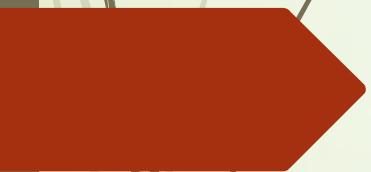
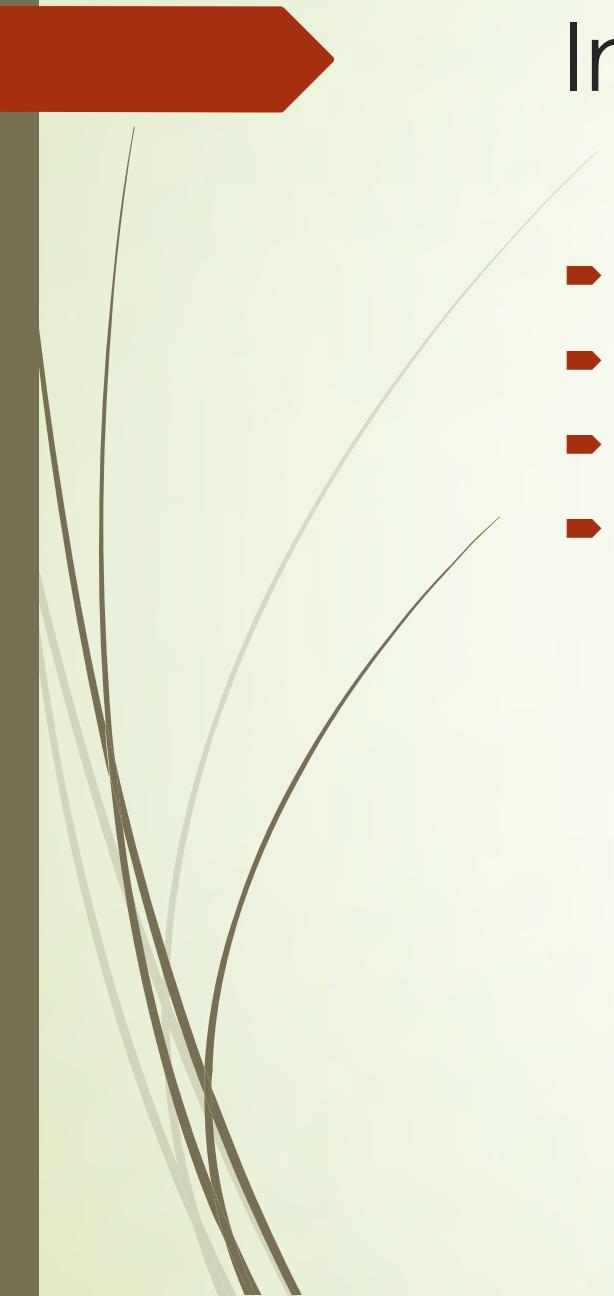




Students in Distress are Distressing!



Maryjan Murphy, Ph.D., Senior Associate Director
Counseling and Psychological Services



