

# HEALTH & COUNSELING PROSPECTUS FOR MENTAL HEALTH 2008 – 2009

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Prairie View A&M University is dedicated to providing the necessary support services which enhances the ability of students to receive the best quality of education. It is our goal to provide a safe environment for our students, faculty and staff. Preparing a university-wide mental health response plan and committing resources to respond to crisis is one way in which the University demonstrates its dedication and facilitates meeting three of the University's Goals ( *Increase the Efficiency of University Operations; Promote Programs that Contribute to Student Success; Increase & Enhance the Visibility & Awareness of the University to the Community at Large/All Stakeholders*).

**Health, both physical and mental is critical for the success of all students.**

This plan is necessary due to a disturbing trend which has developed on college campuses over the past few years. Students are arriving with complicated and serious mental health issues. These issues proliferate in a variety of ways. It is nearly impossible to control or contain an individual determined to unleash violence of the magnitude seen recently at various institutions, however we can be prepared to communicate clear procedures – known and practiced widely on campus.

These types of incidents often happen in minutes, leaving campus officials only moments to mobilize forces and make decisions. From anti-social behaviors to dangerous substance abuse, administrators are being presented with an ever-changing and highly dramatic landscape of mental health issues. Students now regularly use psychotropic medication and present with a wide variety of behaviors associated with mental health issues.

At the same time, improvements in behavioral and medication therapy have made higher education accessible to more people – which is a positive outcome from trends in mental health care. Of course, all this means new challenges and new opportunities for us.

**Purpose**

- 1. Respond to critical incidents involving Prairie View A&M University students on main campus.**
- 2. Serve as University contact when students are involved in critical incidents away from main campus.**

**Goal**

**The goal of the PVAMU Crisis Response Team (CRT) is to establish a mechanism for university-wide collaborations to meet the health and safety needs of current students of PVAMU who may be at risk or in crisis. The CRT will work in conjunction with the University's Crisis Management Plan which is currently under revision.**

## Objective

1. To coordinate the University's response to critical incidents involving students while paying special attention to the health, safety and security needs of members of the University community;
2. To offer counseling, guidance and/or appropriate support to members of the University community as appropriate;
3. To use critical incidents when appropriate as "teachable moments" which may enhance the quality of life for PVAMU students touched by critical incidents.
4. To provide appropriate crisis response training for University students, faculty and Staff as it relates to Mental Health in particular.
5. To develop an appropriate format for referral & follow-up of students in crisis and/or at risk.
6. To identify/ manage/disseminate and review emergency notification procedures as it relates to mental health.

It is in this vein that the University has established a Mental Health Critical Response Team which will be responsible for:

1. Coordinating a campus-wide approach to MH Crisis
2. Coordinating & conducting campus-wide training for (students/faculty & staff) to facilitate appropriate referrals
3. Identify a "point person" to receive critical referrals
4. Scheduling & practicing effective Critical Response drills
5. Develop the protocol for response
6. Manage/Disseminate/Review
7. Identify emergency notification procedures
8. Assess essential mental health needs
9. Coordinate responder care services
10. Ensure training of "first line" staff (RA's) especially

It is critical that students who show signs of violence to themselves or others be reported to appropriate authorities and be made to seek treatment if they wish to continue their studies on campus. Everyone on campus needs to work together to make our campus safe and create positive mental health.

**This document is a guide to facilitate your appropriate response should you be faced with any of these incidents while at PVAMU.**

**A critical (or traumatic) incident** is any event outside the usual realm of human experience that is markedly distressing (e.g. evokes reactions of intense fear, helplessness, horror, etc.)

Such critical incidents usually involve the perceived threat to one's physical integrity or the physical integrity of someone else. Most importantly, critical incidents are determined by how they undermine a person's sense of safety, security and competency in the world. This results in a form of psychiatric injury, also called traumatic impact or traumatic stress.

Critical management in the face of a current, real crisis includes identifying the real nature of a current crisis, intervening to minimize damage and recover from the crisis. Typically, proactive management activities include forecasting potential crises and planning how to deal with them. Critical incident management often includes strong focus on public relations to recover any damage to public image and assure stakeholders that recovery is underway.

