Counseling and Psychological Services provides a variety of services to students that includes crisis intervention, personal counseling and psychotherapy, group counseling, marital and couples counseling, psychoeducational workshops and resource and referral assistance to off campus agencies.

We provide consultation and training workshops to faculty and staff on how to deal with an acting out or disruptive student as well as other emotional and psychological issues affecting students. If you are unsure of how to handle a specific student, talk with one of the clinical counselors at C&PS. Suggestions will be made for approaches you can take with a student. When needed, the counselor can assist with the referral process.

Who are the services for? The services of the Counseling and Psychological Services Center are open to regularly enrolled (matriculated) undergraduate and graduate students.

Are services confidential? YES they are. In keeping with accepted professional practice, counseling is confidential. No information is released to the administration, to faculty members, to parents or to outside agencies (such as graduate schools, employers, etc.) without the student’s explicit written authorization in advance.

What is the cost? Psychological counseling is provided as a benefit under the student health fee for all currently enrolled matriculated students.

Where are we? Counseling and Psychological Services Center is located in the Student Services Building, Room 208.

How to contact us - Please call C&PS at 415-338-2208 for consultation. Our office hours are 8am to Noon and 1pm to 7pm Monday through Thursday, and 8am to Noon and 1pm to 5pm on Friday.

How to make a referral – If you feel that professional counseling might be beneficial, refer the student to the C&PS. Be direct in letting the student know that you believe a clinical counselor would be of help in this situation. Inform the student that the service is both confidential and free of charge. A mutual decision is best. Don’t force the issue if the student takes a defensive posture – simply restate your concerns and recommendations. If the student is receptive, you can suggest that he/she call for an appointment at 415-338-2208. You may even offer to contact a clinical counselor and provide background information. If the situation seems urgent, you can call the Counseling and Psychological Services receptionist and request to speak with the clinical counselor on call.
RESPONDING TO A MENTAL HEALTH EMERGENCY

Emergency situations don’t happen that often. But when they do occur, it is helpful to know how to respond immediately and effectively to a student in distress. A mental health emergency can include one or more of the following situations or observed behaviors.

• A suicidal attempt, gesture, threat or plan
• A homicidal attempt, gesture, threat or plan
• Aggressive or unmanageable behavior that poses a threat to self or others
• Loss of contact with reality
• Inability to care for oneself

Tips to utilize when confronted with an emergency situation

• Stay calm, to respond more effectively and to reduce the student’s anxiety or agitation
• If possible, provide a quiet, private place for the student to rest while further steps are taken
• Talk to the student in a clear, straight-forward manner
• If the student appears to be a danger to self or others, do not leave student alone
• Make arrangements for appropriate intervention or aid

Who to call when confronted with an emergency situation

You may consult with Counseling & Psychological Services counselor faculty at (415) 338-2208 during the following hours concerning the emergency situation: 8am-12 Noon and 1pm-5pm Monday through Friday.

You can walk the student to Counseling and Psychological Services for an emergency consultation or appointment during the hours of 8am-12 Noon and 1pm-5pm Monday through Friday.

If the mental health emergency occurs after Counseling & Psychological Services Center is closed, call UPD at 911.

In the event of a mental health emergency that requires immediate attention because the student is unusually aggressive, unmanageable or a threat to self or others, call 911 which will connect you directly to UPD (university police).
DID YOU KNOW

• Nearly half of all college students report feeling so depressed at some point in time that they have trouble functioning (APA, 3/5/08)
• Suicide is the third leading cause of death for those aged 15-24 and the second leading cause of death of college students. (APA, 3/5/08)
• Almost 40% of the men and 50% of the women reported feeling so depressed that they had difficulty functioning one or more times during the last school year. (American College Health Association survey, 2004)
• 10% of the students reported seriously considering attempting suicide at least one time during the last school year. (American College Health Association survey, 2004)

UNDERSTANDING YOUR ROLE

Many students, realizing that stress is interfering with their personal and academic goals, seek counseling on their own. However, faculty, teaching assistants and university staff are often the first to recognize that a student might not be functioning well academically and/or emotionally. The student may be acting out or is disruptive in class.

