

Guide to Assisting Students Who Are Struggling



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Introduction

As we navigate through the ever increasing complexity of our society, we see the changing needs of the students we serve. While most interactions are pleasant and productive, you may encounter some students whose behavior is indicative of concern for their welfare or interferes with their learning.

Counseling Services has developed this guide, which is meant to be an easily accessible tool, for you to take initial steps in helping those students who are struggling with commonly reported stressors. In addition to initial steps, there is information on how to refer a student for further assistance, if needed.

This guide ***is not intended to be all-inclusive, nor does it attempt to provide all possible answers for a given situation.*** The staff in Counseling Services is available to consult with you on any concern that might arise from your work with students.



Bradford

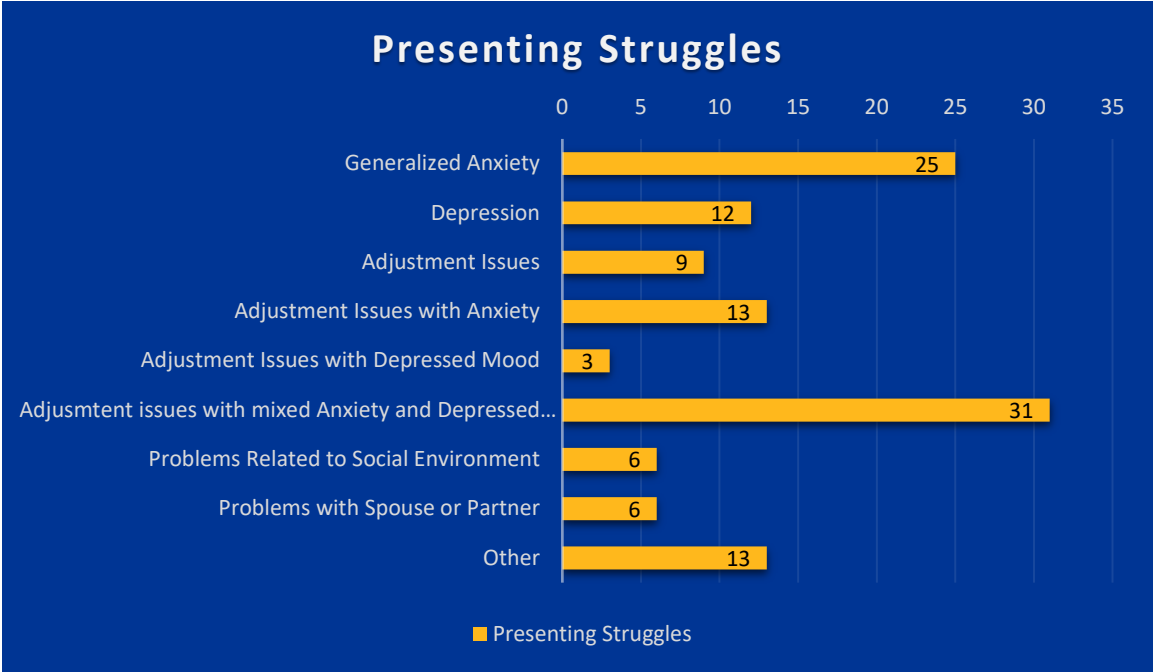
STUDENT COUNSELING SERVICES
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Commonly Reported Stressors

The below data is compiled from students who were seen in Counseling Services from August 1, 2021 to April 30, 2022



Anxiety

What is it?

Anxiety is an emotion highlighting feelings of tension, worried thoughts and physical changes like increased blood pressure.

Fast Stats:

- 80% of college students report that they feel stress on a daily basis
- 13% have been diagnosed with a mental health condition linked to anxiety
- 9% have contemplated suicide in the past year

Common Symptoms:

- Nervousness
- Fidgeting
- Sense of impending doom
- Intrusive thoughts
- Difficulty controlling worry
- May avoid things out of worry
- Physical symptoms (e.g., stomach ache, sweating, rapid heart rate, etc.)
- Trouble concentrating

Dos and Don'ts:

DO	DON'T
<ul style="list-style-type: none">• Allow the student to discuss their thoughts and feelings. Reassure and normalize the anxiety when appropriate.	<ul style="list-style-type: none">• Don't minimize the perceived issue to which the student is reacting.
<ul style="list-style-type: none">• Inquire about other opportunities and resources they may have to discuss feelings	<ul style="list-style-type: none">• Don't overwhelm them with ideas or "how to" information if they are already distressed
<ul style="list-style-type: none">• If the student is panicking, remain calm. Provide a safe environment until symptoms subside. Encourage sitting down and taking deep, slow breaths	<ul style="list-style-type: none">• Don't get frustrated. Those with anxiety know that their fears are often irrational and expecting them to use logic with irrational fears is extremely difficult.
<ul style="list-style-type: none">• If you deem it is not an emergent situation, consider submitting a Care Report through Student Care and Conduct so professional staff can follow up with the student.	<ul style="list-style-type: none">• Don't leave the student alone if you are concerned about their safety or unsure if they are having feelings of suicide or self-harm. (See page 11)

Depression

What is it?

