RECOGNIZING SIGNS OF CONCERNING AND CRITICAL SITUATIONS

This guide is intended to help you when working with a student in distress. Some of the indicators listed below may be considered “normal” behaviors for students. If you do see a pattern or a sudden outburst of intensity of behaviors that are out-of-character and cause you concern, this guide will assist you in what to do and who to contact to help the student. For additional information, refer to the UNI “Prevention and Response to Critical Incidents” handbook at safety.uni.edu.

Behavioral and Psychological Indicators

- Sudden or dramatic improvement in mood and/or giving away valued items
- Isolation/Withdrawal or expressions of concern about the student by their peers
- Tearfulness, anxiety, irritability, angry outbursts, or verbal abuse (e.g. taunting, badgering, intimidation) or unusual apathy
- Intense emotions, out-of-character responses, or disjointed thoughts
- Hyperactivity or very rapid speech
- Social media posts indicating distress
- Self-disclosure of any personal distress; family problems, relationship difficulties, financial difficulties, depression, or grief

Academic Indicators

- Marked changes in academic performance and being unresponsive to repeated communication regarding the need for improvement; a decline in quality of work and grades.
- Excessive absences or attendance patterns that are out-of-character
- Repeated requests for special consideration which is out-of-character for the student
- Disturbing content in writing or presentations (e.g. violence, death)
- Continuous disruptive classroom behavior

Physical Indicators

- Marked changes in physical appearance, especially deterioration in grooming and hygiene, or weight loss or gain
- Excessive fatigue/sleep disturbance
- Intoxication, hangovers, or smelling of alcohol/marijuana
- Disoriented or “out of it”
- Out-of-character or atypical clothing choices for the weather (e.g. long sleeves in summer in attempt to cover bruising or cuts)

WHAT TO DO FOR A STUDENT SHOWING SIGNS OF DISTRESS

Ask, Listen, and Support

- Speak with the student privately using a calm and non-confrontational tone. Make sure you have enough uninterrupted time to talk with the student. Trust your instincts. Ask open-ended questions about how the student is doing or say “Tell me what is happening.”
- Explain what you have heard or observed that causes you concern. Say “I’m concerned about...” or “I’ve noticed that...” Be specific about the behavior that worries you.
- Listen respectfully with an open mind and without judgment. Ask questions within reason to help understand the situation. See back of page for a list of referrals/resources. Acknowledge thoughts and feelings. Validate the difficult circumstances or feelings expressed and convey your concern for the student’s well-being. Offer help by saying “It sounds like you’re feeling... I can connect you with a resource on campus for help.”

Refer

- Encourage help-seeking as a sign of strength. Recommend the student speak with a person on campus who is trained to help. Remember to offer after hours and 24-hour support service options as well.
- Involve the student in making the referral. Offer to make the call or visit an on-campus resource together.
- Should the student be reluctant to accept the referral, you may consider saying “I respect your decision. I hope you will keep this option in mind.”
- If the student is not willing to connect with a resource and you are still concerned, consider taking one of the following steps:
  - Dean of Students - call 319-273-2332 or complete Seeking Student Assistance form online at deanofstudents.uni.edu. Dean of Students staff will reach out to provide support to the student and will follow up with you.
  - Counseling Center – call 319-273-2676. Information shared regarding the concern will not go beyond that office.
- Helping students in distress can be difficult and stressful. Should you yourself need someone to speak with, you can utilize the Employee Assistance Program (EAP) option by calling 800-327-4692 to schedule an appointment.

Follow-up

- Continue to be supportive and inquire periodically about how the student is doing.
- Please remember that confidentiality limits the Counseling Center, Student Health Clinic, and Student Wellness Services from providing information about a student without the student’s written consent.
- If the student’s situation persists, attempt to ask, listen, and support the student again, followed by making another referral.
### WHERE TO MAKE A REFERRAL