As faculty and staff, you are in an excellent position to spot the emotionally troubled student. This may be as a result of your setting, i.e., department secretary, receptionist, faculty; you may observe that at certain times of the year, particularly during examinations and holidays, students experience increase anxiety. The student’s behavior, especially if inconsistent with your experience with him/her could well constitute an inarticulate attempt to draw attention to his/her plight, “a cry for help”. It is important to note that both situational and developmental problems can interfere with a student’s academic performance.

LIFE SITUATIONS/TRANSITIONS THAT CAN AFFECT STUDENTS

• Financial worries
• Leaving home
• Being on their own for the first time
• Wanting to do well academically
• Difficulties setting priorities and managing time
• Foreign born students may struggle with language
• Different culture from ones own
• Death of a loved one
• Changes in close relationships (breaking up)
• Changes in family relationships
• Friendship and/or roommate problems
• Serious illness, self or others

SIGNS OF STUDENT EMOTIONAL DISTRESS YOU MIGHT OBSERVE

• Nervousness
• Agitation
• Increased irritability, undue aggressive or abusive behavior
• Excessive procrastination, poorly prepared work
• Infrequent class attendance; little or no work completed
• Depression, lack of energy
• Marked change in personal hygiene
• Withdrawal, fearfulness
• Dependency (e.g., the student who hangs around you or makes excessive appointments to see you)
• Indecisiveness, confusion
• Bizarre, alarming or dangerous behaviors

HOW TO ENHANCE COMMUNICATION WITH STUDENTS

Faculty and staff desire to assist students, but students may have difficulties communicating their needs. Students sometimes lack self-confidence in approaching a professor, or may feel inadequate in expressing their concerns. The purpose of this section is to highlight a few communication skills that may be helpful in your interactions with students.

A. The physical setting in which the interaction occurs can enhance or interfere with communication. Actively moving away from distractions can convey to the student your interest in him/her. Likewise, getting objects such as chairs or tables out from between you reduces barriers to communication.

B. Short beginning phrases lead the student to discussion, e.g., “I have time to talk now if you would like.” “I’m interested in hearing more about that.”

C. Open-ended questions require at least a sentence in response. “What is on your mind?” “How do you usually handle this kind of problem?” “What makes this seem difficult?”

D. Short phrases help to keep discussion going, e.g., “I see.” “I understand.” “Tell me more.”

E. Paraphrasing, rephrasing the content in your own words, conveys to the student that you are listening to get the message right and encouraging further elaboration. You can paraphrase by using lead-ins such as, “Let me understand…” “Basically what happened was…”
F. **Clarifying** often goes along with paraphrasing to help you get more of the picture and to focus on a vague presentation. Asking questions beginning with “Are you saying that…” or “Do you mean that…” followed by a rephrasing of the message helps to check the accuracy of what you heard the student say.

G. **Feeling description**, rephrasing the affective part of the message, responds to the student’s feelings to convey understanding, e.g., “You (seem, are, feel) angry, hurt, afraid, etc.” Using descriptive phrases can be helpful:
   - “You felt like the wind was knocked out of you.”
   - “You felt like running out of the room.”

H. **Offering feedback** by sharing your reactions and feelings non-judgmentally helps the student clarify the situation. Feedback is best given as soon as you fully understand the communication, after paraphrasing and clarifying. It is helpful to state your real reaction in a supportive way, e.g., “There are still some things to work on, but I think you are making progress.”

**WHAT TO DO: INITIAL CONTACT WITH STUDENT**

Openly acknowledging to the student that you are aware of her/his 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 to the student when you sense that he/she is in an academic and/or personal distress.

- Request to see the student in private.
- Briefly acknowledge your observations and perceptions of their situation and express your concerns directly and honestly.
- Listen carefully to what the student is troubled about and see the issue(s) from his/her point of view without necessarily agreeing or disagreeing.
- Strange and inappropriate behavior should not be ignored. The student can be informed that such behavior is distracting and inappropriate.
- Your receptivity to an alienated student will allow him/her to respond more effectively to your concerns.
- **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 can be a gratifying experience when kept within realistic limits.