Introduction

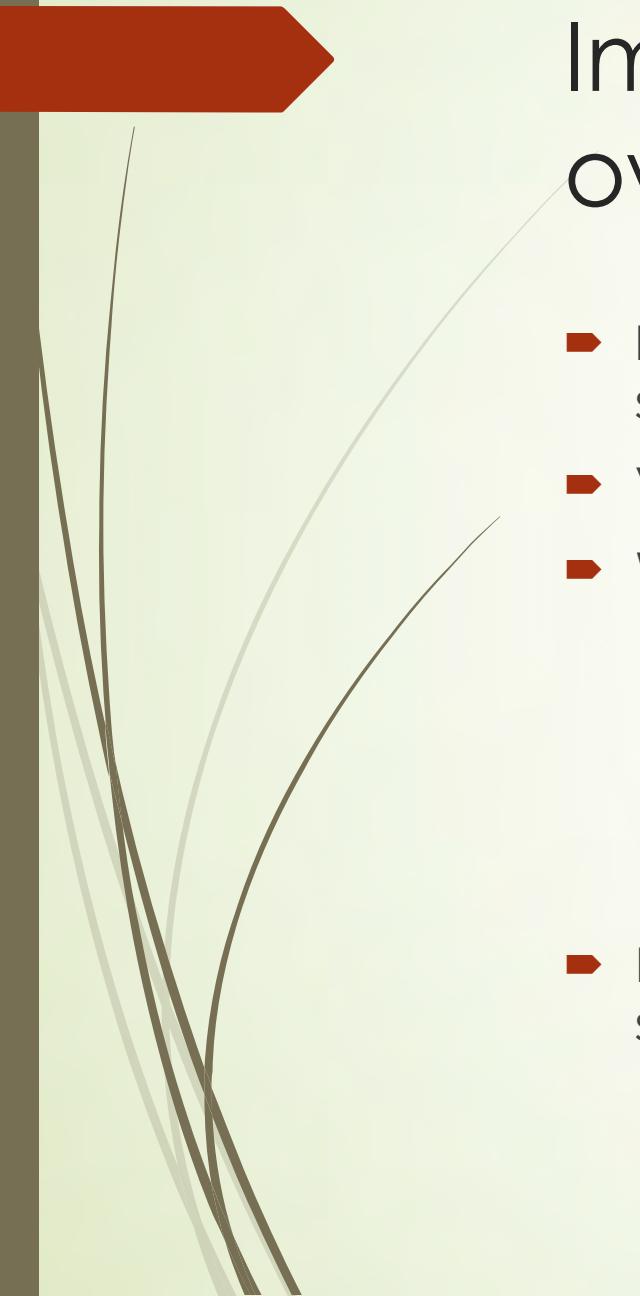
- ▶ Students experiencing significant mental health distress
- ▶ Bottom line: you are the front line each day for these students
- ▶ Recognize many of you are very experienced, many of you new to role
- ▶ Goals for today:
 - ▶ How to recognize students who are struggling
 - ▶ How do you determine a student is in crisis and needs a referral, versus help and support from you?
 - ▶ How to intervene with distressed students and students in crisis
 - ▶ How to refer students to appropriate resources
 - ▶ How to manage our own reactions and distress when assisting distressed students

College Student Mental Health

- ▶ Distressed students versus distressing students – What is the difference?
- ▶ CAPS sees approximately 13% of student body
- ▶ Main presenting concerns: anxiety, depression, relationships/academics
- ▶ Dx: Major depression, bipolar, AOD, eating disorders, psychosis, grief, ASD
- ▶ UCSC – students present with suicidal ideation
- ▶ We also see students with odd/eccentric behavior - does this constitute a mental health problem?
- ▶ Recognize we have all our own beliefs about mental health
- ▶ Impact of beliefs can impact how you respond to students in distress
- ▶ Acknowledging own reactions and distress essential in assisting these students

Small Group Exercise

- ▶ Turn to colleagues next to you – groups of 3
- ▶ 5-8 minutes
- ▶ Talk about a situation when you dealt with a student who was very upset
 - ▶ What did you do?
 - ▶ What feelings came up for you?
 - ▶ Are you concerned or anxious about a student situation that you will be facing In your role as an advisor?
- ▶ Share in large group – themes/concerns



