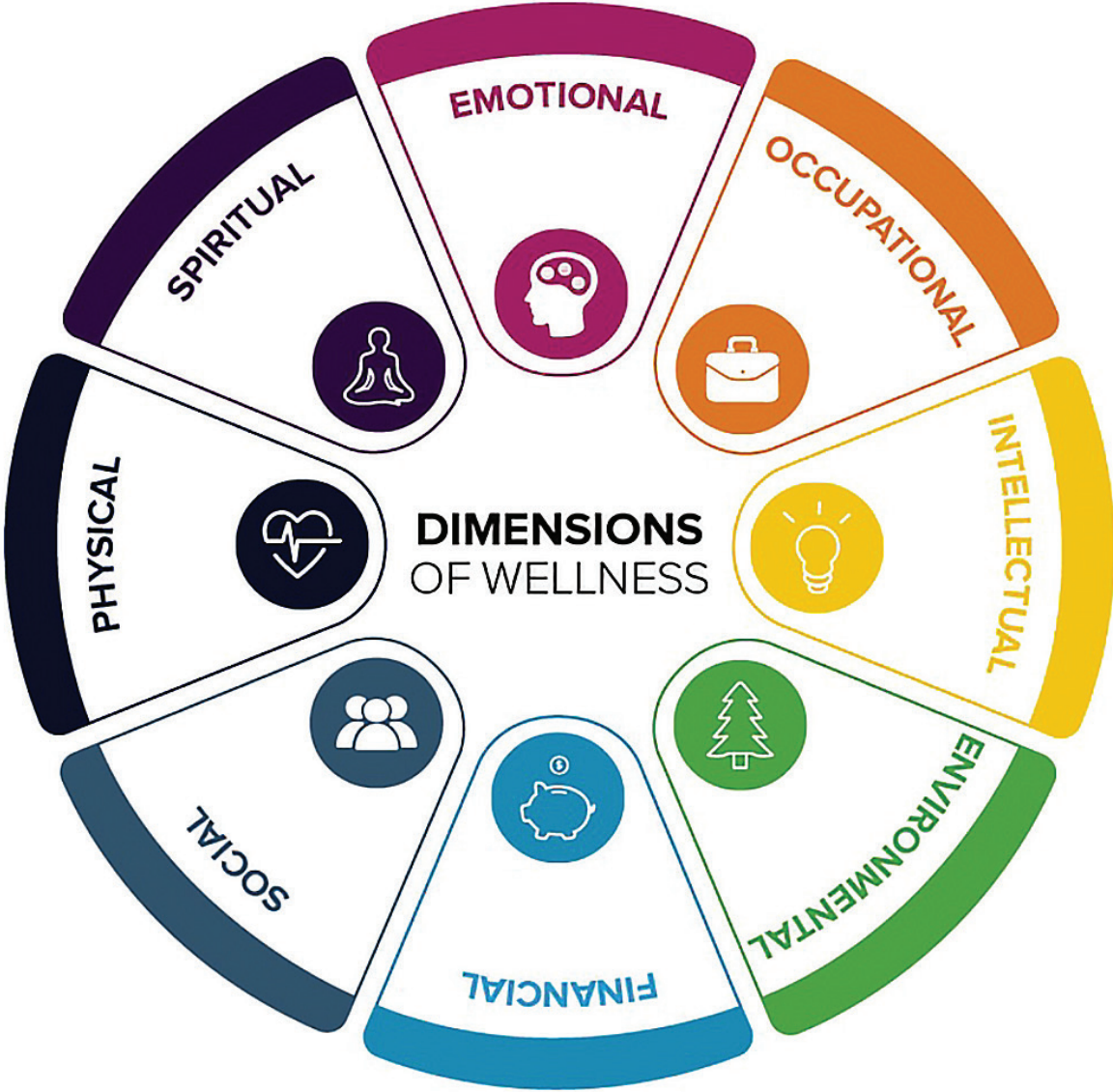


# Health and Wellbeing Resource Guide

FOR STAFF AND FACULTY  
SUPPORTING OUR STUDENTS





# ABOUT THE RESOURCE GUIDE

Welcome to the Oberlin College Student Health and Wellbeing Resource Guide. Oftentimes, college life requires a shift in priorities for our students, including their management of day-to-day health and well-being. This resource guide is intended to help staff and faculty support students who may be struggling emotionally or exhibit other concerning behavior.

Your ability to recognize the signs of emotional distress, and your courage to acknowledge your concerns directly to the student, are often reported by students as the most significant factor in their successful problem resolution. If you are not quite sure what to do, this guide can be helpful. You are also welcome to call [Student Support and Outreach](#) for a consultation whenever you are unsure of a situation.

