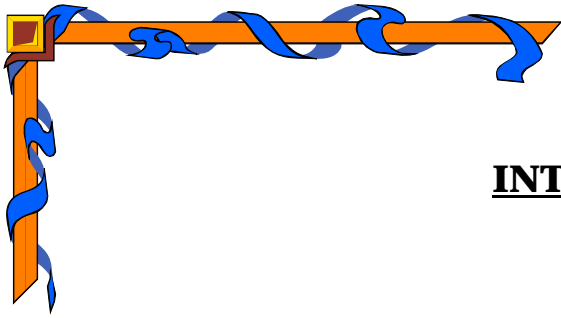


**Counseling and  
Psychological  
Services**

**GUIDE TO  
CLASSROOM  
MANAGEMENT**

***THE EMOTIONALLY  
TROUBLED STUDENT***





## **INTRODUCTION**

As a member of the Humboldt State University campus community, you are constantly interacting with students. At times, you will have contact with students whose problems or behaviors will cause you concern, discomfort, or may interfere in the education of other students. The difficulty is that most often, these types of people or situations do not go away.

Bob Foster, our recently retired Chief of Police, said that when dealing with problem students often times “important signals go unnoticed and that one of the most difficult things for people to do, especially very busy people, is to intervene.” He also suggested that “managing critical incidents requires the ability to know how to call upon technical and/or skilled resources.”

As a faculty or staff member, interacting daily with students, you are in an excellent position to recognize behavior changes that characterize the emotionally troubled student. A student’s behavior, especially if it is inconsistent with your previous observations, could well constitute an inarticulate “cry for help.”

This booklet was created to help you when these difficult occasions occur. It offers straightforward advice, techniques and suggestions on how to cope with, intervene, and assist troubled and/or difficult students in or out of the classroom.

## **GUIDELINES FOR INTERVENTION**

Openly acknowledging to students that you are aware of their distress, sincerely concerned about their welfare, and willing to help them explore their alternatives, can have a profound effect. We encourage you, whenever possible, to speak directly and honestly to a student when you sense that he/she is in academic and/or personal distress.



1. **REQUEST TO SEE THE STUDENT IN PRIVATE** - This may help minimize embarrassment and defensiveness.
2. **BRIEFLY** acknowledge your observations and perceptions of their situation. Express your concerns directly and honestly.
3. **LISTEN** carefully and try to see the issues from the students' point of view without necessarily agreeing or disagreeing.
4. **ATTEMPT** to identify the problem. You can help by exploring alternatives to deal with the concern.
5. **INAPPROPRIATE** and strange behavior should not be ignored. Comment on what you have observed, but not in a judgmental way.
6. **FLEXIBILITY** with strict procedures may allow an alienated student to respond more effectively to your concerns.
7. **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.



# **COUNSELING AND PSYCHOLOGICAL SERVICES** **CONSULTATION AND REFERRAL**

Health Center 2<sup>nd</sup> floor, Room 205, 8:00 a.m. - 5:00 p.m.



## **CONSULTATION:**

If you are unsure of how to handle a specific student, we encourage you to consult with one of the counselors on our staff. Call us at 826-3236, inform the receptionist that you are (faculty, staff, administrator) and ask to speak with the crisis counselor on duty for that day. If the crisis counselor is engaged, your call will be returned as soon as possible. A Brief consultation may help you sort out the relevant issues and explore alternative approaches. 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.

## **REFERRAL:**

When you do discuss a referral to Counseling and Psychological Services, it would be helpful for the student to hear in a clear and concise manner your concerns and why you think counseling would be helpful. Also, having the student call for an appointment increases her/his responsibility and commitment to come in for counseling. HOWEVER, there may be some times when it is more advantageous for you to call and make an appointment for her/him or accompany the student to our office. Urgent concerns that require immediate intervention are:

**SUICIDE**

**FEAR OF LOSING CONTROL AND POSSIBLY HARMING/HURTING SOMEONE**

**SEXUAL ASSAULT**

**PHYSICAL ASSAULT**

**ABUSE**

**RECENT DEATH OF A FRIEND OR FAMILY MEMBER**

All discussions are held **CONFIDENTIAL** except when the student presents a danger to him or herself or others or when abuse is involved. All services are **FREE** to currently enrolled HSU students. Our individual counseling services are designed for students who can benefit from time-limited counseling. If long-term therapy is indicated, the student will be referred to an appropriate off campus resource.

