PREPARED BY:
Counseling Services
- Norco Building–2nd Floor: 1529 Belmont St., Boise, Idaho
- E-mail: healthservices@boisestate.edu
- Phone: (208) 426-1459

Resources for Responding to Individuals in Distress
Campus Referral & Intervention Guidelines

revised Spring 2019
# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Table of Contents</td>
<td>1</td>
</tr>
<tr>
<td>Message from Counseling Services</td>
<td>2-3</td>
</tr>
<tr>
<td>Campus Resources</td>
<td>4</td>
</tr>
<tr>
<td>Emergency Resources</td>
<td>5</td>
</tr>
<tr>
<td>Guidelines for Intervention</td>
<td>6</td>
</tr>
<tr>
<td>Consultation and Confidentiality</td>
<td>7</td>
</tr>
<tr>
<td>Referring Individuals for Counseling</td>
<td>8</td>
</tr>
<tr>
<td>The Depressed Individual</td>
<td>9</td>
</tr>
<tr>
<td>The Suicidal Individual</td>
<td>10</td>
</tr>
<tr>
<td>The Anxious Individual</td>
<td>11</td>
</tr>
<tr>
<td>The Individual Experiencing Panic Attack</td>
<td>12</td>
</tr>
<tr>
<td>The Individual Experiencing Food Insecurity</td>
<td>13</td>
</tr>
<tr>
<td>The Individual Who is Engaging in Self-Injury</td>
<td>14</td>
</tr>
<tr>
<td>The Bipolar Individual</td>
<td>15</td>
</tr>
<tr>
<td>The Individual in Poor Contact with Reality</td>
<td>16</td>
</tr>
<tr>
<td>The Disruptive Individual</td>
<td>17</td>
</tr>
<tr>
<td>The Individual Under the Influence</td>
<td>18</td>
</tr>
<tr>
<td>The Individual Who is a Victim of Stalking</td>
<td>19</td>
</tr>
<tr>
<td>The Individual Who is a Victim of Relationship Violence</td>
<td>20</td>
</tr>
<tr>
<td>The Individual Who is a Victim of Sexual Assault</td>
<td>21</td>
</tr>
<tr>
<td>The Aggressive Individual</td>
<td>22</td>
</tr>
<tr>
<td>The Individual Who Presents as Threatening</td>
<td>23</td>
</tr>
<tr>
<td>The Grieving Individual</td>
<td>24</td>
</tr>
<tr>
<td>Individual Preoccupied with Food, Exercise or Weight</td>
<td>25</td>
</tr>
<tr>
<td>Graduate Students (GradWell)</td>
<td>26</td>
</tr>
<tr>
<td>Online/Extended Studies Students</td>
<td>27</td>
</tr>
<tr>
<td>Contact Us</td>
<td>28</td>
</tr>
<tr>
<td>Notes</td>
<td>29-30</td>
</tr>
</tbody>
</table>
Message from Counseling Services
At Health Services every action taken, every service provided is driven by the principal goal of Creating America’s Healthiest Learning Environment here at Boise State University.

Boise State University is committed to creating a safe and healthy learning and living environment. An important step in fulfilling that commitment is attending to the mental health needs of students, faculty, and staff.

The campus community must take on a sense of ownership for how individuals are doing and, when appropriate, connect them to campus and/or community resources.

To the extent that we maintain the well-being of individuals, we nurture their academic, social, personal, and professional development and create a safe and healthy campus community.

Supporting each individual’s healthy development requires everyone’s participation. Participating not only promotes safety on campus, it also provides you with an opportunity to be a part of helping another person achieve his/her academic dreams, personal, and professional goals.

Campus Assessment, Resource, and Education (C.A.R.E.) Team
Living, learning, and working at Boise State University can be very stressful at times. All members of the university community, including students, faculty, and staff, will face challenges. As a result, some individuals may exhibit behavior that is concerning, disruptive, or threatening towards themselves or others. Boise State University has established the C.A.R.E. Team to provide assistance to the campus community in addressing these behaviors of concern.

If you are concerned about an individual on campus, go to the C.A.R.E. website at care.boisestate.edu where you can fill out an online form to bring someone to the attention of the team.
To Administration, Faculty and Staff,

We would like to acknowledge the many administrators, faculty, and staff across campus who contributed to the development of the intervention guidelines in this handbook. Your suggestions and input are highly valued and appreciated.

The Reaching Out Handbook has been created for the purpose of providing you with information about Counseling Services, about other campus resources, and how to most effectively assist individuals in distress.

Our goal is to help you recognize some of the symptoms of individual distress, as well as provide some specific options for intervention and for referral to campus resources. We are available to assist you with problem situations and to consult with you on whether to intervene with a particular individual and when to refer.

Guidelines are offered but each individual will need to consider what is appropriate in a given situation. Basic topics covered in this manual include; identifying individuals in distress, ways of dealing with these individuals, and how to refer them for counseling. Dealing with the reluctant individual, scheduling an appointment with Counseling Services, and confidentiality issues are also discussed. A list of campus referral resources, including Counseling Services, is listed at the beginning of this guide.

Counseling Services offers short-term individual, multi-person and group counseling, consultation, and crisis intervention. Insurance plans can be billed and self-pay is available for counseling services. No individual will be turned away for inability to pay. If it is determined that an individual requires resources beyond what we can offer, we will do our best to provide a referral to an appropriate mental health provider in the community.

