County Crisis Referral Desk: 442-265-1525
- Crisis Text Line: Text COURAGE to: 741741

SIGNS OF AN EMOTIONALLY DISTRESSED STUDENT

- Missed classes/assignments
- Inability to concentrate
- Confusion
- Persistent worrying
- Social isolation
- Depression
- Increased irritability
- Restlessness
- Bizarre behavior
- Procrastination
- Dangerous behavior
- Disheveled appearance
- Mood swings
- Indecisiveness
- Suicidal or violent references in class assignments

CRISIS INTERVENTION

The following information describes the procedures to apply when a student or individual presents anywhere on campus with signs of experiencing a psychological emergency.

IVC PSYCHOLOGICAL CRISIS PROTOCOL

- Call the IVC Campus Deputy Sheriff or Campus Safety Officers (CSO's) at ShoreTel extension 1111, cell phone (760) 483-7411, or IVC Radio Channel 1. You may also call the Campus Safety office at extensions 6308 or 6307.
- 2. The caller should provide the following information to the Campus Safety responders: **Brief description of the incident and the location (i.e. office or room #)**.
- 3. Campus Deputy Sheriff and/or CSO's will respond immediately to the requested location.
- 4. Campus Deputy Sheriff and/or CSO's will interview the student/individual to determine the type of emergency or threat.
- 5. Campus Deputy Sheriff may proceed with appropriate safety standards including:
 - W & I 5150 if applicable under the following code definition: California Welfare and Institutions Code allows a Peace Officer may, upon probable cause, take the person into custody for a period of up to 72 hours for assessment, evaluation, and crisis intervention.
 - Link the student to IVC Mental Health Counselors.
 - Provide a voluntary transport to Imperial County Behavioral Health Services (ICBHS) Access Center.
 - Call the student's/individual's emergency contact or family to pick them up at IVC.

EXAMPLES OF CRISIS SITUATIONS

Threats of physical violence, witness to physical assault, concern for the life of self or others, immediate threats of suicide, abuse (child, spousal, dependent and elderly), sexual assault and/or harassment, erratic behavior and an individual under the influence of alcohol or drugs.

If there is an Imminent, Urgent, or Uncertain situation, a call for intervention must be made. When in doubt, err on the side of making that call.

In case of experiencing or witnessing imminent danger, please contact the IVC Deputy Sheriff and/or Campus Safety Officer (CSO) at 760-483-7411 or 9-1-1.

***All other non-emergency concerns require a referral using the *Student of Concern form* (see p. 6).

MENTAL HEALTH COUNSELING SERVICES

IVC Mental Health Counseling Services are available (covered by the student health fee) for currently registered students who can benefit from a short-term mental health treatment. Our professional team will determine if the student requires longer-term treatment and appropriate referrals to off-campus resources.

Early intervention is always preferable to prevent crisis intervention.

STUDENT REFERRAL TO IVC MENTAL HEALTH SERVICES

When you discuss a referral for Mental Health Counseling Services with a student, it is helpful for the student to hear in a clear, concise manner your concerns for considering counseling services an option. In addition, share the below program contact information with the student. All services are confidential except when the student presents a danger to self or others or when the counselor has reasonable suspicion that child or elder abuse is occurring. **Child Abuse Reporting** (Please see Administrative Policy 3518 https://www.boarddocs.com/ca/caiccd/Board.nsf/Public#).

To refer a student for Mental Health Counseling Services, please instruct the student to complete a "Mental Health Counseling Appointment Request" form located in the Student Health Center. Placing the initiative on the student to seek for an appointment increases his/her personal responsibility and commitment for counseling treatment. A Mental Health Counseling Services provider will conduct the initial screening with the student within 48 business hours.

There may be special circumstances when it is best for you to call the Student Health Center (SHC) 760-355-6310 to make an appointment in presence of the student. Alternatively, escort the student to the SHC to make an appointment in person.

STUDENT HEALTH CENTER HOURS AND CONTACT INFO

Student Health Center Office Hours:

Monday-Thursday 8:30 a.m. to 4:30 p.m.

Friday 8:30 a.m. to 12:30 p.m.