## **A FURTHER RESOURCE: WHAT IF THE ENCOUNTER WITH THE STUDENT BECOMES OUT OF CONTROL, DISRUPTIVE OR THREATENING?**

From the HSU catalog, disruptive student behavior is defined as behavior which interrupts, obstructs, or inhibits the teaching and learning processes. The faculty member determines what disruptive behavior is and has a duty to terminate it. This behavior takes many forms: persistent questioning, verbal attacks, incessant arguing, intimidating shouting and physical disruption.

Faculty also have the authority and responsibility to establish rules, to maintain order, and to eject students from the course temporarily for violation of the rules or misconduct. *If the behavior is disruptive (annoying, non-threatening), then you must put the student on notice that the behavior is disruptive and that any further behavior of this type will not be tolerated and that he/she will be referred to Student Affairs for possible removal from the course. If you are uncomfortable speaking to the student alone, ask the department chair or another colleague to sit in.*

Faculty shall give at least one verbal warning to a student to cease in-class Disruptive behavior. In cases of abusive behavior, this requirement may be waived. In addition, if the in-class disruption does not cease, an attempt shall be made to resolve the problem in a conference between the faculty member and the student. It is always a good idea to keep ongoing written documentation. *If a student is threatening, you do not have to have the conference. Call University Police. University Police will involve the appropriate Student Affairs personnel.*

Depending on the incident(s), students may be removed from the classroom or the university. When disciplinary action is taken, a "STAY AWAY ORDER" may also be issued, i.e., the student is directed to have no further contact with the complainant. Violation of this directive may result in further disciplinary action.

### **YOU ARE NOT ALONE, ASSISTANCE IS AVAILABLE**

**University Police: x3456 or 911**

**Vice President for Student Affairs: x3361**

**Counseling and Psychological Services: x3236**

## **THE DEPRESSED STUDENT**

Depression, and the variety of ways it manifests itself, is part of a natural emotional and physical response to life's ups and downs. With the busy and demanding life of a college student, it is safe to assume that most students will experience periods of reactive (or situational) depression in their college careers. It is when the depressive symptoms become so EXTREME or are so enduring that they begin to interfere with the student's ability to function in school, work, or social environment, that the student will come to your attention and be in need of assistance.

Due to the opportunities which faculty and staff have to observe and interact with students, they are often the first to recognize that a student is in distress. Look for a pattern of these indicators:

- Tearfulness/general emotionality
- Markedly diminished performance
- Infrequent class attendance
- Lack of energy/motivation
- Increased anxiety (generalized, test, performance)
- Irritability
- Deterioration in personal hygiene
- Significant weight loss or gain
- Alcohol or drug use



Students experiencing depression often respond well to a small amount of attention for a short period of time. Early intervention increases the chances of the student's return to previous performance.

### Helpful To:

- ☛ Let the student know you're aware she/he is feeling down and you would like to help
- ☛ Reach out more than halfway and encourage the student to discuss how she/he is feeling
- ☛ Offer options to further investigate/manage the symptoms of depression

### Not Helpful To:

- ☛ Minimize the student's feelings (everything will be better tomorrow)
- ☛ Bombard the student with "fix it" solutions or advice
- ☛ Be afraid to ask whether the student is suicidal if you think she/he may be

## THE SUICIDAL STUDENT

In the current student culture, suicidal thinking is normal. During the last six years, 60 percent of those coming into Counseling and Psychological Services have been depressed to some degree and 25 percent have expressed suicidal ideation upon intake.

It is important to view all suicidal comments as serious. Watching for some of the following behaviors will also give you clues to what's going on with a student. If several of these are true, refer the student to Counseling for assessment.