Depression is a negative emotional state, ranging from unhappiness and discontent to an extreme feeling of sadness, pessimism, and despondency that interferes with daily life.

Fast Stats:

- 75% of students who suffer from depression do not seek help for their mental health
- 44% of American college students report having symptoms of depression
- Suicide is the 3rd leading cause of death among college students

Common Symptoms:

- Feelings of sadness or helplessness
- Fatigue, loss of motivation
- Sleeplessness
- Trouble concentrating
- Change in appetite/weight
- Loss

Dos and Don'ts:

DO	DON'T
<ul style="list-style-type: none">• Communicate. Allow student to discuss their thoughts and feelings without judgement. Think about the responses you'd want if you were in their shoes.	<ul style="list-style-type: none">• Don't ignore the expressions of depression or hide your concern for the student.
<ul style="list-style-type: none">• Be Direct. Ask student if they are feeling depressed or hopeless. If yes, encourage student to follow up with Counseling Services or offer to call with the student to set up an appointment.	<ul style="list-style-type: none">• Don't leave the student alone if you are concerned about their safety or unsure if they are having feelings of suicide or self-harm. (See page 11)
<ul style="list-style-type: none">• Attempt to find ways of working out the academic problem with the student while making any appropriate referrals for further assistance.	<ul style="list-style-type: none">• Don't threaten, admonish, or reproach a depressed student for not attending class or falling behind in course work.
<ul style="list-style-type: none">• If you deem it is not an emergent situation, consider submitting a Care Report through Student Care and Conduct so professional staff can follow up with the student.	<ul style="list-style-type: none">• Don't give up if the student refuses to follow up with services. Explore their objections and if resistance is still present, follow the UPB Acute Distress and Suicide Protocol (Page 12)

Adjustment Issues

What is it?

Adjustment issues are temporary, maladaptive psychological responses to stressful situations or major life changes.

Fast Stats:

- Approximately 3-10% of patients seen in the primary care office report adjustment issues.
- Adjustment issue symptoms typically start within 3 months of the stressful event
- Symptoms of adjustment issues typically do not last longer than 6 months.

Common Symptoms:

- Feelings of sadness or not enjoying things you used to
- Frequent crying
- Anxiety, jittery or stress
- Difficulty concentrating
- Feeling overwhelmed
- Withdrawing from social supports/isolating
- Avoiding important things

Dos and Don'ts:

DO	DON'T
<ul style="list-style-type: none">• Allow the student to discuss their thoughts and feelings. Reassure and normalize the feelings when appropriate.	<ul style="list-style-type: none">• Don't minimize the perceived issue to which the student is reacting.
<ul style="list-style-type: none">• Inquire about other opportunities and resources they may have to discuss feelings	<ul style="list-style-type: none">• Don't leave the student alone if you are concerned about their safety or unsure if they are having feelings of suicide or self-harm. (See page 11)
<ul style="list-style-type: none">• Encourage the student to follow up with support services. Provide information or where to get information about ways to get involved and make the adjustment easier.	<ul style="list-style-type: none">• Don't threaten, admonish, or reproach a student for not attending class or falling behind in course work during the grief period.
<ul style="list-style-type: none">• If you deem it is not an emergent situation, consider submitting a Care Report through Student Care and Conduct so professional staff can follow up with the student.	<ul style="list-style-type: none">• Don't give up if the student refuses to follow up with services. Explore their objections and if resistance is still present, follow the UPB Acute Distress and Suicide Protocol (Page 12)

Angery Students

What is it?

When feeling overwhelmed with stressors, upsetting events, frustrations, mental health emergencies, students may become angry. At times, faculty and staff may be in a position to intervene or de-escalate a situation.

Fast Stats:

- Anger is not inherently bad.
- Anger does not equal aggression. Anger is an emotion whereas aggression is a behavior. It's okay to be angry. What you do with your anger is what matters.

