



UChicago Student Wellness

Supporting Student Well-Being
- Core Humanities

Student Counseling

August 24, 2020

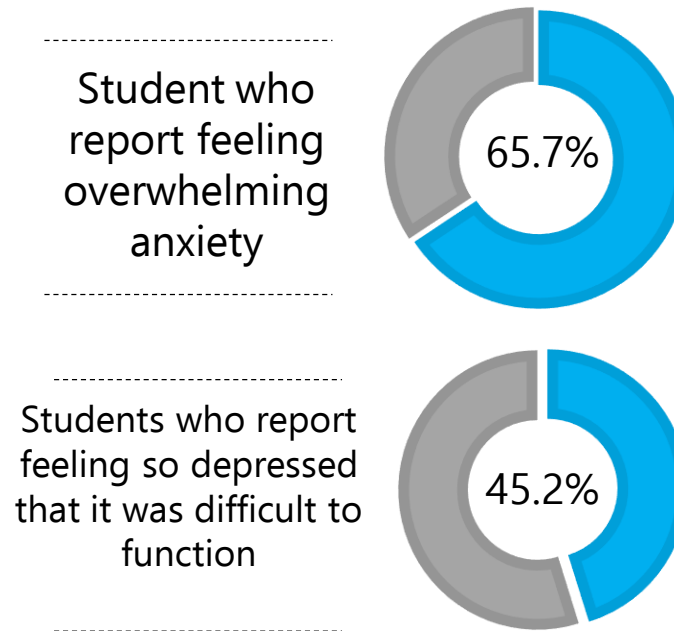
Overview

- Mental health of college students and the Covid context
- Identifying mental health distress
- Strategies for support and intervention
- Identifying mental health crises
- Referrals
- Crisis intervention
- Consulting with SC
- Student counseling virtual services

National context: mental health and university students

- National data sets show:
 - Half of students report feeling stressed
 - 14% of college students experience suicidal thoughts; 1-2% attempt suicide
- Three quarters of lifetime mental illnesses have first onset by mid-20s
- ~40% of those with a diagnosable condition do not seek help

2019 National College Health Assessment*



*Students self-reporting feeling this way in the past 12 months.
Source: American College Health Association – National College Health Assessment IIb (undergraduate and graduate students); www.acha.org

Covid Context: Mental Health Implications

Students report:

- Anxiety, depressed mood
- Loneliness, isolation, boredom, and feeling “trapped”
- Screen fatigue
- Increased substance use
- Disordered eating
- Traumatic stress reactions
- Complicated grief and bereavement
- Exacerbation of pre-existing mental health concerns

How to know if a student is experiencing mental health distress?

- Patterns – low level persistent stress that is not getting better or is starting interfere with functioning
- Changes – sudden and/or dramatic changes in mood, behavior, functioning
- Self report – student is sharing they are struggling or distressed
- Your intuition

Indicators of students in distress

Academic red flags

- Deterioration of quality of work.
- Missed assignments or appointments.
- Repeated absences from class, clinicals, or labs.
- Continued seeking of unusual accommodations (late papers, extensions, postponed exams, etc.).
- Essays or papers that have themes of hopelessness, social isolation, rage or despair.
- Lack of engagement in participation-oriented classes or with lab mates.
- Inappropriate disruptions or monopolizing classroom time.

Indicators of students in distress

Physical or Psychological red flags

- Deterioration in physical presence or hygiene.
- Excessive fatigue or sleep difficulties.
- Visible increase or decrease in weight.
- Exaggerated personality traits or behaviors (agitation, withdrawal, lack of apparent emotion).
- Excessive use of alcohol or other drugs.
- Unprovoked anger or hostility.
- Irritability, constant anxiety or tearfulness.
- Marked changes in concentration and motivation.
- Overtly suicidal thoughts, such as referring to suicide as a current option.