Counseling Services is staffed by licensed professional counselors, psychologists, social workers, and graduate counseling and social work trainees, all trained to handle a variety of mental health concerns. We appreciate referrals and will do our best to have an individual seen as soon as possible. Please do not hesitate to call if we can help you address the needs of any individual. We are here to help!
Counseling Services (208) 426-1459
healthservices.boisestate.edu/counseling
Located in the Norco Building, 2nd Floor, behind the Recreation Center between Belmont Street and Beacon Avenue.

Hours:
8 a.m.-5 p.m. Monday, Tuesday, Thursday, and Friday.
10 a.m.-5 p.m. Wednesdays
- Insurance plans can be billed, and self-pay is available for Counseling Services. No individual will be turned away for their inability to pay.
- Crisis intervention services are available Monday through Friday during our hours of operation.
- Individuals needing to talk to someone trained in crisis intervention after hours can call the Suicide Hotline:
  IDAHO: 1-800-564-2120
  NATIONAL: 800-273-TALK (8255)

Medical Services (208) 426-1459
healthservices.boisestate.edu/medical

Wellness Services (208) 426-1459
healthservices.boisestate.edu/wellness

Additional Resources:
- Vice President for Student Affairs, vpsa.boisestate.edu | (208) 426-2384
- Educational Access Center, eac.boisestate.edu | (208) 426-1583
- Veterans Services, veterans.boisestate.edu | (208) 426-3744
- Dean of Students, deanofstudents.boisestate.edu | (208) 426-1527
  - Faculty guide on behavior in the classroom: deanofstudents.boisestate.edu/guide
- TRIO Student Success Program, education.boisestate.edu/ssp | (208) 426-3583
- Gender Equity Center, genderequity.boisestate.edu | (208) 426-4259
- Career Center & BroncoJobs, career.boisestate.edu | (208) 426-1747
- Advising & Academic Enhancement, aae.boisestate.edu | (208) 426-4049
- Center for Teaching & Learning, ctl.boisestate.edu | (208) 426-4610
- ASBSU Student Legal Services, deanofstudents.boisestate.edu | (208) 426-1527
- Multicultural Student Services, mss.boisestate.edu | (208) 426-5950
- International Student Services, iss.boisestate.edu | (208) 426-3652
Boise Police —————————————————— 911

Campus Security and Police (available 24 hours) ———— (208) 426-6911

Counseling Services ————————————————— (208) 426-1459

Family Advocacy Center & Education Services (FACES) ———— (208) 577-4400
A comprehensive service site in Boise that provides specialized response for sexual and relationship violence and child abuse. Provides 24-hour response for sexual assault, including forensic examinations and law enforcement response. Located at 417 S. 6th Street, Boise.

Medical Services ————————————————— (208) 426-1459

Mobile Crisis Unit (choose option #2 - 24 hr line) ———— (208) 334-0808
They work closely with the police in mental health cases. A useful resource for phone consultation, but not a good option if there is imminent danger as response time for on-site visit may be slow.

Suicide Prevention Hotline ———————————— 800-273-TALK (8255)

Women’s and Children’s Alliance ———————————— (208) 343-3688
Offers emergency shelter, advocacy, and specialized counseling.

Domestic Violence Hotline ———————————— (208) 343-7025

Sexual Assault Hotline ———————————— (208) 345-7273

Boise State Gender Equity Center ———————— (208) 426-4259
Offers crisis response, advocacy, coordination of campus and community resources, and emotional support.

Valley Crisis Center (Nampa) ———————— (208) 465-5011
You can have a profound effect on an individual when you openly acknowledge that you are aware of their distress, are sincerely concerned about their welfare, and are willing to help them explore options. Whenever possible, we encourage you to speak directly and honestly to an individual if you sense academic or personal distress.

1. Request to see the individual in private. This should help minimize embarrassment and defensiveness. Show respect for the individual.

2. Briefly share your observations and perceptions of the individual’s situation. Express your concerns directly and honestly.

3. Listen carefully. Try to see the issues from the individual’s point of view without agreeing or disagreeing.

4. Attempt to identify the problem. Is the individual connected with any ongoing resources? You can help by exploring options to deal with the concern.

5. Acknowledge inappropriate or strange behavior. Comment on what you observe without sounding judgmental. (i.e. using I statements such as, “I have noticed...”)

6. Involve yourself only as far as you are comfortable, and then refer the individual to the appropriate resources. As you attempt to reach out to a troubled individual, do not become more involved than your time or skill permits.
Consultation

If you are unsure how to handle a specific individual, contact Counseling Services at (208) 426-1459, identify yourself, and ask to speak with the Triage/Crisis Counselor. If the Triage/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. **If an individual is already receiving counseling services, he or she must give written permission for us to disclose confidential information.**

Conveying your concern and willingness to help is perhaps the most important thing you can do. Your support, encouragement, and reassurance will be particularly helpful to an individual in distress.

If you feel that the individual needs immediate attention, the individual is willing to cooperate and it is before 5 p.m., you may walk him or her to the Counseling Services office. If it is after hours and you believe this to be a mental health emergency, call Campus Security and Police, (208) 426-6911, and/or 911. Individuals may also access supportive services at the Gender Equity Center, for issues related to sexual and relationship violence and/or stalking, and gender identity and sexual orientation.