Common Symptoms:

- Clenched jaws or fists
- Tense muscles
- Face turning red
- Yelling, pacing, slamming doors
- Feeling insecure, jealous, rejected, abandoned or afraid
- Irrational thoughts about people's actions and intents

Dos and Don'ts:

DO	DON'T
<ul style="list-style-type: none">• Invite the student to a quiet space away from others, if it is safe to do so	<ul style="list-style-type: none">• Physically touch the student. Respect the student's autonomy and personal space.
<ul style="list-style-type: none">• Remain calm. Use a soft voice and low volume. Acknowledge and validate anger feeling.	<ul style="list-style-type: none">• Avoid making threatening or authoritarian statements that could escalate the situation.
<ul style="list-style-type: none">• Attempt to seek clarification of the problem and what the student believes a reasonable solution would be to the issue.	<ul style="list-style-type: none">• Don't handle the situation alone if you feel there is a risk of threat or violence. Call campus police immediately at 10333 or (814) 368-3211
<ul style="list-style-type: none">• If you deem it is not an emergent situation, consider submitting a Care Report through Student Care and Conduct so professional staff can follow up with the student.	<ul style="list-style-type: none">• Don't give up if the student refuses to follow up with services. Explore their objections and if resistance is still present, follow the UPB Acute Distress and Suicide Protocol (Page 12)

Grieving Students

What is it?

Grief is the anguish experienced after a significant loss, usually the death of a beloved person.

Fast Stats:

- An estimated ¼ of students experience the loss of a close relative or friend during their college years.
- Grief does not follow a standard timeline and everyone experiences grief differently.

Common Symptoms:

- Physical symptoms such as headaches, feeling tired, stomach aches
- Emotional symptoms such as sadness, anger, disbelief, shock, despair, guilt, etc.
- Mental fatigue
- Behavioral changes

Dos and Don'ts:

DO	DON'T
<ul style="list-style-type: none">• Be willing to listen, especially if the student is talking about a lost loved one.	<ul style="list-style-type: none">• Avoid clichés and platitudes like “they’re in a better place.”
<ul style="list-style-type: none">• Suggest counseling or talking with religious advisor as a means of obtaining support	<ul style="list-style-type: none">• Avoid minimizing the student’s feelings of loss surrounding the loved one.
<ul style="list-style-type: none">• If able and appropriate, be flexible with academics.	<ul style="list-style-type: none">• Don’t handle the situation alone if you feel there is a risk of threat or violence. Call campus police immediately at 10333 or (814) 368-3211
<ul style="list-style-type: none">• If you deem it is not an emergent situation, consider submitting a Care Report through Student Care and Conduct so professional staff can follow up with the student.	<ul style="list-style-type: none">• Don’t give up if the student refuses to follow up with services. Explore their objections and if resistance is still present, follow the UPB Acute Distress and Suicide Protocol (Page 12)

Suicide or Self-Harm

What is it?

-The act of ending one's life. Suicide may be preceded by thoughts of ending one's life, making a plan, gathering supplies to carry out the plan, etc.

-Self-Harm or Non-Suicidal Self Injury (NSSI) is the direct and deliberate destruction of one's own body in the absence of suicidal intent.

Fast Stats:

- There are more than 1,000 suicides on college campuses each year.
- Suicide is the 3rd leading cause of death among people ages 15-24.
- One in ten college students has made a plan for suicide.
- NSSI is most common among adolescents and young adults with lifetime rates at 15-20%

Common Warning Signs:

- Talking of suicide or wanting to die
- Avoiding friends or social activities
- Mood swings
- A sense of hopelessness
- Abrupt changes in personality and behavior
- Drop in academic performance
- Changes in appearance, especially neglect in appearance