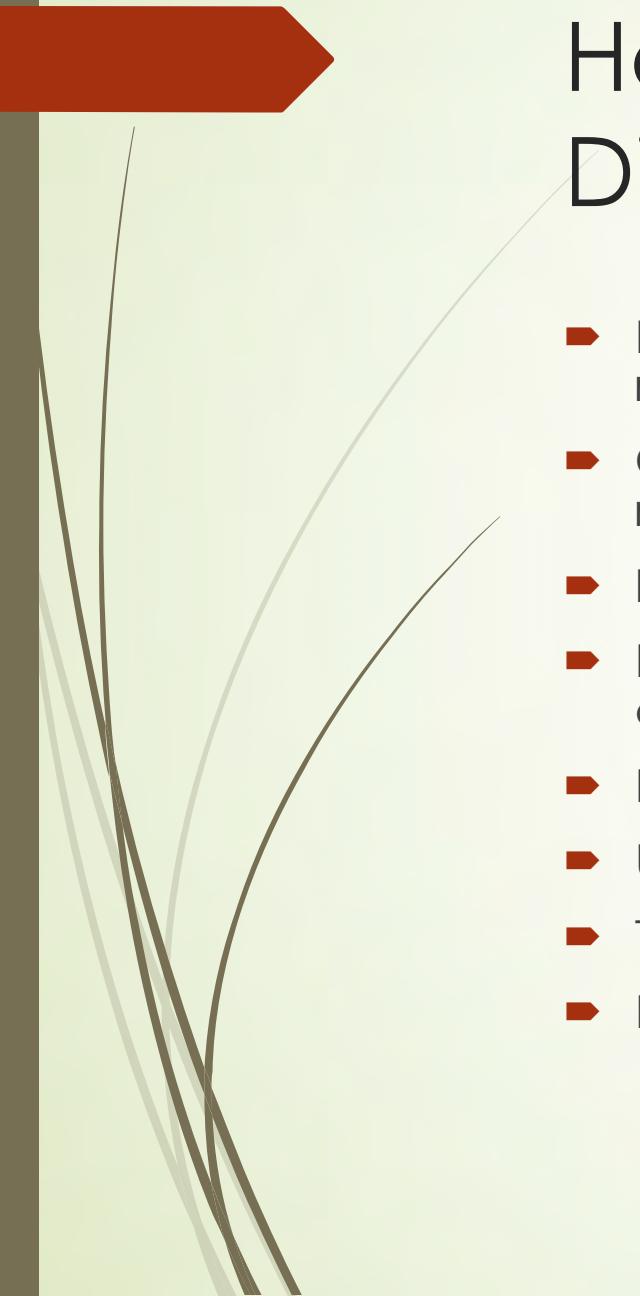
Importance of acknowledging our own reactions or distress

- ▶ It can be very anxiety producing to work with students who are distressed, suicidal, angry, depressed
- ▶ Very natural to have these reactions in our work
- ▶ Why is it important to acknowledge these feelings?
 - ▶ Helps you understand - is this because of the student or other life challenges?
 - ▶ Helps you stay more focused with student
 - ▶ Helps you be prepared for working with the student
 - ▶ Helps you know when you need to ask for help and consult
- ▶ Recognize our beliefs about mental health can impact how we respond to students in distress



What might our reactions be telling us?

- ▶ Can remind us of similar situations we have faced
- ▶ Can remind us of a similar situation we are facing right now with ourselves, with a family member, sibling, child, adult child
- ▶ Can tap into our own desires to help students (and fix their problems)
- ▶ Can lead to feelings of frustration (that we cannot fix their problems)
- ▶ Can lead to anxiety and worry about the safety of the student – this is not what I signed up for!
- ▶ Possible impact on work with students:
 - ▶ Want to do as much as we can for the student – work too hard for student
 - ▶ Difficulty setting boundaries with students
 - ▶ Want to give resources and refer quickly
 - ▶ Others?



How Do You Know a Student is Distressed?

- ▶ Normal developmental reactions and responses (identity, classes, major, relationships)
- ▶ Common stressors students experience (adjustment, isolation, identity, roommates, finances, assault, AOD, low self-esteem)
- ▶ Immigration status stressors
- ▶ Problems with academic performance (missing classes, poor performance, change in functioning, procrastination)
- ▶ Dramatic change in academic status
- ▶ Unusual behavior (marked changes, aggressive, irritable, weight changes)
- ▶ Traumatic changes in relationship (death of family/friend, breakups)
- ▶ References to suicide or homicide

Signs/Behaviors of a Distressed Student

► What signs do you see?

- ▶ Procrastination, indecisive, missing classes, behind in schoolwork
- ▶ Depressed, lethargic, listless, withdrawn, isolating, not getting out of bed or going to classes
- ▶ Repeated requests for special considerations
- ▶ Anxious, hyperactive, irritability
- ▶ Extreme mood changes, or emotionality
- ▶ Overt or veiled references to suicide; statements of hopelessness, indications of prolonged unhappiness; pessimistic feelings about future
- ▶ Bizarre or strange behavior (may indicate loss of contact with reality)