Confidentiality

The staff at Counseling Services strictly complies with legal and ethical obligations. We cannot discuss a client’s situation or even reveal that counseling is being received without the client’s written consent. Sometimes the individual who made the referral will call to follow up. Please understand we cannot disclose to you if an individual has made an appointment or any information in regards to the individual without his/her written consent. Most individuals appreciate the referral and are quite willing to provide some feedback on the counseling contact. If you wish to follow-up on someone you have referred, please ask the individual to provide us with written permission to speak with you. If you do not hear from us, it is likely permission has been denied. However, while we can’t share information without an individual’s permission, we are open to receiving information you have about an individual that you think would be helpful.
In many instances you may be the right person at the right time to make an intervention that brings about an improved situation for the individual. They may seek you out because they trust your judgment and support, and timely help in problem solving may be just what is needed. However, if the individual’s concerns are chronic or severe or oversteps your limits of expertise, a referral to Counseling Services, or to another, appropriate support service may be in order. Explain your concerns to the individual and say why you think assistance would be helpful. By having individuals call for a counseling appointment, you increase their sense of responsibility. However, offering to help the individual schedule an appointment as a gesture of support may be useful. It is extremely helpful if you give Counseling Services a “heads up” on what to expect. There are times when it is more advantageous for you to make an appointment with the individual and accompany him or her to the appropriate office.

If an Individual is Reluctant to Seek Professional Help

• Acknowledge and validate the individual’s fears and concerns about seeking help.
• Normalize the process of seeking help and suggest Counseling Services as a possible resource.
• Reluctant individuals might be relieved to know they can speak to a counselor on a one-time basis without making a commitment to a series of sessions.
• Reassure the individual any information shared will be kept confidential and will not be disclosed to parents, faculty, or university departments (unless the individual is at risk of harm to him/herself or others).

If the individual remains reluctant to seek help and there is continued concern for their safety, consult with your department head and the Counseling Services staff. If they are an immediate/imminent risk, call Campus Security and Police Services at (208) 426-6911 and/or 911. You can also file a C.A.R.E. report at care.boisestate.edu where you can fill out an online form to bring an individual to the attention of the team.

Urgent Concerns that indicate need for Immediate Intervention

• Suicidal statements, gestures, intent, or plan
• Recent abuse (victim or self abuse)
• Recent death of a loved one
• Thinking about harming someone else
• Physical assault
• Stalking (whether in person or electronically)
• Sexual assault
• Verbal or implied threats to one’s well-being
• Fear of losing control
Depression is part of a natural emotional and physical response to life’s ups and downs. It is safe to assume most individuals will experience periods of situational depression. An individual needs assistance when the depressive symptoms become extreme or last so long that they begin interfering with the individual’s ability to function in school, work, or social environments. Patterns/signs of Depression may include:

- Tearfulness or excessive emotions inappropriate to the situation
- Noticeable performance issues
- Infrequent class attendance
- Increased anxiety (generalized, test, or performance)
- Irritability
- Deterioration in personal hygiene
- Significant weight gain or loss
- Lack of energy or motivation
- Alcohol or drug use

Individuals experiencing mild depression often respond well to additional attention over a short period of time. Prompt intervention increases the individual’s chances of returning to earlier performance levels. Do not attempt to provide in-depth counseling.

**helpful actions**

- Let the individual know you are aware he or she is feeling down and you would like to provide support and assistance.
- Do not hesitate to ask the individual directly if he or she is having suicidal thoughts.
- Encourage the individual to make an appointment with a professional counselor to discuss how he or she is feeling.

**unhelpful actions**

- Minimizing the individual’s feelings, (“Everything will be better tomorrow”).
- Bombarding the individual with fix-it solutions or advice.
- Trying to solve the individual’s problems.
- Ignoring signs of suicidal tendencies.
The Suicidal Individual

It is important to take all suicidal comments seriously. Watching for some of the following behaviors will offer clues on the individual’s frame of mind. **If an individual exhibits any of the symptoms below, refer him or her to Counseling Services immediately.**

- Withdrawal from friends and family
- Expression of extreme hopelessness or guilt
- Sudden mood or behavior changes
- Giving possessions away
- Comments that life isn’t worth the trouble
- Recurrent thoughts or statements about suicide

**Helpful Actions**

- Be confident, caring, and prepared to provide information about available individual resources.

- If you have an intuition that something is wrong with the individual, call Counseling Services for consultation with professional staff.

- If you believe there is imminent danger, and the individual is willing, bring him or her to Counseling Services. Call first if possible, (208) 426-1459.

- If it is after hours and the individual is cooperative, call a friend, family member, or Campus Security and Police at (208) 426-6911 or 911.

- If it is after hours or the individual is uncooperative, call Campus Security and Police Services at (208) 426-6911 or 911.

**Unhelpful Actions**

- Becoming involved with the individual beyond your levels of expertise or comfort.

- Ignoring comments such as, “I won’t be a problem much longer,” or “nothing matters; it’s no use.”

- Being too busy to intervene.

- **Counseling Services offers a training called Question, Persuade, Refer (QPR)**
  Gatekeeper training for those who may work with suicidal individuals. Please contact Counseling Services for more information.

