

## **Supporting different types of students:**

### ***The Anxious Student***

For these types of students, 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 - this alone often 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.

### ***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, low interest in daily activities. They show low activity levels because everything is an effort and they have little energy.

Do:

- let student know you're aware he/she is feeling down and you would like to help.
- reach out more than halfway and encourage the student to express how she/he is feeling, for he/she is often initially reluctant to talk, yet others' attention helps the student feel more worthwhile.
- tell student of your concern.

Don't:

- Minimize the student's feelings, (e.g., "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..

### ***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, 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 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 (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 or the real.
- speak to their healthy side, which they DO 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 positions (false perceptions) more.
- "play along", (e.g., "Oh yeah, I hear the voices (or see the devil).")
- encourage further revelations of craziness.
- demand, command, or order.
- expect customary emotional responses.

### ***The Suicidal Student***

**Suicide is the second leading cause of death among college students.** Most people who contemplate suicide are ambivalent about killing themselves and typically respond to help. Suicidal students usually attempt to communicate their feelings prior to attempting suicide.

**High risk indicators include:**

- feelings of hopelessness, helplessness, and futility.
- a severe loss or threat of loss
- a detailed suicidal plan
- history of a previous attempt

- history of alcohol or drug abuse, and
- feelings of alienation and isolation
- Giving away personal possessions
- Talking about death

Do:

- take the student seriously - 80% 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, and contact a professional team member as soon as possible. Contact Campus Police @ ????. They can get immediate help while you remain with resident (as long as it is safe for you to do so)
- take care of 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."
- over commit yourself and, therefore, not be able to deliver on what you promise
- ignore your limitations
- leave the student alone if concerned there is substantial or imminent risk

### ***Confronting a Student***

Confronting a student does not require judging, blaming, or attacking the person. It does not require demeaning or forcing the person to take action. Confronting someone means that you have the courage to let the student know what you have seen and heard, that you are concerned about them and that you are willing to help. Listed below are some practical tips on confronting a resident, a friend, or anyone else you care about.

#### **Be HONEST and SPECIFIC:**

Explain why you want to have a serious talk and what you hope will happen...(and what you hope doesn't happen).

Example: "I am really worried about your drinking and I hope you won't just blow me off or think I am just putting you down...I don't want to wreck our friendship..."

#### **Describe your OBSERVATIONS:**

It is important that you describe your observations in a non-judgmental way and express concern in your observations.

Example: "Since last Friday night you have come back to our room really drunk four times, twice you said you drove home drunk and last night you threw-up all over our floor..."

#### **Express your FEELINGS:**

Example: "I am really worried about you...I am scared to talk to you in a serious way because I think you don't believe you have a problem...and bringing it up might just piss you off..."

Offer your **RECOMMENDATIONS**:

Example: "I really wish you would go talk to someone about your drinking...see if you do have a problem. You could either talk with a physician at health services or a counselor at the University Counseling Service... whoever you would be most comfortable with... I'll go with you... The services are free and they are on campus."

**LISTEN** actively to what your resident says:

Listening "actively" does not require that you necessarily agree or disagree with your friend. The important part is that you accurately hear what your friend is saying so he or she feels heard and understood. One way to communicate that you are listening and understand is to paraphrase what your friend says, from their point of view, and to then restate your observations and recommendations.

**Always call for help:**

***Never, never put yourself in an unsafe position. Know when to get help.*** Your supervisor is your first line of assistance and support. ***ALWAYS share your concerns about students with your supervisor.*** ALWAYS work with your supervisor when you need support for yourself. In addition, we can consult with an on-call psychiatrist, who can speak with a student by phone.

***You are NEVER alone!***

Below are a few campus resources to always have at your disposal:

VPSS \_\_\_\_\_ contact info: \_\_\_\_\_

Dir. of Res. Life \_\_\_\_\_ contact info: \_\_\_\_\_

University Counseling Service ???

Department of Public Safety ???

Health Center ???

Psychiatrist on Call ???