Critical incidents have the potential for creating social trauma and undermining social trust in government - ultimately impacting community life and even the practice of democracy.

### **Procedures**

Outline of Procedures in a Crisis:

Note: This outline is to provide general information only. In the event of an actual crisis, variations may occur depending on the nature of the crisis and the appropriate response.

**Step 1:** Department of Public Safety (DPS) is notified of a critical incident involving a PVAMU student. The incident could be on or off campus.

Dispatch # Emergency 936/261-4911

Non-life threatening 936/261-1375

#### **Mental Health Issues:**

**Step 2:** DPS notifies the Critical Response Team Person ON-Call via CRT Pager or cell. The CRT Person On-Call gathers necessary information on the incident then contacts appropriate staff/individuals. Additionally if the situation warrants, the CRT Person On-Call proceeds immediately to the site of the incident or to the hospital. The CRT Person ON-Call may request assistance from other CRT members at the site of the incident or the hospital.

CRT Person ON-Call; contacts the designated University Administrator and if required, the University media representative to coordinate any press releases or contact with media regarding the critical incident.

If warranted, the Team Leader or the Administrative designee may call an emergency meeting of the CRT. The decision to hold an emergency meeting will be based on an evaluation of the situation by the CRT Person On-Call and the consent of the University's Administrative designee.

**Step 3:** CRT Person On-Call verifies that the contact with the affected student's family has been made. Additionally, the Person On-Call makes sure that CRT member has made official university contact with the family. CRT Person ON-Call verifies that contact with roommate(s), significant other, and brother or sister of the affected students has been made. Additionally, the CRT makes sure that any additional services necessary for the affected student and/or the student's friends, roommate, significant other, or brother or sister is provided.

**Step 4:** If the situation warrants, a campus visit is arranged for the family. Once the family arrives, an escort is designated for the family. A CRT member or the CRT Person On call makes necessary arrangements to meet family needs, as appropriate.

**Step 5:** The family members of the student involved in the crisis may meet with appropriate university administrators, CRT team and other officials as requested or needed.

**Step 6:** The Crisis Response Team meets to de-brief and plan any appropriate follow-up programs or activities necessary. The CRT evaluates the procedures followed and makes suggestions for revision to the procedures.

## Examples of Critical Incidents

### Individual/Personal

- Death of a student, faculty and/or staff on or off campus
- Attempted suicide and homicide
- Life threatening injury/illness (including infectious disease)
- Campus disturbance/riot or acts of civil disobedience
- Gang/cult/hazing and/or activities involving grievous acts of violence
- Industrial accidents involving serious injuries or fatalities
- Sudden or unexpected death of a relative, friend or colleague
- Sexual assault/abuse
- Alcohol/drug overdose
- Mental health crisis
- Contacting students in cases of family emergency

PVAMU& recognizes that the above list many not cover all situations that warrant CRT intervention. Therefore, the CRT Person On-Call or the Administrative designated personnel will determine whether or not a situation needs CRT attention.

## WHAT TO DO IN THE MIST OF AN INCIDENT

DO NOT PLACE YOURSELF IN DANGER IF YOU HAVE A CELL PHONE & CAN SAFELY USE IT:

CONTACT UNIVERSITY DPS - IF AN EMERGENCY 4911 they will make the appropriate contacts.

If it is a medical emergency, do not move the person:  
LIFE THREATENING MEDICAL EMERGENCY DIAL 911

There is a student in my class who has behavior which concerns me.  
Call 261-1400 or call 1/800/346-3549 (Mental Health Only).