- Sleeping much more and later than used to
- Not sleeping well and waking up early
- Taking lots of naps
- Appetite has changed so that the student is not hungry or overeats
- Withdrawing from friends and family
- Not attending class
- Expresses hopelessness or guilt
- Sudden mood or behavior changes
- Giving possessions away
- Expresses that life isn't worth the trouble

There are generally four areas that we explore with students who are depressed and have some level of suicidal ideation to assess the likelihood of an attempt to take their life.

- Do they have a well-developed plan that includes an easily available method?
- Have they attempted before?
- Has a friend, family member or acquaintance taken their life through suicide?
- Do they use substances such as alcohol and other depressants that also can weaken impulse control?

Examining these four areas will help in determining how serious the threat of a student taking her /his life is.

### Helpful To:

- ☛ Talk about suicide openly and directly
- ☛ Be confident, caring and know the resources available
- ☛ Take charge and bring the student to the Counseling and Psychological Services
- ☛ Listen to the small voice inside that says, "something isn't right with this student"

### Not Helpful To:

- ☛ Get too involved with the student
- ☛ Ignore comments like, "I won't be a problem much longer" or nothing matters; it's no use"
- ☛ Be too busy to intervene

## **VIOLENCE AND THE VERBALLY AGGRESSIVE STUDENT**

**Violence:** “to use force so as to injure or damage; roughness in action; to outrage, to force, to injure...”

Violence, because of emotional distress, is rare and typically occurs when the student’s level of frustration has been so intense or of such an enduring nature as to erode all of the student’s emotional controls.

This behavior is often associated with the use of alcohol and other drugs.

REMAIN CALM, get help if necessary (send a student for other staff/faculty/ Chair/Public Safety). STAY SAFE (have access to a door; keep furniture/desk between you and the student). DO NOT THREATEN, CORNER, OR TOUCH THE STUDENT. The Adage, “An ounce of prevention is worth a pound of cure,” best applies here.



**Aggressive:** “to attack, to go to, to commit the first act of hostility or offense...to assault first or to invade...”

Students usually become verbally abusive in frustrating situations they perceive as being beyond their control. Anger and upset become displaced from those situations onto the nearest target (YOU). Explosive outbursts or ongoing belligerent, hostile behavior become the student’s way of gaining power and control. It is important to remember that, for the most part, the student is not angry at you personally, but at his/her world and you are the object of pent-up frustrations.

### Helpful To:

- ✔ 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 hear how upset you are and nobody will listen”)
- ✔ Reduce stimulation; invite the person to a quiet place if this is comfortable
- ✔ Be directive and firm about behaviors you will accept (e.g., “I need for you to step back”, “I’m having a hard time hearing you when you yell”)
- ✔ Allow them to ventilate, get the feelings out, and tell you what is upsetting them

### Not Helpful To:

- ✘ Ignore warning signs (body language, clenched fists)
- ✘ Get into an argument or shouting match
- ✘ Become hostile or punitive your self (e.g., “You can’t talk to me that way”)
- ✘ Press for explanations for their behavior
- ✘ Make threats or dares



## **THE STUDENT IN POOR CONTACT WITH REALITY**

These students have difficulty distinguishing “fantasy” from reality. Their thinking is typically illogical, confused or irrational (e.g., speech patterns that jump from one topic to another with no meaningful connection); their emotional responses may be incongruent or inappropriate; and their behavior may be bizarre and disturbing. This student may experience hallucinations, often auditory, and may report hearing voices (e.g., someone is/will harm or controls them). **WHILE THIS STUDENT MAY ELICIT ALARM OR FEAR FROM OTHERS, THEY GENERALLY ARE NOT DANGEROUS OR VIOLENT.** If you cannot make sense of their conversation, try to consult with or refer to Counseling and Psychological Services as soon as possible.