- **National Suicide Prevention Hotline:** 1-800-273-TALK (8255)

- **Submit a Care Report at:** care.boisestate.edu
Anxiety is a normal response to an unsettling situation and/or a perceived danger or threat to one’s well-being. While most people suffer from occasional anxiety, sometimes the level of anxiety can become overwhelming. For some, the cause of anxiety is clear; for others, it is difficult to pinpoint the reason for their distress. Regardless of the cause, the individual may experience some of the following symptoms:

- Difficulty concentrating
- Feeling “on edge”
- Having difficulty making decisions
- Experiencing sleeping problems
- Feeling unable to complete work
- Being too afraid to take action
- Rapid heartbeat
- Chest pain or discomfort
- Dizziness
- Sweating
- Trembling
- Shaking

Individuals may experience physical symptoms that can be spontaneous and intense or anxiety that increases overtime. The following guidelines are appropriate in most cases:

**helpful actions**

- Let the individual discuss his or her feelings and thoughts in an appropriate setting; this alone often relieves a great deal of pressure.
- Provide reassurance.
- Be clear and directive.
- Talk slowly and remain calm.
- Discern whether you are able to respond adequately to the individual’s concerns or if a referral is necessary.
- Provide a safe and quiet environment until the symptoms subside.
- If appropriate, develop a plan with the individual for academic and/or work issues within the classroom and/or work environment. Make appropriate referrals if needed.

**unhelpful actions**

- Minimizing the perceived threat to which the individual is reacting.
- Taking responsibility for the individual’s emotional state.
- Becoming anxious or overwhelmed yourself.
A panic attack is the abrupt onset of intense fear or discomfort that reaches a peak within minutes and includes at least four of the following symptoms:

- Heart palpitations; pounding heart/accelerated heart rate
- Excessive sweating
- Trembling/shaking
- Shortness of breath
- Feelings of choking
- Chest pain/discomfort
- Nausea/abdominal distress
- Feeling dizzy/unsteady/light-headed
- Chills or heat sensations
- Numbness or tingling sensations
- Feelings of unreality or feeling detached from oneself
- Fear of losing control
- Fear of dying

** Panic attacks differ from anxiety symptoms. Panic attacks are suddenly and extremely intense in nature, without an obvious immediate triggering stimulus. Anxiety symptoms generally intensify over a period of time, and are highly correlated to excessive worry about some potential “danger”.

### helpful actions

- Stay with the person and keep calm.
- Move the person to a quiet place.
- Speak to the person in short, simple sentences.
- Help slow the person’s breathing by breathing with him/her or by counting slowly to 10.
- Discern whether you are able to respond adequately to the person experiencing the panic attack or if a referral is necessary. If a referral is necessary, while the person of concern is present, contact Counseling Services (208) 426-1529 and/or Campus Security (208) 426-6911.

### unhelpful actions

- Minimizing the perceived threat to which the individual is reacting.
- Taking responsibility for the individual’s emotional state.
- Overreacting to the situation by becoming anxious or overwhelmed yourself.
Individuals who experience food insecurity struggle to meet their basic nutritional needs commonly due to financial barriers. An individual experiencing food insecurity may struggle to know where they will get their next meal or how they will pay for food.

Food insecurity is a serious problem that affects many different areas of life. An individual that cannot meet their nutritional needs may experience difficulty concentrating, fatigue, dizziness, and other health complications. In addition to health consequences, an individual may also experience shame or symptoms of depression and/or anxiety. A decline in academic performance is also highly correlated to these symptoms.

### Helpful Actions

- Speak to the individual in private and offer support and concern for their well-being.

- Listen without conveying judgement.

- Be aware of food resources available both on campus (see below) and in the community. Make appropriate referrals.

- Encourage the individual to make an appointment with the Dean of Students to explore resources available and/or Boise State Health Services to address underlying concerns.

### Unhelpful Actions

- Ignoring the concern.

- Blaming the individual.

- Making judgements or demanding an explanation as to why someone is struggling with food insecurity.

- Telling others about the situation, except for the professionals who can offer adequate support.

### Resources to Consider:

- The campus food pantry is located in the Dean of Students office.  
  deanofstudents.boisestate.edu/basic-needs
- facebook.com/horsesbitstudentpantry/

### Community Resources:

- selfrescuemanual.com
- livebetteridaho.org
- healthandwelfare.idaho.gov/foodcashassistance
Self-injury is any damage intentionally caused to one’s own body. This behavior is also referred to as self-harm or self-mutilation. Self-harming behaviors can occur more often among females and/or individuals who have experienced trauma, physical, emotional, or sexual abuse. Even though there is always the possibility a self-inflicted injury could be fatal, self-injury is not considered to represent a suicide attempt. Self-injury usually occurs when people feel overwhelmed by their emotions and are desperate to find relief from intense feelings, pressure, or anxiety. Self-injurious behavior can leave scars resulting in permanent damage. **Common methods of injuring oneself include (but are not limited to) the following behaviors:**

- Cutting
- Burning (or “branding” with hot objects)
- Picking at skin or re-opening wounds
- Hair-pulling (trichotillomania)
- Head-banging

### helpful actions

- Speak honestly to the individual about your concerns and describe specifically what you have observed that makes you suspect they have been engaging in self-injury.
- Encourage the individual to make an appointment with Counseling Services to help her/him to address the distress that is compelling the behavior.
- If the individual is hesitant to make an appointment for herself/himself, offer to call for them, and/or consult with a counselor in Counseling Services.