Talking to the Student

- ▶ Always meet with students in private
- ▶ Note your observations of the student and express any concerns you have directly and honestly (I'm concerned you aren't going to your classes)
- ▶ If you notice any strange or inappropriate behavior, please don't ignore it. You can tell the student the behavior is distracting or inappropriate
- ▶ Listen carefully to what is troubling the student and try to see their issue from their point of view without agreeing or disagreeing
- ▶ Get involved only as much as you feel comfortable

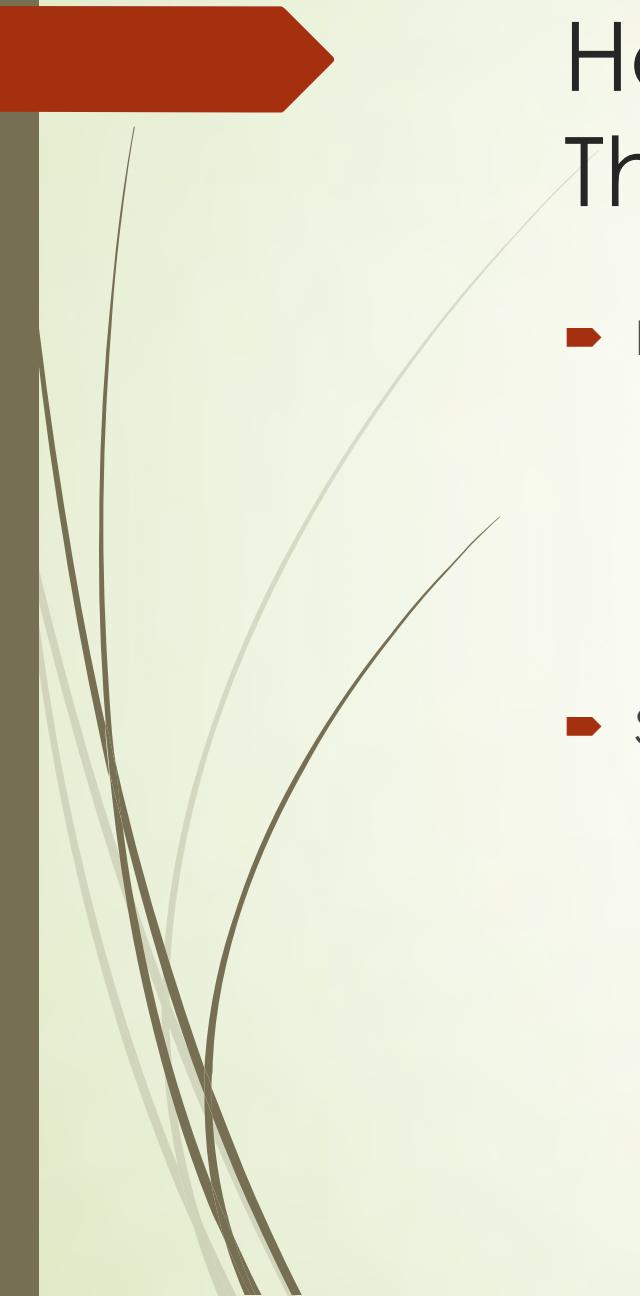


First Step – Is this a Crisis?

- ▶ Danger to self or others
- ▶ Student reports they are suicidal, or going to hurt someone else
- ▶ Does the situation require an immediate referral to CAPS, or a call to police or 911?
 - ▶ How do you know?
 - ▶ Are you experiencing thoughts of wanting to kill yourself right now?
 - ▶ Can you consult with a colleague or CAPS
- ▶ What are the safety procedures in your office?
- ▶ Importance of consulting – colleague, supervisor, CAPS, police
- ▶ Emergency situations are rare, but need immediate action when occur
- ▶ Practice question