### Helpful To:

- Respond with warmth and kindness  
Use firm reasoning
- Remove extra stimulation from the environment, (turn off the radio, step outside a noisy classroom)
- Acknowledge your concerns and verbalize they need help
- Acknowledge their feelings or fears without supporting the misperceptions (e.g., “I understand you think someone is following you, and it must seem real to you, but I don’t see anyone and I believe you are safe.”)
- Acknowledge your difficulty in understanding them and ask for clarification
- Focus on the “here and now”

### Not Helpful To:

- Argue or try to convince them of the irrationality of their thinking as this commonly produces a stronger defense of the false perception
- Play along! (e.g., “Oh, yes, I hear voices, devil, etc.”)
- Encourage further discussion of the delusional processes
- Demand, command, or order them to do something to change their perceptions
- Expect customary emotional responses

## **THE ANXIOUS STUDENT**

Anxiety is a normal response to a perceived danger or threat to one's well-being. For some students, the cause of their anxiety will be clear; but for others it is difficult to pinpoint the reason for distress. Regardless of the cause, one or more of the following symptoms may be experienced: rapid heart beat, chest pain or discomfort, dizziness, sweating, trembling or shaking, and cold clammy hands. The student may also complain of difficulty concentrating, always being "on edge," having difficulty making decisions, sleeping problems or being too fearful to take action. In rarer cases, a student may experience a panic attack in which the physical symptoms occur spontaneously and intensely in such a way that the student may fear she/he is dying. The following guidelines are appropriate in most cases.



### Helpful To:

- Let them discuss their feelings and thoughts. Often this alone relieves a great deal of pressure
- Provide reassurance
- Talk slowly and remain calm
- Be clear and directive
- Provide a safe and quiet environment until the symptoms subside

### Not Helpful To:

- Minimize the perceived threat to which the student is reacting
- Take responsibility for their emotional state
- Overwhelm them with information or ideas to "fix" their condition
- Become anxious or overwhelmed



## **THE STUDENT UNDER THE INFLUENCE**

Alcohol is the most widely used psychoactive drug. In addition to being the preferred drug on college campuses, it is common to find students who abuse alcohol also abusing other drugs, both prescription and illicit. Fads and peer pressure affect patterns of use. Forty-one percent of college students engage in binge drinking, which is defined as five drinks in a row (four for women).<sup>1</sup> Consuming alcohol in large quantities quickly can be lethal. Other adverse affects include: hangovers, hospitalization for alcohol overdose, poor academic performance, missing classes, injury, and unprotected sexual activity. Prevention strategies have not been very effective in reducing the amount of binge drinking due to its glamorization at fraternity parties and local bars which promote happy hours, all-you-can-drink specials, weeknight discounts, ladies' night, and penny or nickel drinks.

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 (e.g., drunk and disorderly conduct in class) or when a combination of the health and social impairments associated with alcohol abuse sabotages student performance. Because of the denial that exists in most substance abusers, it is important to express your concern about the student in terms of specific changes in behavior or performance (not your suspicions about alcohol/drugs).

### Helpful To:

- ✔ Confront the student with their behavior that is of concern
- ✔ Address the substance abuse issue if the student is open and willing
- ✔ Offer support and concern for the student's overall well-being
- ✔ Suggest that the student talk with someone about these issues and maintain contact with the student after a referral is made

### Not Helpful To:

- ✘ Convey judgment or criticism about the student's substance abuse
- ✘ Make allowances for the student's irresponsible behavior
- ✘ Ignore signs of intoxication in the classroom



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<sup>1</sup> In 1995, when last assessed here at HSU, 35% of students had binged in the last 12 days and 87% in the last year.

## **THE 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 a 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 unto others and will express anger indirectly. Many times they will feel worthless and inadequate.

### Helpful To:

- Send clear, consistent messages regarding what you are willing to do and what you expect
- Express compassion without being overly friendly or familiar
- Be aware of personal boundaries and space when interacting
- Be aware of your own anxiety about how the student is acting or communicating
- Let them know that you are concerned

### Not Helpful To:

- Be overly warm or sympathetically close to the student
- Flatter the student, laugh with them or be humorous
- Assure the student that you are their friend or advocate
- Assure them that you will be fair in your treatment of them

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