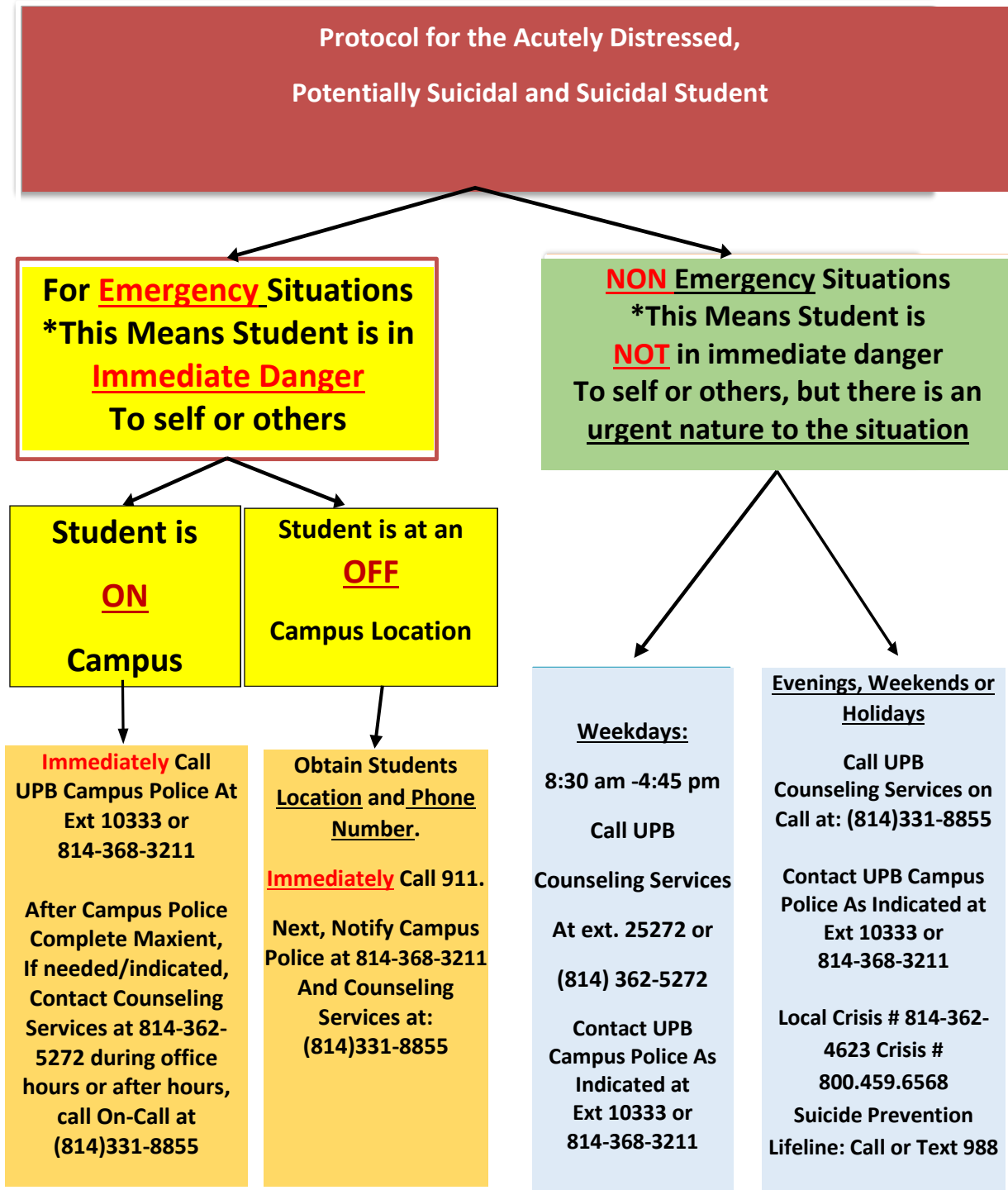
Dos and Don'ts:

DO	DON'T
<ul style="list-style-type: none">• Be direct. Ask the student if they are feeling like they want to end their life.	<ul style="list-style-type: none">• Avoid using vague language such as "hurt yourself." Students may define these two things differently.
<ul style="list-style-type: none">• If the student is in immediate danger, and is on campus, contact campus police immediately. (814) 368-3211 or extension 10333. Follow the UPB Acute Distress and Suicide Protocol Flowchart.	<ul style="list-style-type: none">• Don't ignore statements of wishing to be dead. Students often reach out directly or indirectly to those they think will take them seriously.
<ul style="list-style-type: none">• Submit a Care Report through Student Care and Conduct so professional staff can follow up with the student and the interaction is documented.	<ul style="list-style-type: none">• DO NOT submit a Care Report if there is an emergent situation (student in immediate danger to self or others). Follow the UPB Acute Distress and Suicide Protocol Flowchart. Contact campus police immediately.

~If you are unsure whether a student is in an emergent situation, err on the side of caution and reach out to Counseling Services or Campus Police. *When in doubt, reach out!*~

UPB Acute Distress and Suicide Protocol Flowchart

This Chart is for Immediate Reference, Refer to Specific Instructions as Well



A Note on Disability Resources and Services

Pitt Bradford is committed to providing equal opportunities in higher education to academically qualified students with disabilities. Students with disabilities will be integrated as completely as possible into the University experience.

A student in distress also may have disability-related concerns to contend with. With that in mind, here are some reminders:

- Avoid assuming you understand the student's disability.
- Many conditions that cause disabilities are not static.
- If a student is having difficulties communicating with you, let the student know your level of understanding and contact the student's disability coordinator to facilitate communication.
- Remember it is the student's decision whether to disclose a disability.
- Maintain confidentiality regarding all communications with student who have disabilities.
- Always consult with Disability Resources and Services with any disability related questions or concerns.

Chad Hockaday
Interim Coordinator for Equity and Accessibility

Email: cjh187@pitt.edu

Phone: [814-362-7609](tel:814-362-7609)

Location: 221 Frame-Westerberg Commons

Resource Phone Numbers

Campus Police	(814) 368-3321
Student Counseling Services	(814) 362-5272
McKean County Crisis Hotline	1-800-459-6568

References/Acknowledgements

Thank you to the Counseling Center of the University of Pittsburgh at Oakland for providing some material used for this guide.

<https://collegestats.org/resources/mental-health-guide/>

<https://www.apa.org/>