Location:

Building #1536 (Next to the Assessment Center)

Phone Contact:

Nurse or Mental Health Counselor(s): 760-355-6310

STUDENT OF CONCERN TEAM & REFERRAL FORM

STUDENT OF CONCERN TEAM MISSION

The mission of the IVC Student of Concern (SOC) team is to promote a safe and healthy campus environment by coordinating a supportive response to students whose behavior raises concern for themselves or other campus community members.

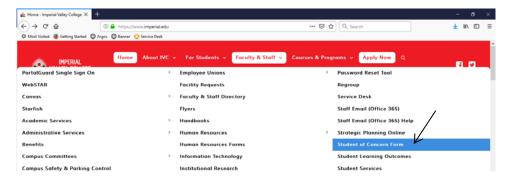
STUDENT OF CONCERN PURPOSE

The purpose of the SOC team is to provide consultation to staff, faculty, and administrators focused on prevention and early intervention in campus situations involving students experiencing extreme distress or engaging in harmful or disruptive behaviors. The team will provide collaborative support and strategies to address concerns regarding students' well-being or behavior that is potentially harmful to self and/or others or is disruptive and/or threatening. This team will regularly assess these situations in the college community and will recommend action in accordance with existing college policy. The SOC main goal is to link students of concern to on and off-campus resources.

Typical consultations may involve students with suicide risk, eating disorders, alcohol and drug problems or aggressive/disruptive behavior. Behavior of concern may be demonstrated physically, verbally, or in writing.

STUDENT OF CONCERN REFERRAL FORM

If you have identified a student in need of assistance from the SOC team, but the situation does not warrant an emergency response, you must complete a Student of Concern Referral Form. Please go to the IVC website page under the <u>Faculty & Staff</u> section.



***Please call the Student Health Center 760-355-6310 to get the password. The SOC form should be filled out as completely as possible.

Note: The SOC form is NOT to be used for immediate emergency assistance.

IDENTIFYING STUDENTS IN NEED OF ASSISTANCE

THE DEPRESSED STUDENT

Depression 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, most students will experience periods of reactive depression in their college careers. When the depressive symptoms become so extreme or enduring that they begin to interfere with the student's ability to function in school, work or social environment, the student will come to your attention and be in need of assistance.

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

- Tearfulness/general emotionality
- Markedly diminished performance
- Dependency (a student who makes excessive requests for your time)
- Infrequent class attendance
- Lack of energy/motivation
- Increased anxiety/test anxiety/performance anxiety
- Irritability
- Deterioration in personal hygiene
- Significant weight loss or gain
- 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're aware she/he is feeling down and you would like to help.
- ✓ Encourage the student to discuss how she/he is feeling with someone they trust.
- ✓ Offer to refer him/her for Mental Health Counseling, and submit a Student of Concern Referral form.

- ✓ Minimize the student's feelings (e.g. "Don't worry.")
- ✓ Bombard the student with "fix it" solutions or advice.
- ✓ Chastise the student for poor or incomplete work.
- ✓ Be afraid to ask the student whether he/she is suicidal.

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
- A detailed suicide plan, a history of a previous attempt
- History of alcohol or drug abuse
- Feelings of alienation and isolation.

Do:

- ✓ Take the student seriously 80 percent of suicides give a warning of their intent.
- ✓ Be direct ask if the student is suicidal, if he/she has a plan and if he/she has the means to carry out that plan. Exploring this with the student actually decreases the impulse to do it.
- ✓ Be available to listen.
- ✓ Activate the Crisis Protocol by contacting the Campus Deputy Sheriff or Safety Officers at 760-483-7411.
- ✓ You can always call 9-1-1 if threat of suicide is imminent.

- ✓ Assure the student that you are his/her best friend (it is ok to agree you are a stranger, 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 ANXIOUS STUDENT

Anxiety is a normal response to a perceived danger or threat to one's well-being.

For some student the cause of their anxiety will be clear but for others it is difficult to pinpoint.

Regardless of the cause, the resulting symptoms maybe experienced as 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 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 he/she is dying. The following guidelines remain appropriate in most cases.

Do:

- ✓ Let them discuss their feelings and thoughts. Often this alone relieves a great deal of pressure.
- ✓ Provide reassurance.
- ✓ Remain calm.
- ✓ Be clear and directive.
- ✓ Provide a safe and quiet environment until the symptoms subside (refer student to Health Services for rest).
- ✓ Offer to refer him/her for Mental Health Counseling, and submit a Student of Concern Referral form.

