

Student Affairs and Enrollment Management

FACULTY GUIDE TO ASSISTING THE EMOTIONALLY TROUBLED STUDENT

Introduction

As a member of the faculty/staff here at Central Washington University, you are constantly interacting with students. At times you may encounter a student undergoing an overwhelming amount of stress. Numerous students are experiencing serious and painful crises in their lives that can interfere with their education and negatively influence their behavior.

The most recent information that we have gathered on the CWU campus indicates that around mid-terms and finals there is increased likelihood that you will encounter emotionally troubled or highly stressed students in the classroom or across your desk. It is important to remember that most of these students are not really different from other students and staff. Most are experiencing situational frustrations, pressures, conflicts, and in their own way are asking for help.

This article is designed to give you some useful techniques in dealing with distressed or difficult students. Included in this guide are brief descriptions and comments on possible interventions and referral resources.

General Crisis Intervention Guidelines

A crisis situation occurs when the student feels unable to cope with what is occurring in his/her life. The more helpless the individual feels, the greater the crisis. As a result of the crisis situation, the student may feel depression, anxiety, hostility or shame.

If you encounter a student experiencing a crisis, there are a number of helpful actions that you can take. Remember that throughout, it will be important for you to know how far you are willing to work with the student and convey when that limit has been reached. It is important to help the student discuss the situation and his/her feelings. Let the student know that you hear the concern. You have probably been approached because he/she trusts you. Finally, assist the student in exploring the situation or problem and deciding what course of action needs to be taken. Knowing appropriate referral sources can be most handy. Some are discussed within this article.

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 and reassurance will be particularly valuable to a student in crisis.

The Depressed Student

We have all experienced some of the symptoms of depression. However, when depression lasts for more than a couple of weeks this may be a sign of clinical depression which is a serious health problem that affects the total person.

The depressed student may feel guilty or angry at him/herself, have trouble concentrating or remembering, lose interest in schoolwork or usual activities, or feel worthless or inadequate. Physical symptoms include changes in appetite (usually a decreased interest in eating), difficulty sleeping (usually trouble falling asleep or intermittent waking during the night), and low energy level (everything is an effort). The more depressed student will convey a greater sense of helplessness and hopelessness, may have a hard time thinking clearly or recognizing their own symptoms, or difficulties asking for help. For many people a

combination of psychological therapy and medication is beneficial.

Suicide is a topic a seriously depressed student may have considered. It is important to view all suicidal comments as serious and appropriate referrals should be made. A few facts about suicides:

- College students have higher suicide rates than non-college people of the same age.
- More men commit suicide, more women attempt.
- There are more attempts at the beginning and end of quarters/semesters.
- People committing suicide rarely want to die; they really want to end the pain they experience.
- Talking about suicide will not plant the idea in a person's mind, but will probably relieve some of the tension they experience.
- Suicides rarely occur without warning.
- Feeling isolated (no support group) increases the likelihood for suicide.
- The more developed the suicide plan, the greater the likelihood.

Additional resource: [ULifeLine](#)

If you encounter a depressed student, the following actions may be helpful.

- Reach out more than halfway and encourage the student to express his/her feelings.
- Tell the student of your concerns.
- Talk about suicide if that's on the student's mind.
- Refer if suicidal (CWU Health & Counseling Center , 11th & Poplar, 963-1391).
- Daily contact, even for a few minutes, begins to relieve feelings of isolation.

The following actions may not be helpful to the student.

- Saying Don't worry, Crying won't help, or Everything will be better tomorrow may only make the student feel worse.
- Becoming overwhelmed by the student's problems may only provide them evidence that they should feel helpless.
- Trying to take responsibility for them and solve their problems will again provide evidence that they are helpless.
- Trying to ignore their feelings.

The Student in Poor Contact with Reality

This student may have trouble distinguishing fantasy from reality. To some extent, this person will appear confused or illogical.

Many times, as you talk to this student, you may notice that his/her speech jumps from one topic to another with little or no logical relationship between the topics. This student may also pay a great deal of attention to some unimportant detail that is being discussed or may be generally scattered and incoherent. The student may coin new words and expect others to understand their meaning or may put words together because they rhyme, not because they make grammatical sense.

The student may make inappropriate emotional responses. For example, he may overreact

to his feelings, or display no facial expression at all. Many times the person knows that his emotions are inappropriate, but just feels overwhelmed and cannot control them.