### unhelpful actions

- Responding with shock, horror, or disgust to the self-injurious behavior.
- Ignoring the behavior and the possibility of serious physical damage.
- Becoming overly involved with the individual beyond your level of expertise.
Bipolar disorder is a type of mental illness that involves a disorder of affect or mood. The individual’s mood can fluctuate between periods of high mood or irritability (mania) to periods of feeling sad and hopeless (depression), with periods of stable mood in between. Bipolar disorder usually begins in late adolescence, often appearing as depression during teen years. **Signs of bipolar disorder include:**

**The Highs:**
- Increased energy, activity, restlessness
- Racing thoughts, rapid speech
- Abuse of drugs or alcohol
- Decreased need for sleep
- Reckless behavior such as spending sprees, erratic driving, irrational decisions
- Extreme irritability and distractibility
- Excessive “high” or euphoric feelings
- Increased energy, activity, restlessness
- Racing thoughts, rapid speech
- Abuse of drugs or alcohol

**The Lows:**
- Inability to sleep or oversleeping
- Persistent sad and/or anxious mood
- Feelings of hopelessness or pessimism
- Loss of interest or pleasure in activities
- Decreased energy, fatigue
- Inability to concentrate, make decisions

**helpful actions**
- Speak directly to the individual about your concerns and be concrete in describing the behavior that concerns you.
- Encourage the individual to make an appointment with a counselor at Counseling Services to explore what might be causing her/his distress.
- If the individual is not in a state to be reasoned with (manic, distorted thinking, psychotic), contact Counseling Services to consult on how best to proceed to help the individual.

**unhelpful actions**
- Minimizing the seriousness of the individual’s presenting behavior.
- Making demands that the individual see a professional (he or she may be feeling great and not realize anything is wrong).
- Becoming involved with the individual beyond your level of expertise.
- Ignoring signs of suicidal tendencies.
Some individuals have difficulty distinguishing their thoughts and perceptions 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 out of control, and their behavior may appear bizarre and disturbing. The individual may experience hallucinations and may report hearing voices or seeing things that are not really there (e.g., statements that someone is threatening to harm or control them). If you cannot make sense of an individual's statements, contact Counseling Services as soon as possible.

**helpful actions**

- Respond with warmth, kindness, and firm reasoning.
- Remove extra stimulation from the environment (turn off the radio, step outside of a noisy classroom).
- Explain your concerns and assist the individual in getting help. Contact Counseling Services as soon as possible.
- Acknowledge the individual's feelings or fears without supporting the misperception (“I understand you think someone is following you, and it must seem real to you, but I don't see anyone”).
- Acknowledge that you are having difficulty understanding the individual and ask for clarification.
- Focus on the here and now. File a CARE Report at care.boisestate.edu
- Try to walk the individual to Counseling Services or encourage the individual make an appointment with a professional counselor.

**unhelpful actions**

- Arguing or trying to convince the individual of the irrationality of his or her thinking, as this commonly reinforces the false perception.
- Encouraging further discussion of the delusional processes or playing along with the individual's delusion (“Oh, yes, I hear voices, too”).
- Demanding, commanding, or ordering the individual to do something to change his or her perceptions.
- Expecting customary emotional responses.
College instructors and employers often experience individuals who are chronically late, who talk to friends during class, who eat or sleep in class, and who engage in arguments with instructors or other individuals. Although disruptive behaviors have annoying or disrespectful qualities, these behaviors may be due to underlying emotional distress. Each type of disruptive behavior requires a different set of responses by the university. Rebellious and escalating disruptions need to be addressed behaviorally through disciplinary action, whereas disruptive behavior precipitated by emotional distress may require consultation with counseling staff.

**helpful actions**

- Invite the individual to speak in a private area (if you feel safe). Acknowledge the emotions if the individual seems upset, angry, or frustrated, “I notice you seem frustrated.”

- Briefly state your concern, “I am concerned that you have been late for class every day since the beginning of semester.”

- Let the individual talk, ask for clarification if necessary. “I am not sure what you mean by it ‘not getting through.’ Could you tell me more?”

- Focus on the behavior and clearly state the expectations and that the consequences of continued disruption may result in disciplinary action, “If you continue to disrupt the class by coming in late and greeting your friends, I will have to report this to the department chair and you may be removed from my class.”

- If unsure how to proceed in a particular situation, consult with your department head, the Dean of Students Office, (208) 426-1527, and/or Counseling Services staff, (208) 426-1459. You can also submit at Care Report at care.boisestate.edu

**unhelpful actions**

- Becoming defensive or getting into an argument or shouting match.

- Acting hostile or punitive. “I’m going to have you thrown out of this class!”
Alcohol is the most widely used psychoactive drug and a preferred drug on college campuses. Fads and peer pressure affect patterns of use. Binge drinking, defined as five drinks in a row for men, and four for women, is popular and can quickly become lethal. **Other adverse effects of alcohol consumption include:**

- Hangovers,
- Hospitalization for alcohol overdose
- Poor academic performance
- Class absences, injury
- Risky sexual activity

Alcohol is the most common drug used by sexual predators to incapacitate victims and perpetrate sexual assault.

Substance abuse problems are often recognized when an individual’s 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 or drug abuse sabotages individual performance. It is common to find that individuals who abuse alcohol are also abusing other drugs, both prescription and illegal.

Be aware that substance abuse may result in overly aggressive behavior. In such cases, remain calm and get help if necessary (send an individual for a staff person, faculty member, department chair, or security officer). Stay safe by retaining access to a door, knowing whom to call (Campus Security and Police, (208) 426-6911, for emergencies call 911.), and keeping furniture (e.g., a desk) between you and the individual. Do not threaten, corner, or touch the individual.