## Behavior Terminology

Distinguishing between distressed, disruptive, and dangerous student behavior:

- *Distressed*: Behavior that causes us to feel alarmed, upset, or worried (most common).
- *Disruptive*: Behavior that interferes with or interrupts the education process of other students or the normal business functions of the college.
- *Dangerous*: Behavior that leaves us feeling frightened and in fear for our personal safety or the safety of others.
- *General Rule* — If it does not feel right, it is usually not right! (Trust your gut.) Signs of distress include:
  - Inability to concentrate
  - Confusion
  - Persistent worrying
  - Social isolation
  - Increased irritability
  - Bizarre behavior
  - Missed classes / assignments
  - Procrastination
  - Restlessness
  - Disheveled appearance
  - Mood swings
  - Indecisiveness
  - Depression



# GUIDELINES FOR INTERACTIONS

It is a good practice to openly acknowledge to students that you are aware of their 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 and honestly to a student when you sense that they are in academic and/or personal distress.

You may request to see the student in private. This may help minimize the embarrassment and defensiveness. The following steps may guide you as you meet with the student in private.

1. Very briefly, acknowledge your observations and perceptions of the situation and express your concerns directly and honestly.
2. Listen carefully to what is troubling the student and try to see the issues from their point of view without necessarily agreeing or disagreeing.
3. Attempt to identify the student's problem or concern, as well as your own concerns or uneasiness. You can help by exploring alternatives to deal with the problem.
4. Comment directly on what you have observed without interpreting or judging. Strange and inappropriate behavior should not be ignored.

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 it can be a gratifying experience when kept within realistic limits. If the burden becomes too heavy, however, you should refer to the [Student Support and Outreach](#) in a non emergency or [Counseling and Psychological Services](#) or have the student call Protocol at (855) 256-7160 after hours/weekends. We will provide direct intervention, and/or refer to an appropriate service.

It is not a FERPA/HIPAA violation to discuss health and safety issues, or observable behaviors with mental health professionals, when safety is at stake. Your support, encouragement (including referral), and reassurance will be particularly valuable to a student in crisis.



## URGENT REFERRAL

Some situations may arise that it becomes imperative to request the student be seen as soon as possible. If a student's situation is urgent, they will probably have concerns involving (but not limited to):

- Suicide/fear of losing control and possibly harming/hurting someone
- Sexual assault, physical assault or witness to an assault or accident
- Fear for their life or for the life of someone they know
- Abuse/recent death of a friend or family member
- Lack of contact with reality, very odd or disorganized behavior, student appears to respond to voices inside their heads, (psychotic symptoms—rare)

### — DO —

- Call or have the student call (440) 775-8470 during office hours or call Protocol (855) 256-7160 after hours /weekends.
- Inform the receptionist who you are (faculty, staff, or administrator)
- Identify the need for an urgent assessment (indicate if it is urgent) and ask to speak with a counselor.

A counselor will make a professional assessment of how quickly the student needs to be seen and appropriate action will be taken.

### When to Call Campus Safety (440) 775-8444

- When you believe that student or another person is in immediate danger
- When you believe that the student is about to harm self or others
- When you believe that the student is out of control and is disrupting the classroom



# 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 is clear, but for others it is difficult to pinpoint the source of stress. Regardless of the cause, the resulting symptoms experienced are similar and include rapid heart palpitations, chest pain or discomfort, dizziness, sweating, trembling or shaking, and cold, clammy hands. The student may also complain of difficulty concentrating, always being "on the edge," having difficulty making decisions, or being too fearful to take action. In more rare 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 they are dying.

**The following guidelines remain appropriate in most cases.**

## **— DO —**

- Let the student discuss their feelings and thoughts
- Often this alone relieves a great deal of pressure
- Provide reassurance
- Be clear and directive
- Provide a safe and quiet environment until the symptoms subside (when possible).

## **— DON'T —**

- Minimize the perceived threat to which the student is reacting
- Take responsibility for the student's emotional state
- Overwhelm the student with information or ideas to "fix" their condition.



# THE DEPRESSED STUDENT

Depression, and the variety of ways it manifests itself, is part of a natural emotional and physical response to life's situations. With the busy and demanding life of a college student, it is safe to assume that most students will experience periods of reactive 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 environments, that the student will come to your attention and be in need of assistance. Due to the opportunities that 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 those indicators.

- Tearfulness / general emotionality
- Dependency (a student who makes excessive requests for your time) or markedly diminished performance
- Lack of energy / motivation
- Infrequent class attendance
- Increased anxiety/test anxiety/performance anxiety
- Irritability
- Deterioration in personal hygiene
- Alcohol or drug use

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

## — DO —

- Let the student know you've noticed that they appear to be feeling down and you would like to help
- Reach out and encourage the student to discuss their feeling
- Offer options to further investigate and manage the symptoms of the depression (e.g., referral to [Student Support and Outreach](#) or [Counseling and Psychological Services](#), if you think it is urgent)

## — DON'T —

- Minimize the student's feelings, e.g., "Don't worry. 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 they might be



# The Suicidal Student

Suicide is the second leading cause of death among college students. It is important to view all suicidal comments as serious and make appropriate referrals. High-risk indicators include feelings of hopelessness, helplessness, and futility, a severe loss or threat of loss, detailed suicide plan, a history of a previous attempt, history of alcohol or drug abuse, feeling of alienation and isolation, and preoccupation with death.