Students in poor contact with reality may experience themselves as especially powerful or important or may believe that people are attempting to harm or control them in some way. They may also feel that certain actions have special meaning for them (e.g., when people in a small group begin to laugh they are laughing at him).

This student may hear, see, smell, or even feel things that do not exist. When interacting with someone who is having trouble staying in touch with reality, the following may be helpful:

- Respond to them with warmth and kindness, but firmness.
- Reduce stimulation (turn off radio, close window if noisy, etc.) and try to maintain a quiet, calm atmosphere.
- 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 they are trying to hurt you, and I know how real it seems to you, but I don't hear the voices, see the devil, etc.)
- Reveal your difficulty in understanding them, (e.g., I'm sorry, but I don't understand. Could you repeat that or say it in a different way?)
- Focus on the "here and now".
- Refer to the Counseling Center (963-1391) for evaluation. This may involve walking the student to the Center yourself.
- Remember you can call for consultation.

The following will be less helpful to the student with poor reality contact:

- Arguing or trying to convince them of the irrationality of their thinking. This just makes them defend their position (false perceptions) more.
- Playing along (e.g., Oh yeah, I hear the voices or see the devil).
- Encouraging further revelations of craziness. It would be more helpful to switch topics and divert focus from delusions to reality.
- Demanding, commanding or ordering them to do something or change themselves.
- Expecting customary emotional responses.

The Aggressive Student

Aggression can take many forms from very subtle passive acts, to violent outbursts. Aggression is the result of being frustrated and feeling out of control. Some aggressive people express hostility immediately without regard for their circumstances or the people around them. Other aggressive students express their hostility through explosive outbursts and the rest of the time deny their anger and frustration. Many times students who are verbally or physically aggressive feel inadequate and use the hostile behavior as a way to build up their self-esteem. Often they feel that you will reject them so they become hostile and reject you first to protect themselves from being hurt. They may see you as attempting to control them and lash out to try and gain a sense of control.

It is important to remember that the student is generally not angry with you personally, but is angry at her world and you are the object of the pent-up frustrations. This behavior is often associated with the use of alcohol and/or other substances. [Alcohol & Drug Counseling, Assessment, and Referral Services](#)

The following may be helpful guidelines in dealing with the aggressive student:

- LISTEN: Use a relaxed tone. Ask yourself, What do I expect from this student and what is acceptable? Make her aware that cooperation is to her advantage. Attempt to communicate that you understand her concerns but that you do have guidelines/limits.
- Allow them to ventilate and tell you what is upsetting them, i.e. Maybe there is nothing I can do, but I would be glad to listen.
- Tell them that you are not willing to accept their abusive behavior, (e.g., When you yell and scream at me I cannot listen). If you need to, explicitly state what behaviors are acceptable.
- STICK TO THE LIMITS YOU SET.
- If they are getting close, tell them they are violating your personal space and to please move back.
- If available, find a quiet (and safe) place to instill a sense of being listened to without interruption.
- Rephrase what they are saying and identify their emotion.
- If necessary get help (your supervisor, Public Safety or the Counseling Center).

The following will not be helpful in dealing with a hostile student.

- Getting into an argument.
- Pressing for explanations for their behavior.
- Looking away and not dealing with the situation.
- Manhandling through touching the student.
- Making threats, dares or taunts.

Overall, dealing with an aggressive student will be facilitated if you set up your environment to be as safe as possible, (e.g., a physical barrier, etc.), and maintain firm, consistent control in the situation (i.e., know what you are doing and what your goals are).

The Anxious Student

We have all experienced anxiety in response to a perceived stressful situation. Anxiety becomes heightened as the situation becomes more vague and less familiar.

A panic attack is an overwhelming sense of dread and fear. Some of the physiological components of general anxiety and a panic attack are: rapid heart palpitations, chest pain or discomfort, choking, dizziness, sweating, trembling or shaking, or cold clammy hands. The student may experience feelings of worry, fear, and anticipate some misfortune. He/she may complain of difficulty concentrating, being always on edge, or easily distracted, having memory distortions, or trouble sleeping. The student may also state unreasonably high self-expectations, and be very critical of his/her present performance. This student may constantly think about and discuss his/her problems and possible solutions, but be too fearful to take action.

The following may be helpful in dealing with an anxious student:

- Let them discuss their feelings and thoughts. This alone may relieve a great deal of pressure.