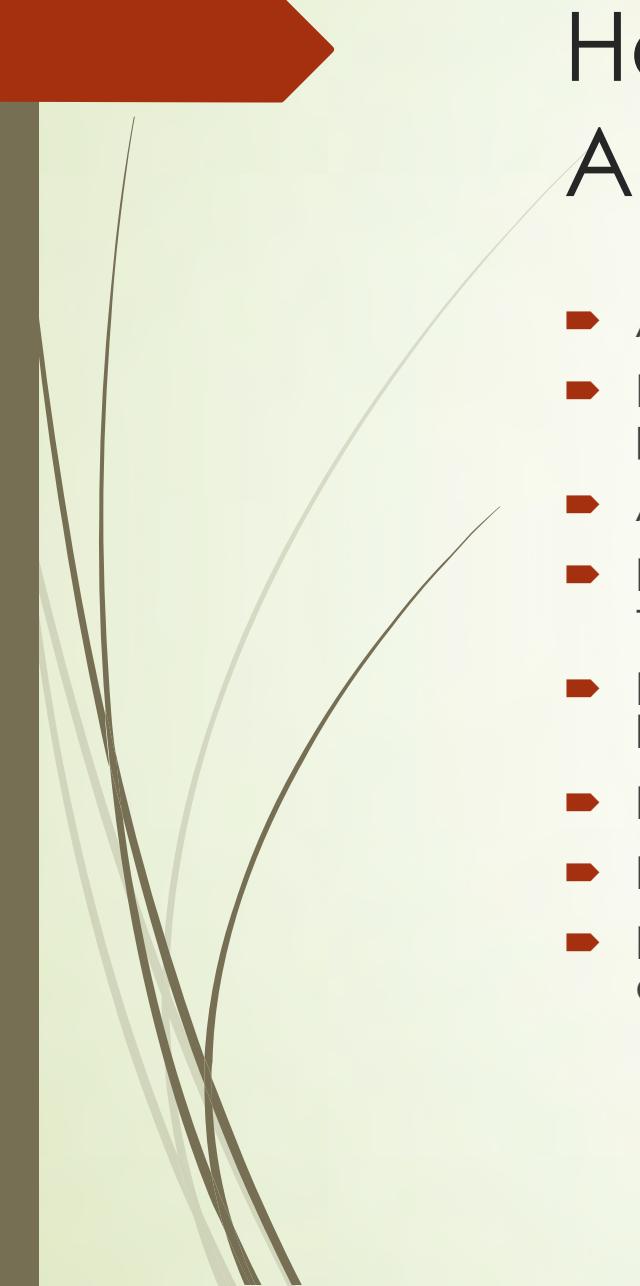
When to Listen, When to Refer

- ▶ Effective, active listening
 - ▶ Listen to their concern and rephrase what you have heard (You are worried that this grade is going to prevent you from getting into graduate school)
 - ▶ Provide reassurance without being unrealistic
 - ▶ Respond with empathy and briefly share how you can relate (You feel