- ✓ Minimize the perceived threat to which the student is reacting.
- ✓ Take responsibility for their emotional state.
- ✓ Overwhelm them with information or ideas to "fix" their condition.

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. 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, state that you can see they need help.
- ✓ Activate the *Crisis Protocol* by contacting Campus Safety at 760-483-7411 or extension 1111.
- ✓ 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."
- ✓ 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.

- ✓ Argue or try to convince them of the irrationality of their thinking.
- ✓ 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 delusional processes.
- ✓ Demand, command, or order.
- ✓ Expect customary emotional responses.

THE VERBALLY AGGRESSIVE STUDENT

Students may become verbally abusive when in frustrating situations that they see as being beyond their control.

Anger and frustration may result in explosive outbursts or ongoing belligerent, hostile behavior - 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 with you personally, but is angry at his/her 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 their anger and frustration, e.g., "I hear how angry you are."
- ✓ Rephrase what they are saying and identify their emotion, e.g., "I can see how upset you are because you think your rights have been violated and nobody will listen."
- ✓ Reduce stimulation; invite the person to a quiet place if this is comfortable and the place is safe.
- ✓ Allow them to vent, get the feelings out, and tell you what is upsetting them; listen.
- ✓ Be directive and firm about the behaviors you will accept, e.g., "Please stand back, you're too close." "I cannot listen to you when you yell and scream at me that way." "Let's step outside to discuss this further."
- ✓ Activate response by contacting Campus Safety at 760-483-7411.
- ✓ Remember, Safety First.
- ✓ If threat increases call 9-1-1.
- ✓ Prohibit the student from entering your work area/classroom/office if behavior is repeated.

- ✓ Get into an argument or shouting match.
- ✓ Become hostile or punitive, e.g., "You can't talk to me that way!"
- ✓ Pressure for explanations of their behavior.
- ✓ Ignore the situation.
- ✓ Touch the student.

THE VIOLENT STUDENT

Violence due to emotional distress is rare, but it might happen.

It typically occurs when the student's level of frustration has been so intense or of such an enduring nature as to erode the student's entire 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."
- ✓ Explain clearly and directly what behaviors are acceptable, e.g., "You certainly have the right to be angry but breaking things is not okay."
- ✓ Stay safe; maintain easy access to a door; keep furniture between you and the student.
- ✓ Immediately seek assistance; contact 9-1-1 and Campus Deputy Sheriff or Safety Officer at 760-483-7411.

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

THE DEMANDING 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 important that this student be connected with many sources of support on-campus and in the community in general.

Do:

- ✓ Let them make their own decisions.
- ✓ Set firm and clear limits on your personal time and involvement.
- ✓ Offer referrals to other resources on and off campus.
- ✓ During repeated interactions stand while speaking with student; limit discussion to 3 minutes.
- ✓ Offer to refer him/her for Mental Health Counseling Services, and submit a Student of Concern Referral form.

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

THE STUDENT UNDER THE INFLUENCE

Alcohol is the most widely used psychoactive drug. It is common to find alcohol abusers in college populations also abusing 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. Alcohol abuse by a student is most often identified by faculty. Irresponsible, unpredictable behavior affecting the learning situation (i.e., drunk and disorderly in class), or a combination of the health and social impairments associated with alcohol abuse noticeably sabotages student performance. Because of denial that exists in most substance abusers, it is important to express your concern to the student in terms of specific changes in behavior/performance rather than terms of suspicions about alcohol/drug use.

Do:

- ✓ Confront the student with the behavior that is of concern.
- ✓ Address the substance abuse issue if the student is open and willing.
- ✓ Contact the Campus Deputy or Safety Office at 760-483-7411 if you encounter a student under the influence on campus.
- ✓ Offer concern for the student's overall well-being.

- ✓ 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 tense, anxious, mistrustful, loners, 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. They seem capable and bright.

Do:

- ✓ Express compassion without intimate friendship.
- ✓ Remember that 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.
- ✓ Offer to refer him/her for Mental Health Counseling, and submit a Student of Concern Referral form.