- Help them define their stressors, (which may be difficult to do) and their ineffective and effective coping strategies.
- Be clear and explicit about what you are willing to do. It may be helpful to have the student repeat what you have said to insure that he/she understands.
- Talk slowly and remain calm.
- Refer them to the Counseling Center (963-1391) for further assistance or anxiety management skills training.

The following will not be helpful in dealing with an anxious student:

- Taking responsibility for their emotional state.
- Trying to solve their problem as if it were your own.
- Becoming anxious or overwhelmed.

Sexual Harassment

Sexual harassment is 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 that counts. As long as the conduct creates an intimidating, hostile or offensive learning or work environment, it is considered sexual harassment.

Sexual harassment usually is not an isolated one-time-only case, but a repeated pattern of behavior. It can 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
- sexually suggestive pictures or objects displayed
- repeated non-reciprocated demands for dates or sex

A common reaction by a student who has been harassed is to doubt perceptions. Was he/she serious or joking? Did it really happen? More critical, a student will query: What did I do to make this happen? The student may begin to participate less in the classroom, drop or avoid classes, or even change majors.

What would be helpful:

- It will be most important for you as a faculty member or staff person to separate your personal biases from your professional role.
- Listen and help clarify what happened. Help the student validate her/his perceptions. Encourage the student not to take on self blame.
- Sometimes people are not aware of how their remarks or behaviors affect others. Encourage the student to approach the person. The student may feel more comfortable doing this by letter. However, in some cases these suggestions may be too threatening.
- Encourage keeping a log or finding witnesses.

- Help the student seek informal advice through a department chair, supervisor or ombudsperson. If unresolved, approach a dean or vice president on campus.
- Informal and formal complaints can begin in the Office for Equal Opportunity (Barge Hall, 211).

What would not be helpful:

- Doing nothing. No action can have negative implications for the student, and the university could be held liable as knowing or should have known.

Sexual Assault

Sexual assault is the most common and most under-reported violent crime on college campuses today. The victims experience difficulty concentrating, sleeping and eating; they often feel guilt and shame. Many times they not only don't report the crime, they don't even tell their friends. However, as a trusted faculty advisor, you may be the first person to whom someone turns for help and information. The following is provided to assist you in that role.

If you are contacted by a victim of sexual assault at Central Washington University , we recommend the following:

- Contact Gail Farmer at 963-3214 **Sexual Assault Response Coordinator**, or call the Student Health and Counseling Center at 963-1391 to speak with a counselor. If the victim wishes to speak only to you, proceed with the following steps.
- Ascertain whether or not the victim needs immediate medical assistance. Ask the victim directly if she/he is all right physically. Explore this issue beyond initial questioning and observation if necessary. Remember that sexual assault may cause internal injuries, sexually transmitted diseases and unwanted pregnancy. Even if no further help is wanted, the person would feel easier knowing that he/she is healthy.
- The student should be informed that the Sexual Assault Responce Coordinator, Gail Farmer (962-3214) can provide assistance for the student.
- If the victim wishes not to press charges, a third party report can be made to campus police for information only.
- Find out what the victim's most critical concern is and respond in a non-judgmental, informed way.

Brief Comments On: Whiny/Manipulative Student

Typically, the utmost time and energy given to this student is simply not enough. He/she often seeks to control your time and unconsciously believes that the amount of time received is a reflection of personal worth. In many instances, these people feel incompetent to handle their own life. Usually they are immature and self-centered.

When dealing with this type of student, it is important to set clear and precise limits with them and stick to the limits no matter how much the student protests. Also, it is important to let the student, to the extent possible, make his/her own decisions. Don't take responsibility for them. If you do, they may attempt to trap you into solving more and more of their life problems. It is important not to let them use you as their only source of support. Refer them to other students in class, their friends or some particular group on campus.

Suspicious Student

Usually these students complain about something other than their psychological difficulties. They are tense, cautious, mistrustful, and have few friends. These students tend to interpret minor oversight 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. Usually they are overly concerned with fairness and being treated equally. They project blame onto others and will express anger in round-about ways. Many times they feel worthless and inadequate.

In dealing with this student, it is important to send clear, consistent messages regarding what you are willing to do and what you expect. Express compassion without intimate friendship. Remember, suspicious students have trouble with closeness and warmth. It would not be helpful to be overly warm or nurturing or to assure the student you are his/her friend. Let him/her know that you can still be concerned, without being intimate.

