

#### CALL 24-HOURS A DAY: 951-UCR-TALK (827-8255)

COUNSELING.UCR.EDU

#### RESOURCES

# Suicide is the 2nd leading cause of death in college-age students.

It is especially important that faculty, staff and bystanders are aware of what can be done to prevent suicide. Get familiar with the signs of a distressed student who is experiencing suicidal ideation. Discover ways to help, like when and how to make effective referrals for additional help.

# If someone is in immediate danger of self-harm, call campus police (9-1-1). IN CRISIS?

Stay calm and try to keep the person in need of help calm, as well. Find someone to stay with them while calls are being made. Notify a staff member or faculty member.

If you feel the person in crisis may be a direct threat to themself or others - or, may act in a disruptive, bizarre, or highly irrational way, please call:

UC Riverside Police (UCPD) (24/7) 9-1-1 • 951-827-5222 For transportation and/or protection.

## FOR NON-EMERGENCY **CONSULTATION/TREATMENT**

**Counseling and Psychological Services (CAPS)** Health Services Building, North Wing 951-UCR-TALK or 951-827-5531

- For walk-in or phone consultation, evaluation, treatment, and referral.
- CAPS can provide resources, referrals, and immediate support for urgent mental health concerns by phone or in person at the CAPS office.
- After hours speak to a mental health counselor by phone 951-827-5531 or 951-UCR-TALK.

#### Student Affairs Case Managers (SACM)

# 951-827-5000 or 951-827-9354

- casemanagement.ucr.edu
- For on-campus resources, like referrals, linkage to resources, problem-solving, and advocacy.
- · Campus Connect Training: Suicide awareness and intervention training

# **UCR** Counseling and Psychological Services

## CONTACT US

#### LOCATION

UCR Counseling and Psychological Services Health Service Building, North Wing Riverside, CA 92521

OFFICE HOURS (closed daily, 12–1 p.m.) **M, T, W & F:** 8 a.m. – 5 p.m. **TH:** 9 a.m. – 5 p.m.

WALK-IN CONSULTATIONS (closed daily, 12–1 p.m.) **M**, **T**, **W** & **F**: 8:30 a.m. – 4:30 p.m. **TH:** 9 a.m. – 4:30 p.m.

SPEAK TO A COUNSELOR 24/7 951-UCR-TALK (827-8255)

MAKE AN APPOINTMENT (Appointment line is only active during office hours.) 951-827-5531

## COUNSELING.UCR.EDU

24/7 CRITICAL RESOURCES RIVERSIDE HELPLINE | 800-686-HELP (686-4357)

NATIONAL SUICIDE HOTLINE | 800-SUICIDE (784-2433)

THE TREVOR PROJECT | 866-488-7386

TRANS LIFELINE | 877-565-8860 (7-1 a.m. PST) • translifeline.org

> **CRISIS TEXT LINE** crisistextline.org

How It Works: Text "Home" to 741-741 at any time, and from anywhere in the US, to chat with a trained crisis counselor.



# Supporting Students in Distress: Advice for Faculty, **Staff and Bystanders**

Help students in distress by identifying and understanding the signs — and then connecting them with the appropriate resources.

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**UCR** Counseling and Psychological Services

# UCR's Counseling and



HOPE



Psychological Services (CAPS) is committed to the mental health of the campus community. In this brochure, we offer information about how to support students in distress and connect you to the appropriate resources that may be helpful. CAPS would like to extend our support and encourage the campus community to make use of our services.



REMEMBER

### SYMPTOMS + SIGNS

A suicidal person will often present multiple clues in these four areas:

- Environmental: prolonged stress, traumatic experiences, loss, or difficult life transitions.
- Depressive: changes in usual behavior. inability to concentrate, socially withdrawn, easily agitated, crying, sense of worthlessness, sadness, or sleep changes or difficulty sleeping.
- Verbal: direct or indirect threats, verbally or through written materials (e.g., assignments, papers, etc.)

• Behavioral: giving away possessions, writing suicide note, acquiring means

and personal matters, suddenly

to commit suicide, organizing business

resigning from organizations or clubs.







# **RECOGNIZING TROUBLED STUDENTS**

If a student exhibits either of these two levels of distress over a period of time, that can be a good indicator of problems that are more serious than the "normal" problems healthy students typically experience.

#### 1. Ambiguously Dangerous Behaviors

Ambiguous changes in a student's behavior might be indications of struggles with more serious problems, like depression or suicide. Look out for:

- Unaccountable change from good to poor performance.
- Change from frequent attendance to excessive absences.
- Change in pattern of interaction.
- Marked change in physical appearance, mood, motor activity, or speech.
- Repeated request for special consideration.
- Behavior which pushes the limits and interferes with class.
- Unusual or exaggerated emotional response.

#### 2. Imminently Dangerous Behaviors + Critical Problems

These behaviors usually indicate that the student is in crisis and needs emergency care:

- Highly disruptive behavior (hostility, aggression, etc.).
- Inability to communicate clearly (garbled/slurred speech, disjointed thoughts).
- Loss of contact with reality (paranoia and delusion).
- Overt suicidal thoughts and gestures.
- Homicidal threats.

# HOW TO HELP

Be mindful when meeting with distressed students:

- Talk to the student in private, when possible.
- Express your concerns clearly, specifically and without judgement.
- Listen to the student and repeat their points.
- Clarify the pros/cons of each solution option from the student's perspective.
- Respect the student's value system.
- Ask if the student is having suicidal thoughts.
- Make appropriate referrals.
- Request support from your higher-ups.
- Make sure the student understands what action is necessary.
- Consult with a mental health professional at CAPS or SACM.



#### **Responding to Ambiguously Dangerous Behaviors:** DO:

- Display genuine concern and an interest to help.
- Listen attentively and empathize.
- Reassure that with help, they will recover.
- Stay close until help is available, or risk has passed.

#### DON'T:

- Challenge the student or become argumentative.
- Analyze the student's motives or minimize their distress.
- React negatively at what the student shares.

#### **Responding to Imminently Dangerous Behaviors:**

- Stay calm and call 911.
- Call other emergency referrals in this pamphlet.
- Inform your supervisor or department head.

# MAKING REFERRALS

Consider these questions:

- What resources are appropriate and available for the student?
- With whom would the student feel most comfortable?
- Who will make the initial contact, you or the student?

#### When discussing referrals with the student:

- Assure them that many students seek help.
- Be transparent about the limits of your time, ability, expertise, and/or objectivity.
- Suggest assistance from an additional source.
- Provide options and assist them in choosing the best resource.
- Inform them of what to expect.

If you are concerned about a student, please call/accompany the student to the Counseling and Psychological Services (CAPS) office or call the Student Affairs Case Management (SACM) office. Both departments can help by: 1. Assessing the seriousness of the situation.





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#### Suggest they contact other resources listed in this brochure, if you are experiencing any of these with a student who has asked for help:

- You are uncomfortable handling the situation.
- The necessary help is not your expertise.
- Personality differences interfere with your ability to help.
- You know the student personally and think you may not be objective enough to help.
- The student is reluctant to further discuss the situation.
- You see little progress in the student.
- You feel overwhelmed or pressed for time.

#### CONSULATIONS

- 2. Suggesting potential resources.
- **3.** Finding the best way to make a referral.
- **4.** Clarifying your feelings about the student situation.

#### TRAINING

Visit mentalhealth.ucr.edu for training or additional resources, like the "Red Folder" or the "Promoting Student Mental Health Guide."

# **UCR** Counseling and Psychological Services