Other factors to consider

- Direct statements indicating family problems, personal losses such as death of a family member, or break up of a relationship.
- Expressions of concern about a student by peers.
- Written note or verbal statement that has a sense of hopelessness or finality.
- Your sense, however vague, that something is seriously amiss.

Cultural Issues to consider

- Experience and expression of distress can be culturally informed
- May not know what counseling is and how it can be helpful
- Shame/stigma in seeking help
- Concern regarding confidentiality

STRATEGIES FOR SUPPORT AND INTERVENTION

- **Set up a time to talk to the student in private**
- **Ask/Invite open-ended clarifying questions** to help you understand the student better:
 - “Tell me more.”
 - “What do you mean by...”
 - “I notice you seem stressed, withdrawn, upset...I would like to understand how you are doing.”
- **Follow-Up Via Text/Email**
 - “I’ve been thinking about you. How are you doing?”
 - “I was thinking about our conversation the other day and just wanted to check in.”

STRATEGIES FOR SUPPORT AND INTERVENTION

- **Be attentive to the student**
 - Remove distractions, resist multitasking, switch off other devices.
 - Make them feel they are important.
- Phone and Zoom communication:
 - Speak calmly and slowly.
 - Make eye contact (Zoom)
 - Project warmth. Your feelings of genuine caring will come through.
 - Handling silences – Let student know you are thinking or ask if they have more to share.

STRATEGIES FOR SUPPORT AND INTERVENTION

- **Listen and validate**

- *Keep the spotlight on the speaker.*
- “I am sorry to hear you are going through a rough time.”
- “This must be very frustrating.”
- “I can only imagine what you must be going through.”

- Acknowledge and validate emotions
- Normalize reactions
- Paraphrase back what you are hearing
- Let people talk, don't jump in too quickly
- Refrain from giving advice or problem solving too quickly

STRATEGIES FOR SUPPORT AND INTERVENTION

- **If you feel concerned, express it:**
 - “I feel concerned about you.”
 - “I feel concerned about your well-being.”
 - “I would like to make sure you get the help you need.”
 - “I would like to work with you to help you get to a better place.”

STRATEGIES FOR SUPPORT AND INTERVENTION

- **Explore Options**

- “What would feel helpful right now?”
- “How can I be most helpful to you?”
- “Have you thought of possible alternatives?”
- “Have you considered getting some help and support?”

- Foster and enhance natural resilience
- Enable people to do what they can for themselves
- Facts and information can be calming
- Be honest and transparent
- Refer to professionals –
 - “I am here to support you, but a professional may be able to provide you with the kind of help you need.”

Referring student to Student counseling

- Most successful referrals are a collaborative decision-making process.

We're here.

**Health and wellness services
remain available during Autumn Quarter**

Making a referral

- Do not do when student is so upset and/or confused that they cannot understand or listen.
- Explain why you think it is beneficial to speak to someone.
- Ask if they have ever seen someone professionally and how helpful was it.
- Talk personally about the referral (confidential, free, professional, counselor preferences, your experience).
- Offer to call together.
- Follow up.

Strategies for a successful referral

- Show that you care, but discuss limitations of your role and expertise. EX: "I can continue to support you but I think a clinician at Student Counseling can effectively help you with the problems you are having."
- Be specific about why you are referring them. Ex: "Student Counseling has clinicians who are really good at helping students address relationship problems." Rather than, "why don't you seek help with Student Counseling."
- Offer to call or facilitate the connection with Student Counseling. "Would it be ok if we called Student Counseling together?"
- Make a plan to follow-up. Following up with a student demonstrates your commitment to them. "Is it ok with you if we check-in on Monday to see how your meeting went."

How to refer a reluctant student to Student Counseling

There may be important reasons why a student is reluctant:

“Can you tell me a bit more what may be getting in the way”

“Tell me about your thoughts/perceptions/experience with Student Counseling or other mental health professionals.”

Explore alternatives:

“Are there other ways you can feel supported or helped”

Normalize help seeking:

“Many students seek help for various reasons. No issue is too big or small.”