<table>
<thead>
<tr>
<th>CRISIS SERVICES</th>
<th>DESCRIPTION OF SERVICE</th>
<th>HOW TO ACCESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dean of Students</td>
<td>First point of contact for students, faculty and staff to share your concerns about the student except in case of an emergency situation. If you are unsure of what resource to refer to, the Dean of Students staff will ensure the student is referred to the needed resource(s) e.g. one or more of the services listed below.</td>
<td>Call 319-273-2332 or complete online form “Seeking Student Assistance” at deanofstudents.uni.edu</td>
</tr>
<tr>
<td>Counseling Center*</td>
<td>Individual, couples, or group counseling, crisis counseling, support groups, and workshops.</td>
<td>Call 319-273-2676 (after business hours, press option 2 to speak with a crisis counselor). counseling uni.edu</td>
</tr>
<tr>
<td>Crisis Text Line*</td>
<td>Student can text a counselor who will respond via text to provide student crisis support and refer to additional resource if needed. Service is free, 24/7, and confidential.</td>
<td>Text HELP to 741741 <a href="http://www.crisistextline.org">www.crisistextline.org</a></td>
</tr>
<tr>
<td>National Suicide Prevention Lifeline*</td>
<td>The Lifeline provides 24/7, free and confidential support, prevention, and crisis resources for people in distress.</td>
<td>1-800-273-TALK (8255) <a href="http://www.suicidepreventionlifeline.org">www.suicidepreventionlifeline.org</a></td>
</tr>
<tr>
<td>Riverview Center*</td>
<td>Riverview Center is a non-profit agency committed to providing compassionate, client-centered care for individuals affected by sexual assault, and provides a 24-hour hotline, support group counseling, medical and legal advocacy, and prevention education.</td>
<td>1-888-557-0310 <a href="http://www.riverviewcenter.org">www.riverviewcenter.org</a></td>
</tr>
<tr>
<td>Iowa Victim Service Call Center*</td>
<td>Iowa Victim Service Call Center is a 24 hour free and confidential resource that assists victims of any violent crime including but not limited to: sexual assault, domestic violence, stalking, child abuse, homicide, etc.</td>
<td>1-800-770-1650 Text iowahelp 20121</td>
</tr>
<tr>
<td>Waypoint Services*</td>
<td>Services relate to domestic violence and include advocacy, a 24/7 resource and support line, emergency safety planning, individual counseling, support groups, referrals, and information.</td>
<td>1-800-208-0388 <a href="http://www.waypointservices.org">www.waypointservices.org</a></td>
</tr>
<tr>
<td>Veterans Crisis Line*</td>
<td>The Veterans Crisis Line connects Veterans in crisis and their families and friends with qualified, caring Department of Veterans Affairs responders through a confidential toll-free hotline, online chat, or text.</td>
<td>1-800-273-8255 Text E38255 <a href="http://www.veteranscrisisline.net">www.veteranscrisisline.net</a></td>
</tr>
<tr>
<td>TrevorLifeline*</td>
<td>Trained counselors will provide support 24/7 for young people in crisis, feeling suicidal, or in need of a safe and judgment-free place to talk.</td>
<td>1-866-488-7386 <a href="http://www.thetrevorproject.org">www.thetrevorproject.org</a></td>
</tr>
<tr>
<td>Trans Lifeline*</td>
<td>Trans Lifeline is dedicated to the well being of transgender people. It is a hotline staffed by transgender people for transgender people. Trans Lifeline volunteers are ready to respond to whatever support needs members of the trans community might have.</td>
<td>1-877-566-8860 <a href="http://www.translifeline.org">www.translifeline.org</a></td>
</tr>
<tr>
<td>UNI Title IX Officer**</td>
<td>UNI encourages those who have experienced any form of sexual harassment or assault to report the incident to the University Title IX Officer or any of the designated Title IX Deputy Coordinators. You may also file separate criminal charges by contacting UNI Police at 319-273-2712.</td>
<td>319-273-2846 Title IX Deputy Coordinator 319-273-2586 safety.uni.edu</td>
</tr>
</tbody>
</table>

*Services offered 24-hour support

### RECOGNIZING SIGNS OF DISRUPTIVE, URGENT OR DANGEROUS SITUATIONS

#### Safety Risk Indicators
- Disruptive behavior such as the following, but not limited to: unprovoked anger or hostility, aggressive/combative behavior, or verbally/physically threatening.
- Making implied or direct threats to harm self or others.
- Documented academic assignments and activities dominated by themes of extreme hopelessness, rage, worthlessness, isolation, despair, acting out, suicidal ideation or violent behaviors.
- Evidence of abuse of alcohol and/or other drugs.
- Unresponsive to de-escalation attempts.
- Immediate safety concern related to suicidal thoughts or behaviors.
- Behavior with high risk of harm to self and/or others.
- Violent or destructive behavior.
- Medical emergency, including drug or alcohol poisoning.

#### What to Do for a Disruptive Student in Distress
- Ensure your safety and the safety of others in the environment.
- Use a calm, non-confrontational approach to defuse/de-escalate the situation.
- Set limits by explaining how the behavior is disruptive.
- If the disruptive behavior persists, ask the student to leave or remove yourself.
- Call the Dean of Students 319-273-2332 to report concerns related to student behavior which are not urgent/dangerous.

#### Where to Report Urgent / Dangerous Situations
- **Call UNI Police** 319-273-2712 to report immediate safety concerns.
- **Call 911** in the case of medical, fire, and other large scale emergencies.

---

This flyer was developed in part under a grant number 1H79SM080059-01 from the Substance Abuse and Mental Health Services Administration (SAMSHA), U.S. Department of Health and Human Services (HHS). The views, policies, and opinions expressed are those of the authors and do not necessarily reflect those of SAMSHA or HHS.