## — DO —

- Take the student seriously — 80 % of deaths by suicide give warning of their intent
- Be direct--ask if the student is suicidal, if they have a plan, and if she/he has the means to carry out that plan.
- If a student is displaying suicidal behaviors, thoughts, ideation, and self-harming behaviors call the following for assistance:
  - [Counseling and Psychological Services](#) @ (440) 775-8470 or
  - Call Protocol after hours and weekends @ (855) 256-7160; or Suicide Nationwide Hotline @ 988
- Exploring this with the student may actually decrease the impulse to commit suicide
- Attempt to make sure the student actually gets some help. Take care of yourself. Suicide intervention is demanding and draining.

## — DON'T —

- Minimize the situation
- Be afraid of planting the idea of suicide in an already depressed mind by inquiring about it (they will very likely feel relieved that someone has suspected)
- Ignore your limitations





# THE VERBALLY AGGRESSIVE STUDENT

Students may become verbally abusive when they encounter frustrating situations that they believe are beyond their control. They can displace anger and frustration from those situations onto the nearest target. Explosive outbursts or ongoing belligerent, hostile behavior become this student's way of gaining power and control in an otherwise out-of-control experience. It is important to remember that the student is generally not angry with you personally, but is angry at their world and you are the object of pent-up frustrations. This behavior is often associated with the use of alcohol and other drugs.

## — DO —

- Acknowledge the student's anger and frustration, e.g., "I hear how angry you are"
- Rephrase what the student is saying and identify their emotion, e.g., "It appears you are upset because you feel your rights are being violated and nobody will listen"
- Reduce stimulation; invite the student to a quiet place if this is comfortable
- Allow student to tell you what is upsetting them
- Be directive and firm about the behaviors you will accept, e.g., "Please stand back; you're too close," and/or "I cannot listen to you when you yell and scream at me that way"
- Help the student problem-solve and deal with the area issues when they become calm, e.g., "I'm sorry you are so upset; I'd like to help if I can"
- Be honest and genuine; do not placate aggression
- Do not do this if you fear for your safety. In all instances, ensure that a staff or a faculty person is easily accessible to you in the event that the student behavior escalates

## — 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 explanations for their behavior
- Ignore the situation
- Touch the student, as this may be perceived as aggression or otherwise unwanted attention





# THE VIOLENT STUDENT

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. The adage, "An ounce of prevention is worth a pound of cure," best applies here.

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

## — 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 may be tempted to lash out"
- Explain clearly and directly what behaviors are acceptable, e.g., "You certainly have the right to be angry, but breaking things is not OK"
- Get necessary help (Notify [Campus Safety](#) @ 440-775-8444, or send a student to other staff, etc.)
- Stay safe: have easy access to a door; keep furniture between you and the student. Keep the door open if at all possible/appropriate. As with the verbally aggressive student, make certain that a staff or faculty person is nearby and accessible. In some instances, you may wish to see the student only with another person present
- Do not see the person alone if you fear for your safety

## — DON'T —

- Ignore warning signs that the person is about to explode, e.g., yelling, screaming, clenched fists, threats
- Threaten or corner student
- Touch the student



# FOR EMERGENCIES & NON-EMERGENCIES

## For an emergency call 911

## For suicide & crisis lifeline call 988

### Campus Safety

Dascomb Hall, Suite C  
140 W College St  
Oberlin, OH 44074  
(440) 775-8444  
24-hour Emergency line: (440) 775-8911  
[Campus.Safety@oberlin.edu](mailto:Campus.Safety@oberlin.edu)

### **Students who may need Counseling and Psychological Services**

Dascomb Hall, Suite B  
140 W College Street  
Oberlin, OH 44074  
(440) 775-8470  
[CAPS@oberlin.edu](mailto:CAPS@oberlin.edu)

### **Regular office hours:**

8:30 a.m. - 4:30 p.m. Monday to Wednesday  
8:30 a.m. - 7:00 p.m. Thursday  
8:30 a.m. - 4:30 p.m. Friday  
Walk-in hours: 11:00 a.m. - 12:00 p.m.

### **For Counseling support after-hours and weekends:**

Call Protocol (855) 256-7160

## For Non-Emergencies

### Student Health and Wellbeing

Dascomb Hall, Suite B  
140 W College Street,  
Oberlin, OH 44074  
(440) 775-5787 / 5638

### Student Health Promotion and Prevention Services

Dascomb Hall, Suite B  
140 W College Street,  
Oberlin, OH 44074  
(440) 775-8871

### Student Support and Outreach

Wider Hall 105  
(440) 775-8462  
[Fill out this form](#)  
[Scheduling an appointment here.](#)

### Counseling and Psychological Services

Dascomb Hall, Suite B  
140 W College Street  
Oberlin, OH 44074  
(440) 775-8470  
[CAPS@oberlin.edu](mailto:CAPS@oberlin.edu)

### Student Health Services

Dascomb Hall, Suite B  
140 W. College Street  
Oberlin.edu  
(440) 775-8180  
[student.health@oberlin.edu](mailto:student.health@oberlin.edu)