## WHAT TO DO AFTER AN INCIDENT: Things to Do After A Critical Incident

- WITHIN THE FIRST 24 - 48 HOURS periods of appropriate physical exercises alternated with relaxation will alleviate some of the physical reactions.
- Structure your time - keep busy.
- You're normal and having normal reactions - don't label yourself crazy.
- Talk to people - talk is the most healing medicine.
- Be aware of numbing the pain with overuse of drugs or alcohol you don't need to complicate this with a substance abuse problem.
- Reach out - people do care.
- Maintain as normal a schedule as possible.
- Spend time with others and talk about what happened to you.
- Help others who were affected as much as possible by sharing feelings and checking out how they are doing.
- Give yourself permission to feel rotten and share your feelings with others.
- Keep a journal. Write down your thoughts and feelings about the incident. Research has shown this is very effective for symptom reduction and resolution of the trauma.
- Do things that feel good to you.
- Realize those around you are under stress.
- Don't make any big life changes.

- Do make as many daily decisions as possible which will give you a feeling of control over your life, i.e., if someone asks you what you want to eat - answer them even if you're not sure.
- Get plenty of rest.
- Reoccurring thoughts, dreams or flashbacks are normal - don't try to fight them - they'll decrease over time and become less painful.
- Eat well-balanced and regular meals (even if you don't feel like it).

## **Symptoms of Traumatic Impact**

Even though the event may be over, you may now be experiencing or may experience later, some strong physical, psychological and behavioral reactions to the traumatic event. No one is immune from these reactions. It is quite normal for people to experience these aftershocks when they have passed through a horrible event. This does not imply weakness or craziness. It simply indicates that the traumatic event was just too powerful and overwhelming.

Symptoms of traumatic impact can vary from person to person. Some people will experience many symptoms, others just a few. For some, the effect is rapid. For others symptoms may occur weeks, months or even years later. The effects can even be cumulative over time.

With acute stress, the symptoms go away within a few weeks. If the symptoms last more than one month, seek medical help and counseling specific for Post Traumatic Stress immediately. The sooner treatment begins; the better the chances are for a full recovery.

## **Examples of Reactions to a Critical Incident or Other Traumatic Stress:**

### **Physical Symptoms** \*Any of These symptoms may require medical attention.

- |                        |                          |                       |
|------------------------|--------------------------|-----------------------|
| ☞ Chills               | ☞ Thirst                 | ☞ Profuse sweating    |
| ☞ Fatigue              | ☞ Nausea and/or Vomiting | ☞ Dizziness           |
| ☞ Weakness             | ☞ Chest pain             | ☞ Headaches           |
| ☞ Elevated BP          | ☞ Muscle tremors         | ☞ Visual difficulties |
| ☞ Difficulty breathing |                          |                       |

### **Cognitive/Mental Symptoms**

- |                                            |              |                                                   |                             |
|--------------------------------------------|--------------|---------------------------------------------------|-----------------------------|
| ☞ Confusion                                | ☞ Nightmares | ☞ Uncertainty                                     | ☞ Hyper-vigilance, watchful |
| ☞ Difficulty identifying objects or person |              | ☞ Intrusive images                                | ☞ Suspiciousness            |
| ☞ Poor problem solving                     |              | ☞ Poor abstract thinking                          |                             |
| ☞ Difficulty with numbers                  |              | ☞ Poor concentration/memory                       |                             |
| ☞ Disorientation of time, place or person  |              | ☞ Blaming someone                                 |                             |
| ☞ Heightened or lowered alertness          |              | ☞ Increased or decreased awareness of surrounding |                             |

### **Emotional Symptoms**

- |                             |         |                                     |         |          |           |                   |
|-----------------------------|---------|-------------------------------------|---------|----------|-----------|-------------------|
| ☞ Fear                      | ☞ Guilt | ☞ Grief                             | ☞ Panic | ☞ Denial | ☞ Anxiety | ☞ Intense anger   |
| ☞ Irritability              |         | ☞ Inappropriate emotional responses |         |          |           | ☞ Emotional shock |
| ☞ Emotional outbursts       |         | ☞ Feeling overwhelmed               |         |          |           |                   |
| ☞ Loss of emotional control |         | ☞ Thoughts of suicide/homicide      |         |          |           | ☞ Depression      |