The Student Under the Influence

Alcohol is the most widely used substance on campus. 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. Student alcohol abuse is most often identified by faculty when irresponsible, unpredictable behavior affects the learning situation (i.e., drunk and disorderly in class). More subtle effects are unexplained drop in grades, irregular school attendance, desire to be secretive or isolative, decreased interest in school, social activities, sports and hobbies and mood changes such as irritability and hostility.

In faculty or staff interventions with this type of student, 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.

Denial and impaired judgment are central characteristics of alcohol/drug abuse. Where confronting the abuse will elicit denial, confronting unsatisfactory performance (Kate, you are failing this class and I don't understand why?) can lead to a positive student response. It is then appropriate to refer to the possibility of alcohol and other drug problems, and suggest that the student talk with someone about these issues (see list of referral resources). The treatment of alcohol and other drug abuse is best provided through long term, intensive community resources. Support and concern is very appropriate when related to the student's willingness to address the problem. Maintaining contact with the student after referral can also be helpful.

You may also refer students to Gail Farmer at Wildcat Wellness Center (963-3214) for a substance abuse evaluation, information and support [Wildcat Wellness Center](#).

Legal Rights of Students with Emotional Disabilities

Students with emotional disabilities are protected under the Americans with Disabilities Act (ADA) of 1991. This law states that *Public entities must ensure that discrimination on the basis of disability does not exist in all programs, activities or services they provide or make available*. Equal access for the emotionally disabled student may require one or more of a variety of accommodations. Distraction-free testing and/or extended testing time allowances, are considered reasonable accommodations that often make a world of difference for the emotionally disabled student.

Referral to Counseling & Psychological Services

When you discuss a referral to counseling or other psychological services, it would be helpful for the student to hear in a clear, concise manner your concerns and why you think counseling would be helpful. You might also tell them a few facts about counseling and psychological services. For instance, all services at the Counseling Center are free to regularly enrolled students; there is a counselor available to see students Monday, Wednesday, and Friday from 8:00 a.m. to 5:00 p.m. and Tuesday and Thursday from 8:00 a.m. to 7:00 p.m. . All discussions are held confidential except when the student presents a danger to him/herself or others. [Counseling Center confidentiality statement](#).

Having the student call for an appointment increases his/her responsibility and commitment to come in for counseling. There may be some times, however, when it is more advantageous for you to call or walk the student over to make an appointment for him/her (e.g., the student is in crisis).

Staff is available daily for consultation. If you have any questions regarding referral or counseling services, please feel free to give us a call at 963-1391. [The Counseling Process](#)

Referral Resources

There may come a time when you wish to refer a student to a service on or off campus. The following are guidelines that may facilitate the referral process.

Refer a student when:

- The problem or request for information is beyond your competency level. Knowing your limits of competency is important and commendable rather than something negative.
- You feel that for some reason you cannot work with the student or feel like you are being used.

Additional Resources in your Location:

On Campus

- Counseling Center 963-1391.
- The Health Center at 963-1881.
- Wildcat Wellness Center 963-3213. Gail Farmer at 963-3214.
- Campus Police Department, 963-2958 [Emergency 911].
- Vice President for Student Affairs and Enrollment Management--963-1515 .

Off Campus

- Alcohol Drug Dependency Services (ADDS), 507 Nanum, Room 111, 925-9821.
- Cascade Recovery at 933-3838.
- ASPEN : Abuse Support and Prevention Education Now 925-9384. (Support and advocacy for victims of domestic violence / sexual assault)
- Alcoholics Anonymous, 888-441-6220.
- Crisis Line - 24 hour hotline --925-4168.
- Ellensburg Police Department, 100 N. Pearl , Business--962-7280.
- Kittcom/Dispatch -- 925-8534(emergency).

Resources for CWU Satellite Centers

Pierce County Center

- Pierce County Crisis Line, 24-hour Hot Line (253)-798-4333, or 800-576-7764
- Sexual Assault Crisis Line 474-7273 or 1-800-756-7273

Lynnwood Center

- Snohomish County Crisis Line, 24-hour Hot Line (206) 258-4357

Sea-Tac Center

- 24-hour Crisis Line --(206) 461-3222

Moses Lake Center 509-765-1717 Wenatchee Center 509-662-7105 Yakima Center 509-575-4200

Washington State

- Suicide Prevention --1-800-564-2120

*We would like to extend special thanks to California State University Humboldt, whose Resource Book served as our model.