### helpful actions

- Privately confront the individual if you feel safe about the specific, observed behavior that concerns you.
- Offer support and concern for his or her well-being.
- Suggest the individual talk with someone about these issues and maintain contact with the individual after a referral is made.
- If the behavior continues, consult with your department head and the Dean of Students Office (208) 426-1527.

### unhelpful actions

- Conveying judgment or criticism of the individual’s substance abuse.
- Making allowances for the individual’s irresponsible behavior.
- Ignoring signs of intoxication in the classroom.
THE INDIVIDUAL WHO IS A VICTIM OF STALKING

Stalking is any behavior that would make a reasonable person feel threatened, intimidated, annoyed, or afraid. A stalker may start with small, annoying, persistent actions and progress to criminal behavior. These individuals may be people you do not know but are more likely to be someone you do know. Some examples of stalking behaviors are:

- Trying to start or keep a relationship that the other person does not want
- Threatening the person or the safety of someone close to the person
- Becoming physically aggressive with the person
- Unwanted repeated calls, e-mails, texts or letters
- Following the person

**helpful actions**

- Encourage the individual to not deal with this potentially dangerous situation by her or himself. Validate them for confiding in you about the situation. Encourage the individual to contact a trusted friend or family member immediately.

- Advise the individual to stay alert, pay attention to the stalker, and to themselves. Never ignore the first signs of stalking. Do they have a strange feeling about someone? Trust your instincts.

- Suggest the individual consider talking to Campus Security and Police, (208) 426-6911, who can assist you with documentation and confronting a stalker.

- Impress upon the individual the importance to document thoroughly. Write down all of the stalker’s behavior in detail. Keep answering machine tapes, letters, e-mails, text messages, gifts, photos, etc.

- Advise the individual to consider talking to the Boise State Title IX coordinator (208) 426-1258, The Gender Equity Center (208)-426 4259 and/or Counseling Services (208) 426-1459

**unhelpful actions**

- Minimizing the potential danger of the situation.

- Discounting the individual’s concerns and anxiety.

- Ignoring the problem.
Relationship violence is a term used to describe abuse within a relationship that is psychological, emotional, sexual, or physical. Abusive behaviors may include: physical abuse, verbal abuse, name calling, sexual violence, isolation, coercion, harassment, economic control, abusing trust, threats and intimidation, emotional withholding, destruction of property, or self-destructive behavior. Relationship violence is recognized under legal and university systems.

Victims may not report this crime for a number of reasons, including:

- Fear of retaliation or increased abuse
- Isolation from support systems
- Diminished sense of self-worth
- Economic inability
- Commitment to the relationship
- Self-blame
- Hope that the abuser will change
- Threats made to the victim, children, or pets

An individual who is the victim of relationship violence may experience a number of academic or work challenges, such as:

- Inability to concentrate
- Emotional, physical, or mental trauma
- Physical harm
- Abuser preventing the individual from attending class or completing course work

### helpful actions

- Listen to and believe the individual.
- Understand the seriousness of all forms of abuse.
- Respect the individual’s right to make their own decisions.
- Help the individual to identify resources such as the Gender Equity Center, Counseling Services, Health Services, the police, the Women’s and Children’s Alliance, and FACES.
- Offer to accompany her/him to a place of support.
- Let the individual know the importance of creating a safety plan.
- Let the individual know that if the abuser has threatened harm to another person, you may need to report this to Campus Security and Police.

### unhelpful actions

- Minimizing abuse that is not physical. All forms of abuse can be traumatic.
- Blaming the individual for staying in the relationship. The dynamics of relationship violence are complex and the victim is NEVER at fault for the abuser’s behaviors.
- Giving advice or pressuring for decisions - the individual knows the dynamics of the abusive relationship best and she/he will know what feels safe.
- Criticizing the abuser instead of the abuser’s behavior - this may cause defensiveness in the individual.
Sexual assault is sexual contact by an individual/s against another without consent. The law defines consent as positive cooperation in act or attitude pursuant to an exercise of free will. Consent may not be inferred from silence, passivity, or inebriation. A current or previous relationship (including marriage) does not constitute consent.

Sexual assaults are predominately committed by men against women. However, men can be assaulted by women. Same-sex assaults do occur as well. The majorities of assaults (90%) are committed by an acquaintance of the victim and may involve the use of alcohol by one or both individuals. Incidents of sexual assault are against the law and university policy.

There are many emotional and psychological reactions that victims of rape and/or sexual assault can experience. One of the most common of these is depression. Additionally, survivors of sexual assault may experience severe feelings of anxiety, stress or fear; they may also experience Acute Stress or Post Traumatic Stress Disorder (PTSD) as a direct result of the assault.

<table>
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<th>helpful actions</th>
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<tr>
<td>• When possible, speak to the person in private. Be aware that when a person discloses information about an assault to you, she/he is demonstrating trust in you and the desire for help.</td>
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<td>• Listen without conveying judgment. Victims can feel shame and anger towards themselves.</td>
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<td>• Offer emotional support, understanding, patience, and encouragement. Respect the individual’s right to make decisions that are helpful in maintaining privacy, keeping safe and obtaining support.</td>
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<tr>
<td>• Refer the individual to Campus Security and Police Services (208) 426-6911, if the person wants to make a police report. If they are under the influence of alcohol and/or other drugs, please encourage them to call the police without fear of punishment.</td>
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<tr>
<td>• Refer the individual to the Counseling Services (208) 426-1459 and/or Gender Equity Center (208)426-4259. They can also speak to a Title IX coordinator at (208) 426-1258.</td>
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<tr>
<td>• Minimizing the situation.</td>
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<td>• Telling other individuals about the incident, except for those who need to know. Conveying negative judgment even when high-risk behavior, such as intoxication, is involved.</td>
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<tr>
<td>• Delaying referring the individual to a sexual harassment advisor, or other supportive professional or services.</td>
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<td>• Putting extra pressure on the individual to make a police report.</td>
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Individuals can become aggressive in situations they perceive as beyond their control. Sometimes feelings of anger are displaced from the situation onto the nearest target (i.e., you).