**DISTRESSED STUDENTS YOU MAY ENCOUNTER**
A. THE VERBALLY AGGRESSIVE STUDENT

Students usually become verbally abusive when in frustrating situations which they see as being beyond their control; anger and frustration become displaced from those situations to you. Typically, the anger is not directed at you personally.

**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 feel your rights are being violated and nobody will listen.”
- Allow them to ventilate, get the feelings out, and tell you what is upsetting them.
- Reduce stimulation; invite the person to your office or other quiet place if this is comfortable.
- Tell them that you are not willing to accept their verbally abusive behavior, e.g., “when you yell and scream at me that way, I find it hard (impossible) to listen.”
- Tell them they are violating your personal space and to please move back (if they are getting to physically too close), e.g., “Please stand back; you’re too close.”
- Help the person problem-solve and deal with the real issue when he/she becomes calmer.

**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 explanation or reasons for their behavior. “Now I’d like you to tell me exactly why you are so obnoxious.”
- Look away and not deal with the situation.
- Give away your own rights as a person.

B. THE VIOLENT OR PHYSICALLY DESTRUCTIVE STUDENT

Violence, because of emotional distress is very rare and typically occurs only when the student is completely frustrated and feels unable to do anything about it. The adage, “An ounce of prevention is worth a pound of cure,” best applies here.

**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 really mean business and have some critical concerns on your mind.”

• Explain clearly and directly what behaviors are acceptable, e.g., “You certainly have the right to be angry but hitting (breaking things) is not O.K.”

• Stay in open areas.

• Divert attention when all else fails, e.g., “If you hit me, I can’t be of help.”

• Get necessary help (other staff, University Police, Counseling Center, Student Health Services).

• Remember that student discipline is implemented by the Dean of Students Office.

• You may occasionally have students in the classroom or in your office whose destructive behavior is neither violent nor immediately threatening, but does interfere with on-going activities. The Discipline Officer in the Dean of Students Office can assist you to find a way to deal with this kind of problem. Disruptive behavior need not be tolerated.

DON’T:
• Ignore the warning signs that the person is about to explode, e.g., yelling, screaming, clenched fists, statements like, “You’re leaving me no choice.”

• Threaten, dare, taunt, or push into a corner.

• Touch.

C. THE STUDENT IN POOR CONTACT WITH REALITY

These students have difficulty distinguishing from reality; the dream from the waking state. Their thinking is typically illogical, confused, disturbed; they may coin new words, see or hear things which no one else can, have irrational beliefs, and exhibit bizarre or inappropriate behavior. Generally, these students are not dangerous and are very scared, frightened and overwhelmed.

DO:
• Respond with warmth and kindness, but with firm reasoning.

• Remove extra stimulation of the environment and see them in a quiet atmosphere (if you are comfortable in doing so).
• Acknowledge your concerns and state that you can see they need help, e.g., “It seems very hard for you to integrate all these things that are happening and I am concerned about you; I’d like to help.”

• Acknowledge the feelings or fears without supporting the misconceptions, 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 (when appropriate), 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.” Switch topics and divert the focus from the irrational to the rational and real.

• Speak to their healthy side, which they have. It’s O.K. to joke, laugh or smile when appropriate.

DON’T:
• Argue or try to convince them of the irrationality of their thinking, for it makes them defend their position (false perceptions) more.

• Play along, e.g., “Oh yeah, I hear the voices (see the devil).”

• Encourage further revelations of craziness.

• Demand, command or order.

• Expect customary emotional responses.

D. 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 occurrences. They see themselves as the focal point of everybody’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 underline most of their behavior.

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 his/her friend; agree you’re a stranger, but even strangers can be concerned.

• Be overly warm and nurturing.

• Flatter or participate in their games; you don’t know the rules.

• Be cute or humorous.

• Challenge or agree with any mistaken or illogical beliefs.

• Be ambiguous.

E. THE ANXIOUS STUDENT

Danger is everywhere even though what makes students anxious is often unknown; not knowing what is expected and conflict are primary causes of anxiety. Unknown and unfamiliar situations raise their anxiety; high and unreasonable self-expectations increase anxiety also. These students often have trouble making decisions.

DO:
• Let them discuss their feelings and thoughts. Often this alone relieves a great deal of pressure.

• Reassure when appropriate.