like you're going to disappoint your parents – I remember that when I failed my first class)
 - ▶ Acknowledge their feelings, anger, frustration
 - ▶ Let the student tell you what is upsetting them
 - ▶ Remain calm, be clear and direct, and supportive and available
 - ▶ Examples?



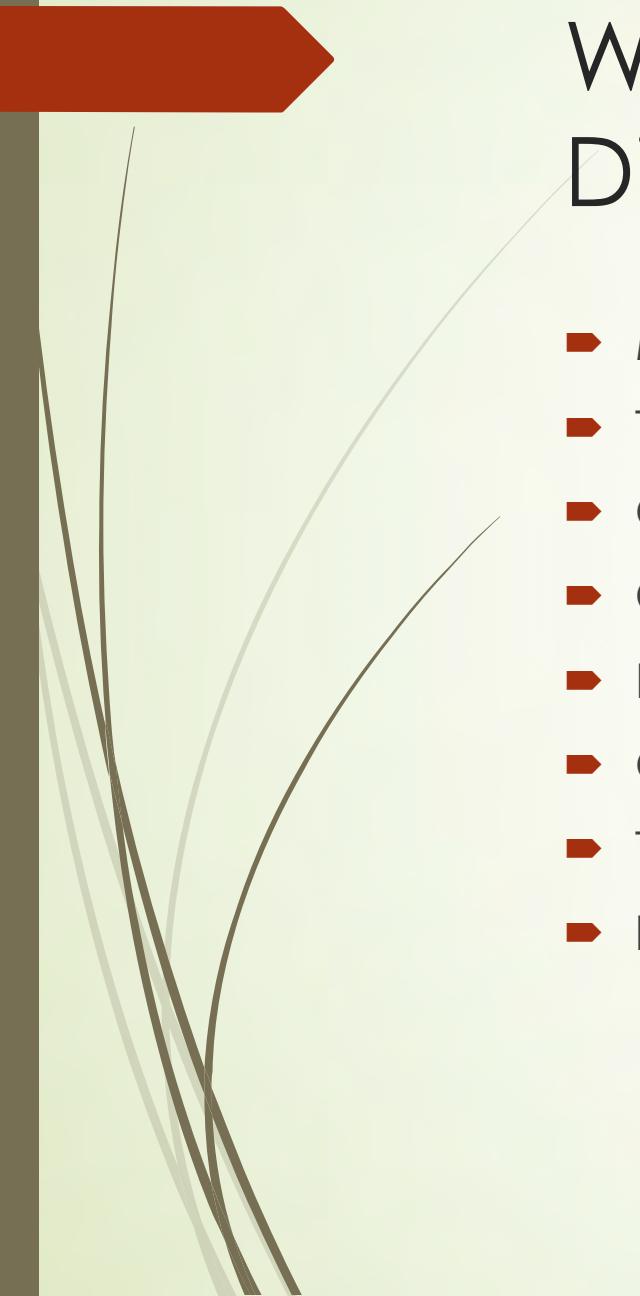
How to Combat a Student's Negative Thinking Patterns:

- ▶ Examples:
 - ▶ All or nothing thinking – I didn't get straight A's, I blew it, I'm a failure
 - ▶ Focusing on the negative – I did well in the class but the professor was an easy greater
 - ▶ Jumping to conclusions – If I don't get an A in my organic chemistry class I will never get into medical school
- ▶ Strategies
 - ▶ What would you say to a friend in a similar situation?
 - ▶ What is the worst thing that could happen? What is so awful about that?
 - ▶ What can you control in the situation?
 - ▶ How is this thinking style helpful or not helpful to you?



How to Help a Verbally or Physically Angry Student

- ▶ Acknowledge their anger and frustration - (I hear how angry you are)
- ▶ Rephrase and identify their emotion – (I can see how upset you are about the professor not allowing you to make up the exam)
- ▶ Allow student to vent and tell you what is upsetting them
- ▶ Do not accept verbally abusive behavior - (When you yell at me, I find it hard to listen)
- ▶ Explain clear what behaviors are acceptable –(You have the right to be angry, but it is not ok to slam the door)
- ▶ Help person problem-solve and deal with issue when calmer
- ▶ Don't get into an argument or shouting match with student
- ▶ Physically aggressive student – stay in an open area, get help if needed, walk away



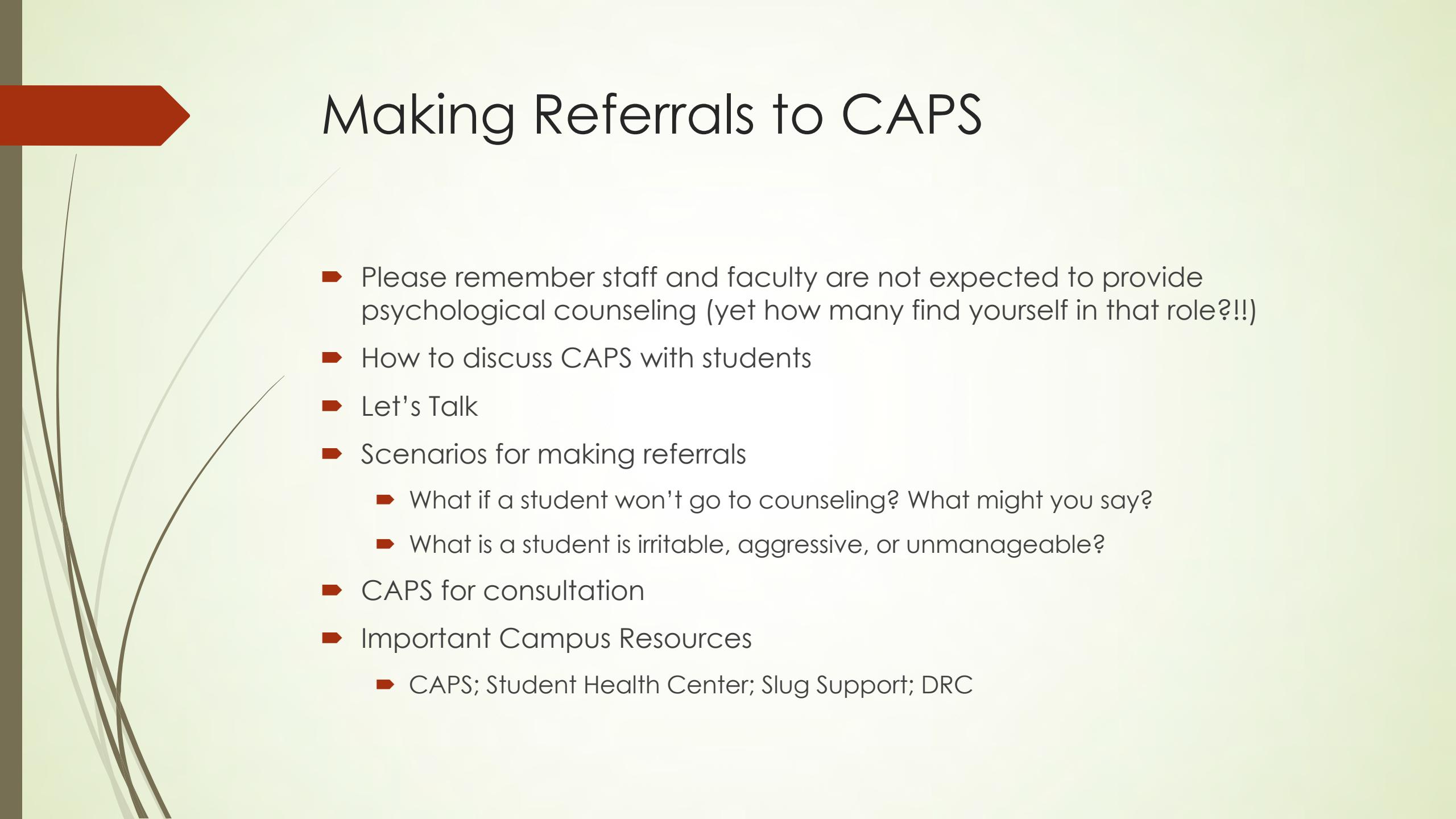
What is Not Helpful When Assisting Distressed Students

- ▶ Minimizing their feelings or situation (don't worry, it will get better tomorrow)
- ▶ Taking responsibility for their emotional state
- ▶ Overwhelming the student with ideas to "fix" their condition
- ▶ Chastising the student for poor or incomplete work
- ▶ Being afraid to ask student if they are suicidal, if you suspect they might be
- ▶ Overreacting
- ▶ Touching the person
- ▶ Ignoring your limitations