- ✓ Assure the student that you are his/her friend (it is ok to agree you are a stranger, 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 SEXUALLY HARASSED STUDENT

Sexual harassment involves unwelcome sexual advances, requests for sexual favors and other 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 on others 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, demeaning references to one's gender, sexually oriented jokes, conversations filled with innuendoes and double meanings, displaying of sexually suggestive pictures or objects, and repeated non-reciprocated demands for dates or sex.

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

Do:

- ✓ Listen carefully to the student, validating her/his experience.
- ✓ Separate your personal biases from your professional role maintain objectivity.
- ✓ Report this situation to Campus Safety at 760-483-7411.
- ✓ Encourage the student to approach the person directly or in writing to let him or her know that the behavior is unwelcome.
- ✓ Encourage the student to keep a log or find a witness.
- ✓ Help student seek informal advice through a department chair, supervisor or advisor.
- ✓ Offer to refer him/her for Mental Health Counseling Services.

- ✓ Do nothing. Taking no action invalidates the student's already shaky perception and puts the college in a vulnerable position should this behavior continue.
- ✓ Overreact.

GUIDELINES FOR INTERVENTION

Openly acknowledge to students that you are aware of their distress, you are sincerely concerned about their welfare, the welfare of those around them, and that you are willing to help. Exploring their alternatives can have a profound effect.

We encourage you, whenever possible, to speak directly and honestly to a student when you sense that s/he is in academic and/or personal distress.

- 1. Request to see the student in private. This may help minimize embarrassment and defensiveness.
- 2. Briefly acknowledge your observations of them (specific to behaviors and or performance); express your concerns directly and honestly.
- 3. Listen carefully to what the student may be troubled about and try to see the issues from his/her point of view without necessarily agreeing or disagreeing.
- 4. Attempt to identify the student's problem or concern as well as your concerns or uneasiness.
- 5. Unusual and inappropriate behaviors should not be ignored. <u>Comment directly on what you have observed.</u>
- 6. Involve yourself in the process as it affects your immediate work area and situation. At times, in an attempt to reach or help a distressed student, you may become more involved than time or skills permit.
- 7. You are ethically and legally responsible in terms of the mandatory reporting of child abuse (Please see Administrative Policy 3518 https://www.boarddocs.com/ca/caiccd/Board.nsf/Public#).

Extending oneself to others always involves some risk-taking but it can be a gratifying experience when kept within realistic limits.

CAMPUS EMERGENCY SUPPORT CONTACTS

STUDENT OF CONCERN TEAM

Guadalupe (Lupita) E. Castro Interim Director of Student Health Services/SOC Chair 760-355-6196, Bldg. 1536

Victor C. Torres Dean of Student Affairs and Enrollment Services 760-355-6457, Bldg. 100

Henry Covarrubias, Ph.D. Dean of Student Services and Special Projects 760-355-6455, Bldg. 1000

Norma Nava Disabled Student Program Services Coordinator 760-355-6314

Bianca Bisi Interim Associate Dean of Student Equity and Achievement 760-355-5736

STUDENT HEALTH CENTER TEAM

***Front Desk Contact Information: 760-355-6310, Building #1536

Angie Garcia Office Assistant II 760-355-5704

Guadalupe (Lupita) E. Castro, M.S.C., LMFT Licensed Marriage and Family Therapist (LMFT 84289) Interim Director of Student Health Services 760-355-6196

Jacqueline Cortez, M.S.C., LMFT Licensed Marriage and Family Therapist (LMFT 108775) Clinical Mental Health Counselor 760-355-5703

Ana V. Beltran, LVN Licensed Vocational Nurse 760-355-6128

Yesenia Salas, LVN Licensed Vocational Nurse 760-355-5731

COMMUNITY RESOURCES

RESOURCE	PHONE	AVAILABILITY
National Suicide Prevention Lifeline	800-273-8255	24/7
Imperial County Behavioral Health Crisis Line	800-817-5292	24/7
National Sexual Assault Hotline	800-656-4673	24/7
Imperial County Behavioral Health	442-265-1525	M-F, 8am-5p
Adult Protective Services	760-337-7878	24/7
Child Protective Services	760-337-7750	24/7
Imperial County Victim/Witness Assistance	760-336-3930	M-F, 8a-5p
Imperial County Public Health Department	442-265-1444	M-F, 8a-5p