• Remain calm.

• Be clear and explicit.

DON’T:
• Make things more complicated.

• Take responsibility for their emotional state.

• Overwhelm with information or ideas.

F. THE DEMANDING STUDENT
Typically, 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.

**DO:**
- Let them, as much as possible, make their own decisions.
- Ignore them if possible, e.g., “Excuse me, I need to attend to other things.”

**DON’T:**
- Let them use you as their only source of support.
- Get trapped into giving advice, “Why don’t you, etc.?”

**G. THE SUBSTANCE ABUSING STUDENT**

Given the stress of university life, students are especially susceptible to drug abuse. A variety of substances are available that provide escape from pressing demands. The only problem is that these drugs soon create their own set of problems in the form of addiction, accident proneness and poor health. The most abused substance – so commonplace we often forget that it is a drug – is alcohol. Alcohol and other drug related accidents remain the greatest single cause of preventative death among college students.

**DO:**
- Be on alert for signs of drug abuse:
  - preoccupation with drugs;
  - inability to participate in class activities;
  - deteriorating performance in class;
  - periods of memory loss (blackouts).
- Share your honest concern for the person.
- Encourage him/her to seek help.
- Get necessary help in instances of intoxication.

**DON’T:**
- Ignore the problem.
- Chastise or lecture.
- Encourage the behavior.

**H. THE DEPRESSED STUDENT**
Typically, these students get the most sympathy. They show a multitude of symptoms, e.g., guilt, low self-esteem, feelings of worthlessness and inadequacy, as well as physical symptoms such as decreased or increased appetite, difficulty staying asleep, early awakening and low interest in daily activities. They show low activity levels because everything is an effort and they have little energy.

DO:
• Let the student know you are aware he/she is feeling down and you would like to help.
• Reach out more than halfway and encourage the student to express how he/she is feeling, for he/she is often initially reluctant to talk, yet others’ attention helps the student feel more worthwhile.

DON’T:
• Say “Don’t worry”, “Crying won’t help”, or Everything will be better tomorrow”.
• Be afraid to ask whether the student is suicidal if you think he/she may be.

I. THE SUICIDAL STUDENT

Suicide is the second leading cause of death among college students. The suicidal person is intensely ambivalent about killing himself/herself and typically responds to help; suicidal states are definitely time limited and most who commit suicide are neither crazy nor psychotic. High risk indicators include: feelings of hopelessness and futility; a severe loss or threat of loss; a detailed suicide plan; history of a previous attempt; history of alcohol and drug abuse; and feelings of alienation and isolation. Suicidal students usually want to communicate their feelings; any opportunity to do so should be encouraged.

DO:
• Take the student seriously – 80 percent of suicides give warning of their intent.
• Acknowledge that a threat of or attempt at suicide is a plea for help.
• Be available to listen, to talk, to be concerned, but refer the student to the Counseling Center when you yourself are getting overwhelmed.
• Administer to yourself. Helping someone who is suicidal is hard, demanding and draining work.

DON’T:
• Minimize the situation or depth of feeling, e.g., “Oh, it will be much better tomorrow.”
• Be afraid to ask the person if they are so depressed or sad that they want to hurt themselves (e.g., “You seem so upset and discouraged that I’m worried if you are considering suicide.”)

• Over commit yourself and, therefore, not be able to deliver on what you promise.

• Ignore your limitations.

**SFSU CAMPUS RESOURCES**

1. Counseling & Psychological Services Center
   Student Services Building – Room 208
   338-2208

2. CEASE Program (Drug & Alcohol Abuse)
   Student Services Building – Room 205
   338-7339

3. The SAFE Place (Sexual Abuse Free Environment)
   Student Services Building – Room 205
   338-2819

4. Student Health Services
   338-1251

5. Dean of Students Office (Student Discipline Officer)
   338-2032

6. University Police Department
   
   *Emergency* 911
   *Non-Emergency* 338-7200

Prepared in conjunction with the Organization of Counseling Center Directors in Higher Education by Committee on Campus Mental Health, California State University, Northridge, Spring 1986. Revised by Sandra R. Harris, Ph.D., Clinical Psychologist, University Counseling Services, California State University, Northridge, Summer 1989.