If an individual becomes violent, remain calm and get help. Do not deal with this individual alone (send another individual for a staff member, faculty member, department chair, or security/police officer). Stay safe by retaining access to an exit door, knowing whom to call (if not an emergency call Campus Security and Police Services, (208) 426-6911, for emergencies call 911), and keeping distance between you and the individual. Do not threaten, corner, or touch the individual.

Take all threats of violence seriously. Clarify what is meant by asking, “What do you mean by that?” or saying, “I am taking your words very seriously.” Call Campus Security and Police Services for consultation; inform your supervisor or department head of the situation.

### Helpful Actions

- Pay attention to the warning signs (e.g., body language, clenched fists).
- Acknowledge the individual’s anger and frustration, (“I hear how angry you are”). Rephrase what he or she is saying and identify the emotion, (“I can hear how upset you are, and you feel like nobody will listen”).
- Do not place yourself in harm’s way. Call for assistance.
- Be straightforward and firm about the types of behavior you will not accept (“I need for you to step back.”).
- If the situation appears to be escalating leave the situation and call Campus Security and Police Services at (208) 426-6911 or 911.
- Debrief the incident with your supervisor or department chair.
- If you become desperate and are convinced you will be harmed if you don’t cooperate, say whatever you need to in order to escape to safety, even if you don’t mean it, (e.g., “Okay, I guess I can see your point and will give you a passing grade.”). Call Campus Security and Police Services at (208) 426-6911 immediately after.

### Unhelpful Actions

- Becoming defensive or getting into an argument or shouting match.
- Pressing for an explanation of their behavior.
- Acting hostile or punitive (“I’m going to give you an F in this class.”).
THE INDIVIDUAL WHO PRESENTS AS THREATENING

All encounters have the potential for escalation into violence, and escalation tends to have predictable, and identifiable, behaviors. If you ever feel unsafe or threatened call Campus Security and Police Services, (208) 426-6911 or call 911 for assistance. There are two forms of violence:

**Impromptu Violence** - Spontaneous, unplanned, usually emotionally driven, violent outburst in reaction to circumstances of an event. (Example: receiving a perceived unjustified failing grade in a class)

**Intended Violence** - Planned, premeditated attack on a specific target. (Example: stalking a former relationship partner with intent to harm)

**IMPORTANT OBSERVATIONS:**

a) If you know the person, reflect on all levels of functioning - any mental impairment, head injury, alcohol use? These compromise impulse control.
b) Do you observe signs of agitation: foot tapping, pacing, facial contortions, etc.
c) Trust your gut - if the situation feels dangerous, leave it or get help ASAP.
d) If there is any physical aggression - throwing something, punching walls - call Campus Security and Police Services, (208) 426-6911 or call 911.

**ADDRESSING THE CONFLICT:**

1) **Personal Space:** Resist urge to get close and stay far enough back that they can’t reach you. Stay close to an exit and do not back into a corner. Once they are calm, it may be okay to move to closer range.

2) **Body Language:** Assume a non-threatening stance. Use moderation with eye contact.

3) **Communication:** Keep voice tone calm, even, and volume low. Give more information. Identify behaviors you are observing and the consequences if they continue.

4) **Setting Limits:** Redirect back to task. If incident is public say, “I can see you are really upset. Can we go down the hall/step into this room, and talk about it?” Do not talk to an individual who is threatening alone. It may be necessary to have another individual assist with the situation. Empathize, yet be firm..... “I understand this doesn’t make sense to you.” Don’t make threats or tell them you’ll have them arrested. You can say, “If you don’t calm down, I will call the police.” Ask them to step back if in your space.

*Call Campus Security and Police Services at (208) 426-6911 for assistance if needed*
THE GRIEVING INDIVIDUAL

When someone suffers a loss, it may disrupt their sense of the order of things and can sometimes lead to feelings that life is out of control and meaningless. Deaths may be accidental, may be sudden, or may be the result of a long illness. Feelings are often compounded by a sense of shock and a longing for the opportunity to “say goodbye.” The loss of meaning and control adds distress to grief. Regaining meaning and a sense of control may help individuals endure the grieving process. Those experiencing grief tend to function better within an already established support system. Grief is a natural process but may become complicated (e.g., the person may become depressed and not able to function), and therefore the individual may need some type of intervention.