### **Behavioral Symptoms**

- |                     |                                           |                      |
|---------------------|-------------------------------------------|----------------------|
| ☞ Withdrawal        | ☞ Hyper-alert or sensitive to environment |                      |
| ☞ Antisocial acts   | ☞ Increased alcohol consumption           | ☞ Intensified pacing |
| ☞ Erratic movements | ☞ Change in social activity               | ☞ Inability to rest  |

- 👏 Change in speech patterns
- 👏 Loss or increase of appetite    👏 Change in usual communications

### For Family and Friends

- Listen carefully.
- Spend time with the traumatized person.
- Offer your assistance and a listening ear if they have not asked for help.
- Reassure them that they are safe.
- Help them with everyday tasks like cleaning, cooking, caring for the family, minding children.
- Give them some private time.
- Don't take their anger or other feelings personally.
- Don't tell them that they are "lucky it wasn't worse" - traumatized people are not consoled by those statements. Instead, tell them that you are sorry such an event has occurred and you want to understand and assist them.

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### Putting Emergencies on "ICE"

If you should ever become incapacitated in case of an emergency, Prairie View A&M University & Waller County emergency workers need a quick way to find out who they should contact.

Paramedics, police and firefighters often waste valuable time trying to figure out which name in a cell phone to call when disaster strikes. They need to talk immediately to a family member or close friend so you can get the medical attention you need as soon as possible

We are attempting to implement the I.C.E. program as a free and easy way to help emergency workers help you.

All you have to do is put the name of your emergency contact in your cell phone book with the word "ICE" in front of it. "ICE" stands for "In Case of Emergency". These should be persons who are available much of the time and know your important medical conditions.

You can also have more than one emergency contact -- you just list them as ICE1, ICE2, and so on.

For example:

**ICE1**– Angel Panther (mother), 111/111-1111

**ICE2** - Luke Panther (grandfather), 111/222-2222

**Prairie View A&M University**  
**Division of Administration & Auxiliary Services**  
**Department of Health & Counseling Services**

**HEALTH & COUNSELING ISSUES**  
**CONTACTS FOR**  
**PRAIRIE VIEW A&M UNIVERISTY STUDENTS:**

**Department of Public Safety:**

Emergency 936/261 -4911  
24 hours/day 7 days/week

**Health Services**

Monday – Friday 8:30 am – 6:00pm  
when the university is in session 936/261-1400

**Urgent Care**

Monday – Thursday 7pm – 8am  
Friday 7pm – Monday 8am  
When the university is in session  
Dial - 936-261-4911  
If it is safe, remain in the location reported to dispatch.

**Emergency Medical Care** (Life Threatening)

9 1 1 24 hours/day 7 days/ week  
Waller County EMS.

**Student Counseling Service** (OFHC) 9:30-5:30/ M-F/936-261-1400

UT Student Assistance Program **24 Hour Assistance 1-800-346-3549** (For student Mental Health emergencies)

**Additional Important Telephone Numbers**

Houston Crisis Hotline **24 Hour Assistance 713-228-1505**

County Crisis Hotline **24 Hour Assistance 1-800-633-5686**

Focusing Families **24 Hour Assistance**

**Confidentiality:** Information about a client will not be released outside OFHC to any third party without the client's written authorization. Limitations to confidentiality are those circumstances mandated by law and medical crisis.

## RESOURCES

### Alcohol & Other Drugs Education

Staffed by a risk reduction specialist, provides alcohol/drug education regarding use, risks, and consequences, with personalized feedback designed to help students change their drinking/drug use patterns and outcomes. AOD also provides information on alcohol/drug related topics; support for friends, family, and roommates impacted by the alcohol/drug use of others, current or past; and referral to campus and community support groups. For additional information dial 936/261-1419.

### Counseling Services

Staffed by professional counselors to provide mental health services in the following areas but not limited to:

- Alcohol & Other Drug Problems
- Anger Management
- Coping with change/Anxiety
- Grief or bereavement
- Relationship Issues

(Up to 5 sessions per issue)

Services are free and confidential, for students currently registered. Services are available Monday – Friday 9am – 6pm (by appointment) when the University is in session. For additional information dial **936/261-1417**.