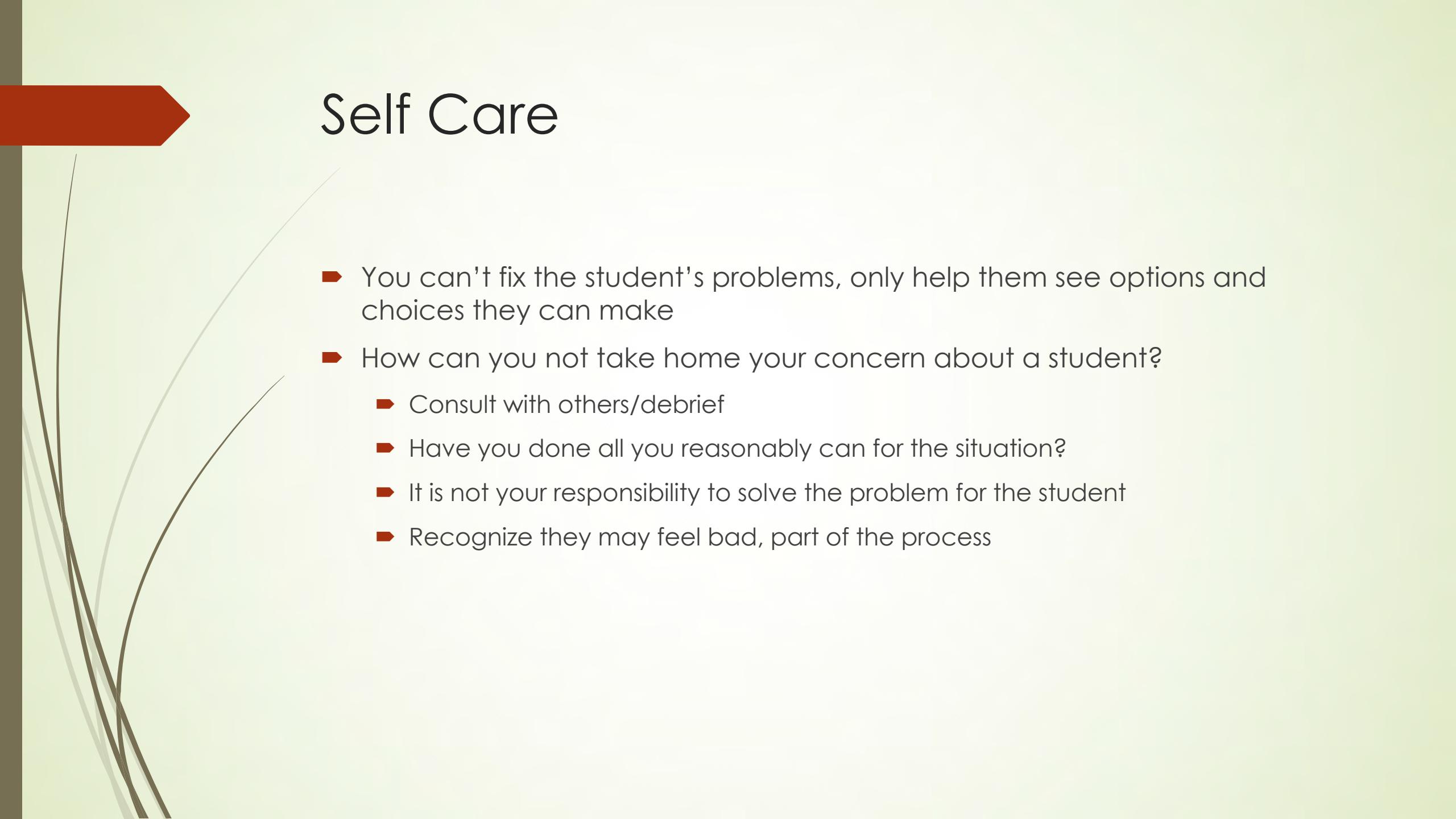
Know Your Limitations

- ▶ Are you:
 - ▶ Feeling responsible for the student?
 - ▶ Feeling pressure to solve and/or fix the student's problems?
 - ▶ Anxious or stressed out about the student?
- ▶ Do you know the student personally and may not be objective enough to help?
- ▶ These feelings may suggest a need to seek consultation or make a referral



Making Referrals to CAPS

- ▶ Please remember staff and faculty are not expected to provide psychological counseling (yet how many find yourself in that role?!!)
- ▶ How to discuss CAPS with students
- ▶ Let's Talk
- ▶ Scenarios for making referrals
 - ▶ What if a student won't go to counseling? What might you say?
 - ▶ What if a student is irritable, aggressive, or unmanageable?
- ▶ CAPS for consultation
- ▶ Important Campus Resources
 - ▶ CAPS; Student Health Center; Slug Support; DRC



Self Care

- ▶ You can't fix the student's problems, only help them see options and choices they can make
- ▶ How can you not take home your concern about a student?
 - ▶ Consult with others/debrief
 - ▶ Have you done all you reasonably can for the situation?
 - ▶ It is not your responsibility to solve the problem for the student
 - ▶ Recognize they may feel bad, part of the process



Self Care

- ▶ Compassion fatigue : characterized by deep emotional and physical exhaustion and a shift in helper's sense of hope and optimism about the future and the value of their work
 - ▶ Normal consequence of working in the helping field
- ▶ Compassion satisfaction: pleasure you derive from being able to do your work well.
- ▶ Recognize the signs for yourself
- ▶ Use your self care strategies daily
- ▶ Remember: you play an important role in a student's life – but you also need to take care of yourself