If you are aware that someone is grieving or has experienced a loss, she/he may be experiencing some of the common grief reactions. These reactions to loss may include:

- Physical Reactions
- Cognitive Reactions
- Emotional Reactions
- Fatigue/exhaustion
- Difficulty concentrating
- Guilt
- Sleep disturbance

helpful actions

- Listen carefully. This can help an individual gain an understanding of her/his feelings and clarify options for dealing with them.
- Encourage the individual to utilize their social support system.
- Be aware that family may be urging the individual to stay at school or at work, even though the individual longs to be at home (particularly with the death or imminent death of a parent).
- Encourage the individual to talk with someone. Refer the individual to Counseling Services (208) 426-1459. If the individual appears in immediate or imminent danger call Campus Security and Police Services (208) 426-6911.

unhelpful actions

- Do not force the individual to discuss the loss.
- Minimizing the loss or suggesting the individual must just move forward.
- Judging the individual’s response to death.
Preoccupation with food, exercise or weight is a sign of an eating disorder which is a complex condition that can often arise from a variety of causes including body image issues, self-esteem struggles, trauma, and mental illness. Preoccupation with food, exercise or weight can be a constant, deep seeded, and often frustrating concern for many individuals, and at the same time be the only coping strategy an individual feels they have.

**Some concerning signs to watch for include:**
- Rigid exercise or food rituals
- Fixation on dieting
- Purging – vomiting after eating
- Binging – consumption of excessive amounts of food in a short period of time
- Unusual interest or obsessive thinking/talking about food, exercise, weight, or body image
- Avoidance of food or social situations that include food
- Recent rapid weight loss of 14 or more pounds in a three month period
- A person believing they are fat when others consider them to be too thin

### helpful actions

- Speak to the individual about your specific concerns and behaviors you have observed.
- Let the person know that you and others care about them unconditionally.
- Thank them for trusting you enough to talk about their struggle.
- Encourage the individual to make an appointment with a health care professional.
  - “There are people who are trained and understand what you are going through. Can I help refer you?”

### unhelpful actions

- Although often well meaning, it is not helpful to give advice or simple solutions (“if you’d just stop everything would be fine”)
- In an attempt to promote a neutral relationship with food or weight, do not make comments about the individuals weight loss or food consumption (“I wish I was as skinny as you”, “You’re so much better at staying away from treats than I am”)
- Do not ignore the problem, hoping it will just go away.
When assisting a graduate student, it is important to understand there are often factors associated with the graduate school experience that influence their mental wellness. The two most influential considerations are whether or not they perceive a supportive relationship with their advisor or mentor and whether or not they are able to create work-life balance.

Additional factors that impact their mental wellness are:
- Current financial concerns
- Uncertain academic progression
- Overwhelming experiences of competitiveness
- Reduced sleep
- Reduced physical health
- Difficulty developing and maintaining social connectedness
- Concerns for future employment prospect

Many graduate students have concerns about professional and academic consequences for seeking help and may be less likely to discuss their concerns with peers and colleagues.

### helpful actions

Faculty and staff should foster an environment that reduces stigma, encourages conversation, and promotes help-seeking behaviors for students.

- Share your own personal struggles / failures. This can help normalize a person’s difficult experience without invalidating their emotions, while also modeling that it is ok to discuss such topics.

- Help the student to explore hobbies and activities unrelated to their course of study. Taking advantage of Boise’s vibrant community with remarkable opportunities for adventure will help promote balance.

- Encourage the student to talk to a peer, seek advice from a trusted mentor, or set an appointment with a mental health counselor on campus.

- Keep referral and education materials on hand and appropriately educate students about available mental health resources such as the GradWell program and Health Services.

### Resources to Consider:
- [boisestate.edu/graduatecollege-success](http://boisestate.edu/graduatecollege-success) | (208) 426-3604
- [healthservices.boisestate.edu/counseling](http://healthservices.boisestate.edu/counseling) | (208) 426-1459
Boise State students who are enrolled in online/extended studies programs may also experience symptoms of depression, relating anxiety, and all other concerns highlighted in the Reaching Out Handbook. These students are not on campus and may not have access to campus resources to assist them with managing and balancing course work, life stressors, and employment. Students who are involved in online or extended studies programs may also be employed full time, and/or have families and additional responsibilities to many of the on-campus students.

Factors that can negatively impact these students’ mental wellness are:
- Current financial concerns
- Uncertain academic progression
- Issues relating to work-life balance
- Reduced sleep
- Reduced physical health
- Concerns for future employment prospects
- Isolation from Boise State University campus and student resources

Online/Extended Studies students who do not reside in Idaho are not eligible for Counseling Services as it is currently illegal to provide mental health therapy across state lines, and in a state where the clinician is not licensed. Distance from campus and other pertinent resources may be a barrier for the Online/Extended Studies student seeking care they might need to maintain their mental wellness.

helpful actions

- Let the individual know that although they may be not be close in proximity to campus that they are valued and you would like to support them.
- Be prepared to ask the individual directly if they are having suicidal thoughts or have made plans to end their life.
- Encourage individual to make an appointment with a professional counselor to discuss how he or she is feeling.

unhelpful actions

- Ignoring warning signs of suicide “It won’t matter soon” etc.
- Being too busy to reach out to a student you are concerned about.
- Becoming involved with the individual beyond your levels of expertise or comfort.

Resources to Consider:
- healthservices.boisestate.edu/resources-for-online-distant-students
- Submitting a CARE report at: care/boisestate.edu
HEALTH SERVICES CONTACT INFORMATION

Counseling Services
(208) 426-1459
healthservices.boisestate.edu/counseling

Medical Services
(208) 426-1459
healthservices.boisestate.edu/medical

Wellness Services
(208) 426-1459
healthservices.boisestate.edu/wellness

E-mail
Health Services: healthservices@boisestate.edu