Additional mental services provided by UTEAP – Student Assistant Program 24 hours a day, 7 days a week for emergencies when the University is in session. Services may be accessed by dialing **713/500-3327** or **1/800/346-3549**. Day & evening appointments are available.

## Safety is Everybody's Business

Safety at PVAMU is a community-wide effort. Each of us needs to accept the challenge of living in a way that promotes health and well-being for ourselves and others. To support that, the University provides services for and assistance in maintaining a safe environment.

A commitment to safety is a commitment to creating an environment free from all forms of exploitation and intimidation. New freedoms bring new responsibilities — responsibility to oneself and to the entire community.

**The key to staying safe is to avoid places or activities that provide a criminal the opportunity to commit a crime against you.**

In an ideal world we should, within reason, all be free to go where we want when we want. Unfortunately in the 21st century this is not always the case and all members of the community have to make every effort to minimize the risk to themselves and others.

The following advice is provided to assist in your personal safety and minimizing any risk. Begin by:

- Learning how to keep yourself and your friends safe,
- How to summon help if you need it (**ext. 4911**) or **Blue Phones**,

- How to report a crime.

The Public Safety Map of Campus pin-points emergency telephones (**BLUE PHONES**) all across campus — make a point of knowing where they are. You can get a copy of the map at the Visitor Information Center.

### **For Everyone's Sake, Respect Building Security**

Never prop doors open, and report damaged locks to Public Safety immediately.

**Vulnerability** College students are particularly vulnerable to victimization. Many are living away from home for the first time. New freedoms and peer pressures, coming at an age when sexual impulses are very strong, contribute to this vulnerability.

A tragic result is that sexual assault is the most common violent crime committed on college campuses today. In fact, research suggests that sexual activity may be forced on as many as 25 percent of all college females.

**Most of the assaults are committed by someone known to the victim.**

## **Awareness & Risk Reduction**

**Personal Safety** - If you think you are being followed:

- Cross over the road, if you are followed cross back again.
- If you are still concerned go to the nearest public place, a shop, pub or house with lights on and call the police \_\_\_\_\_.
- If someone tries to grab your possessions, do not resist. Try to get a good look at them then call the police giving your location, the description and the direction the assailant went off in.

### **When out alone at night**

- Always try to keep some cash on you in case you need to get a taxi.
- Keep the number of a reliable taxi company with you.
- Always sit behind the driver.
- When the taxi arrives, always check it is the one you have booked and not a un -licensed cab or individual touting for business.
- **If in doubt do not get into a vehicle.**
- Make as much noise as you can by shouting or
- Try to get away as quickly as possible.

- Always call the Police immediately, having retreated to a place of safety. Don't leave it until you have made arrangements to get home or back to your hall of residence safely.

## PERSONAL SAFETY TIPS

### At Home

- Lock your doors and windows always - whether you are at home or away.
- Do not hide a door key outside.
- Do not let anyone in your home that you do not know or trust.
- Do not give out your phone number to "wrong number" callers.
- Contact area law enforcement if you feel threatened

### Walking & Jogging

- Plan and vary your route.
- Always tell someone where you are going and when you will return.
- Carry your cell phone or know where phones are along the route.
- Carry identification.
- Wear reflective material if you are going out at night.
- Avoid unpopulated areas.
- Trust your intuition about a person or an area.

### On Campus

- Know where the campus emergency phones are located.
- Never walk alone at night or in secluded areas.
- Call 4911 for campus emergencies.

### Off Campus Housing

- Get to know your neighbors.
- Form agreements to watch each other's homes.
- Know the laws and obey them.
- Don't go to parties alone.
- **If you are not 21, you cannot legally consume alcohol**
- Eat before consuming alcohol. Alternate glasses of water with glasses of alcohol.
- If you drink, watch your open container. Do not allow anyone to fill your glass.
- Don't leave a party with someone you don't know.

## Downtown Houston

- Know where you are going before you leave your house.
- Don't go out alone at night.
- Know what time coffee shops and restaurants close.
- Obey the law.

**When should I seek professional help?** Some people are able to cope effectively with the emotional and physical demands brought about by a natural disaster or other traumatic experience by using their own support systems. It is not unusual, however, to find that serious problems persist and continue to interfere with daily living. For example, some may feel overwhelming nervousness or lingering sadness that adversely affects job performance and interpersonal relationships. Individuals with prolonged reactions that disrupt their daily functioning for more than one month should consult with an experienced mental health professional trained in Critical Incident Stress Management and Post Traumatic Stress.

These professionals work with individuals affected by trauma to help them find constructive ways of dealing with the traumatic impact and Post traumatic Stress Disorder.

**Am I Suffering From Stress And Tension?** Each person handles stress differently. Some people actually seek out situations, which may appear stressful to others. A major life decision, such as changing careers or buying a house, might be overwhelming for some people while others may welcome the change. Some find sitting in traffic too much to take, while others take it in stride.

***The key is determining your personal tolerance levels for stressful situations.***

Stress can cause physical, emotional, and behavioral changes which can compromise health, vitality, and peace-of-mind, all of which may affect personal and professional relationships. Too much stress can cause relatively minor illnesses like insomnia, backaches, or headaches as well as potentially life-threatening diseases like high blood pressure and heart disease.

**Here are questions to identify negative reactions to stress and tension:**

1. Do minor problems and disappointments upset you excessively?
2. Do the small pleasures of life fail to satisfy you?
3. Are you unable to stop thinking of your worries?
4. Do you feel inadequate or suffer from self-doubt?
5. Are you constantly tired?

6. Do you experience flashes of anger over situations which used to not bother you?
7. Have you noticed a change in sleeping or eating patterns?
8. Do you suffer from chronic pain, headaches, or back aches?

**If you answered yes to some of these questions, it is likely that you have identified negative reactions to stress and tension and need to make some changes**

**What is the Worse Kind of Stress?** The most harmful form of stress is not just the result of major life crisis, death of a spouse, divorce, loss of a job or critical incidents like those of 9/11/01. While the stress associated with these events is often severe, it is also short-lived and therefore has little time to cause damage to our bodies if they are dealt with appropriately. They can, however, cause an already full load of stress to become over

Far worse, scientists now theorize, are the chronic, uncontrolled low-level tension caused by our responses to the pressures and irritations of everyday life - such as difficulties at work or at home, anger, rejection, interruptions, being late for work, financial anxieties, arguing with a loved one, deadlines.

Each little frustration that occurs throughout the day speeds the heart rate, dilates the pupils and floods the bloodstream with powerful hormones. In the long-term, this uncontrolled low-level tension forces the body to go into overdrive, sapping our energy and damaging our physical and emotional health.

**How Can I Take Care Of Myself?** The good news is that it is our response to a given situation that determines whether we are feeling "stressed" or not. What's chronically upsetting to you may not irritate your spouse or a co-worker at all. Our response to stress is highly individual. What reduces stress also varies. What is important is that we counter balance and/or replace negative stress situations with positive experiences, at least 2 to 1. In the end, this ratio will determine your overall health quotient.

## Helpful Ways to Reduce and Control Stress and Tension

As you read the following suggestions, remember that success will not come from a halfhearted effort, nor will it come overnight. ***To manage stress successfully, you must take control of your situation and make the needed changes to both your responses to stress and your lifestyle.*** It will take determination, persistence and time. Some suggestions may help immediately, but if your stress is chronic it may require more attention and/or lifestyle changes. Determine *your* tolerance level for stress and try to live within these limits. Learn to accept or change stressful and tense situations whenever possible.

**Be realistic** -- If you feel overwhelmed by some activities (yours and/or your family's) learn to say ***no!*** Eliminate an activity that is not absolutely necessary or ask someone else to help. You may be taking on more responsibility than you can or should handle. If you meet resistance, give reasons why you are making the changes. Be willing to listen to other's suggestions and be ready to negotiate.

**Shed the "superman/woman" urge** -- No one is perfect, so don't expect perfection from yourself or others. ***Perfectionism is one of the leading causes of internally induced stress.*** Ask yourself: What really needs to be done? How much can I really do? Is the deadline realistic? What adjustments can I make? Don't hesitate to ask for help if you need it.

**Relax** -- Just 10 to 20 minutes of quiet reflection may bring relief from chronic stress as well as increase your tolerance to it. Use the time to listen to music, relax and try to think of pleasant things or nothing at all.

**Visualize** -- Use your imagination and picture how you can manage a stressful situation more successfully. Whether it's a business presentation or moving to a new place, many people feel visual rehearsals boost self-confidence and enable them to take a more positive approach to a difficult task.

**Take one thing at a time** -- For people under tension or stress, an ordinary workload can sometimes seem unbearable. The best way to cope with this feeling of being overwhelmed is to take one task at a time. Pick one urgent task and work on it. Once you accomplish that task, choose the next one. The positive feeling of "checking off" work is very satisfying. It will motivate you to keep going.

**Exercise** -- Regular exercise is a popular way to relieve stress. Twenty to 30 minutes of physical activity each day benefits both the body and the mind.

**Hobbies** -- Take a break from your worries by doing something you enjoy. Whether your interests include gardening, painting, fishing, etc schedule time to indulge yourself.

**Healthy lifestyle** -- Get regular checkups. *Know the general condition of your vital signs (blood pressure, etc) even if you have no symptoms.* Good nutrition also makes a difference. Limit intake of caffeine and alcohol (alcohol actually disturbs, not helps, regular sleep patterns), get adequate rest, exercise, and *balance work and play.*

**Share your feelings** -- A phone call to a friend lets you know that you are not the only one having a bad day, dealing with a sick child, or working in a busy office. Stay in touch with friends and family. Let them provide love, support, and guidance. Don't try to cope alone.

**Give in occasionally** -- Be flexible! If you find you are meeting constant opposition in either your personal or professional life, rethink your position or strategy. Arguing only intensifies stressful feelings. If you know you are right, stand your ground, but do so calmly and rationally. Make allowances for other's opinions and be

prepared to compromise. If you are willing to give in, others may meet you halfway. Not only will you reduce your stress, you may find better solutions to your problems.

**Go easy with criticism** -- You may expect too much of yourself and others. Try not to feel frustrated, let down, disappointed, even "trapped" when another person does not measure up. The "other person" may be a wife, a husband, or child whom you are trying to change to suit yourself. Remember, everyone is unique, and has his or her own virtues, shortcomings, and right to develop as an individual.

**Deal with problems promptly** -- Don't let things build up until they become a crisis. Whenever possible, resolve family, financial and legal issues before you go off to work. Having too much on your mind will affect your ability to concentrate on your job and make you more accident /mistake prone.

## SPECIFICS FROM: STUDENT COUNSELING SERVICES

Many students attending the University experience emotional and psychological difficulties that may go unnoticed or ignored. Frequently, students perceive faculty and staff as their primary source of advice and support. This guidance is tendered to assist faculty and staff in dealing with students in distress. Please take a few minutes to acquaint yourself with this important guide.

Students encounter stress for a variety of reasons during the time they attend the University. Academics, family problems, social situations, work, and financial problems are just some of the sources of stress. While most students cope successfully with demands of college life, for some the pressures become overwhelming and unmanageable.

The inability to cope effectively with emotional stress poses a serious threat to a student's overall functioning. The expression of interest and concern by a faculty or staff member may be a critical factor in helping a struggling student re-establishes the emotional equilibrium necessary for success at Prairie View A&M University.

Your willingness to respond to students in distress will undoubtedly be influenced by your personal style and your particular beliefs about the limits of responsibility for helping students mature, both emotionally and intellectually. Some students may be more open to assistance than others. In addition, factors such as class size or the depth of your relationship with the student may also have a substantial effect on the type of interactions you have. It's important to be realistic about what you can offer when making a decision about how you can help a student.

### **How You Can Help Students in Distress**

We hope this information will not only assist you in assessing the severity of a student's personal problems, but will also give you some specific ideas about what to do when dealing with a student who appears to be distressed.

There is a difference between students who are in serious mental health crisis and those who are suffering from lower levels of stress. Understanding the difference will help you respond appropriately to the situation.

### **Students in a Serious Mental Health Crisis**

A crisis is a situation in which an individual's usual style of coping is no longer effective, and the emotional or physiological response begins to escalate. As emotions intensify, coping becomes less effective, until the person may become disoriented, non-functional, or attempt harm. If a student is in a serious mental health crisis, you might see or hear the following:

- Suicidal statements or suicide attempts
- Homicidal threats, written or verbal, or attempted homicide or assault
- Destruction of property or other criminal acts

- Extreme anxiety resulting in panic reactions
- Inability to communicate ( e.g. , garbled or slurred speech, disjointed thoughts)
- Loss of contact with reality ( e.g., seeing or hearing things that aren't there, expressing beliefs or actions at odds with reality)
- Highly disruptive behavior ( e.g., hostility, aggression, violence)

### **What to Do When You Suspect a Serious Crisis**

If you believe there may be imminent danger of harm to a student or someone else, as evidenced by several of these crisis symptoms, immediately call the Campus Security (DPS) 936-261-1375 or (4911) or the local law enforcement agency (911) **\*off main campus\***

### **Students in Stress**

At one time or another, everyone feels depressed or upset. However, there are warning signs for stress, which, when present over time, suggest that the problems a student is dealing with may be a cause for concern. In these circumstances, you might see or hear the following:

- Uncharacteristic changes in academic performance
- Uncharacteristic changes in attendance at class or meetings
- Depressed or lethargic mood
- Hyperactivity and/or rapid speech
- Social withdrawal
- Marked change in personal dress, hygiene, eating and/or sleeping routines
- Repeatedly falling asleep in class
- Request for special consideration, especially if the student is uncomfortable talking about circumstances prompting the request.
- New or recurrent behavior that pushes the limits of decorum and that interferes with the effective management of your class, work team, etc.
- Unusual or exaggerated emotional response to events

### **What You Can Do for a Student in Stress**

If you choose to approach a student with whom you are concerned or if a student seeks your assistance, here are some suggestions which might be helpful:

- **Talk to the Student** in private when both of you have time and are not rushed or preoccupied. Give the student your undivided attention. It is possible that just a few minutes of effective listening on your part may be enough to help the student feel comfortable about what to do next.

- **Be direct and non-judgmental.** Express your concern in behavioral, nonjudgmental terms. Be direct and specific. For example, say something like “I’ve noticed you’ve been absent for class lately, and I’m concerned,” rather than “Why have you missed so much class lately?”
- **Refer.** Point out that help is available and seeking help is a sign of strength. Make some suggestions about places to go for help. (See the Referral Section for ideas.)
- **Follow up.** Following up is an important part of the process. Check with the student later to find out how he or she is doing. Provide support as appropriate.

### **How to Make Referrals to Counseling Services**

If you wish to refer a student for counseling, please call **936-261-1400**. We will arrange a meeting with the student and one of our staff as quickly as possible. If student is on a satellite campus, call UTEAP **1-800-346-3549**.

#### **Referrals are most successful when:**

- You come with the student to the clinic (90 percent compliance).
- You call and make the appointment (80 percent compliance).
- You refer the student to a specific staff member (70 percent compliance).
- If you only say “you need to go to Counseling Services,” compliance is much less likely.

Seriously impaired individuals require extra assistance because they often cannot initiate the help needed.

When faced with this type of situation, take the following steps:

1. Telephone for immediate intervention at Student Counseling Services and ask for a counselor. (**936-261-1400**)
2. Have the student personally escorted to Owens-Franklin Health Clinic (OFHC) by a reliable person who will stay with the student until seen by a counselor.
3. Off main campus, call UTEAP **1-800-346-3549**.

**Confidentiality:** Information about a client will not be released outside OFHC to any third party without the client’s written authorization. Limitations to confidentiality are those circumstances mandated by law and medical crisis.