Listen and express concern:

“I feel concerned about you”

Call Student Counseling if you are worried about the well-being or safety of the student.

Referring reluctant students to student counseling

- There may be important reasons why a student is reluctant:
 - “Can you tell me a bit more what may be getting in the way?”
 - “Tell me about your thoughts/perceptions/experience with Student Counseling or other mental health professionals.”
- Explore alternatives:
 - “Are there other ways you can feel supported or helped?”
- Normalize help seeking:
 - “Many students seek help for various reasons. No issue is too big or small.”

Referring reluctant students to student counseling

- Provide timely and accurate information:
 - “Student Counseling has been working hard to enhance access to students. There has not been a wait for an initial routine appointment the past many months. Give it a try. You can also access a clinician on the phone 24/7.”
 - “Students seek help from Student Counseling for an array of concerns. Many have suicidal thoughts and serious issues. Students are not automatically sent to the hospital. That is only for rare instances when a student’s risk of self harm is so great that higher level care is needed to ensure their safety.”
- For students who have tried Student Counseling but did not have a good experience:
 - “I understand this may not have been a good experience for you. However, you can always try a different counselor. The fit is really important in therapy. Give them a call and ask for a different counselor this time. I would also encourage you to provide feedback to them. They are always interested in hearing from students.”

Referring reluctant students to student counseling

- Listen and express concern:
 - "I feel concerned about you."
- Call Student Counseling for a consultation if you are worried about the well-being or safety of the student.

Signs of Crises

- Suicidal statements
- Previous suicide attempts
- Homicidal threats or attempts
- Extreme emotions (uncontrolled rage, panic symptoms)
- Inability to communicate (garbled speech, incoherent)
- Loss of contact with reality (seeing/hearing things not there, bizarre troubling beliefs)
- Experience of trauma (injury, rape)
- Impaired judgment, impulsive or aggressive tendencies
- Easy access to lethal methods

CRISIS INTERVENTION



THERAPIST-ON-CALL
773.702.3625

Talk with a clinician by phone, 24/7,
to share concerns and determine next
steps for support.

- It's ok to ask a student if they are thinking/planning to hurt themselves or someone else.
- Express concern for the safety of the student and encourage problem solving to get immediate help.
 - Give students 2-3 options for immediate help.
 - Ask student to call Student Counseling phone support.
 - Can the student reach out to a trusted support?
 - Develop an immediate plan and reach out for support.
 - Send a clear message: "you are not alone"

"I feel very concerned about your safety and well-being right now. I would like us to get some professional input on next steps. There are trained professionals available who may be able to help. How about you call SCS phone support line right now?"

Introduction to student counseling

- SC staff is highly trained and diverse group with various identities and specialties. We are committed to providing multicultural counseling that is inclusive and strives to support our diverse student community.
- We offer assessment and treatment for a range of mental health concerns.
- Our staff comprises of Psychologists, Social Workers, Psychiatrists, Psychiatric Nurse Practitioners, Advanced Trainees.
- Our staff works collaboratively with you to develop the care that best fits each student's unique needs.

Virtual services through student counseling



Short-Term
Individual &
Couples Therapy



Group Therapy



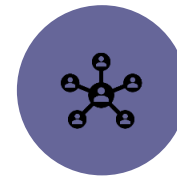
Long-Term
Psychiatric
Services



Referral
Services/Case
Management



Virtual Let's Talk



Virtual
Workshops



Consultation &
Campus
Partnerships



Crisis
Emergency
Consultations



24/7 Mental
Health Support

Virtual specialty services

- Alcohol/Drug Use Assessment and Intervention
- Multidisciplinary Eating Concerns (EC) Treatment Team
- Academic Skills Assessment and Support (ASAP)
- Sexual Trauma Treatment Team
- Virtual support spaces for students of color, undocumented/DACA immigrant students, and international students

Student counseling is...

Free of charge

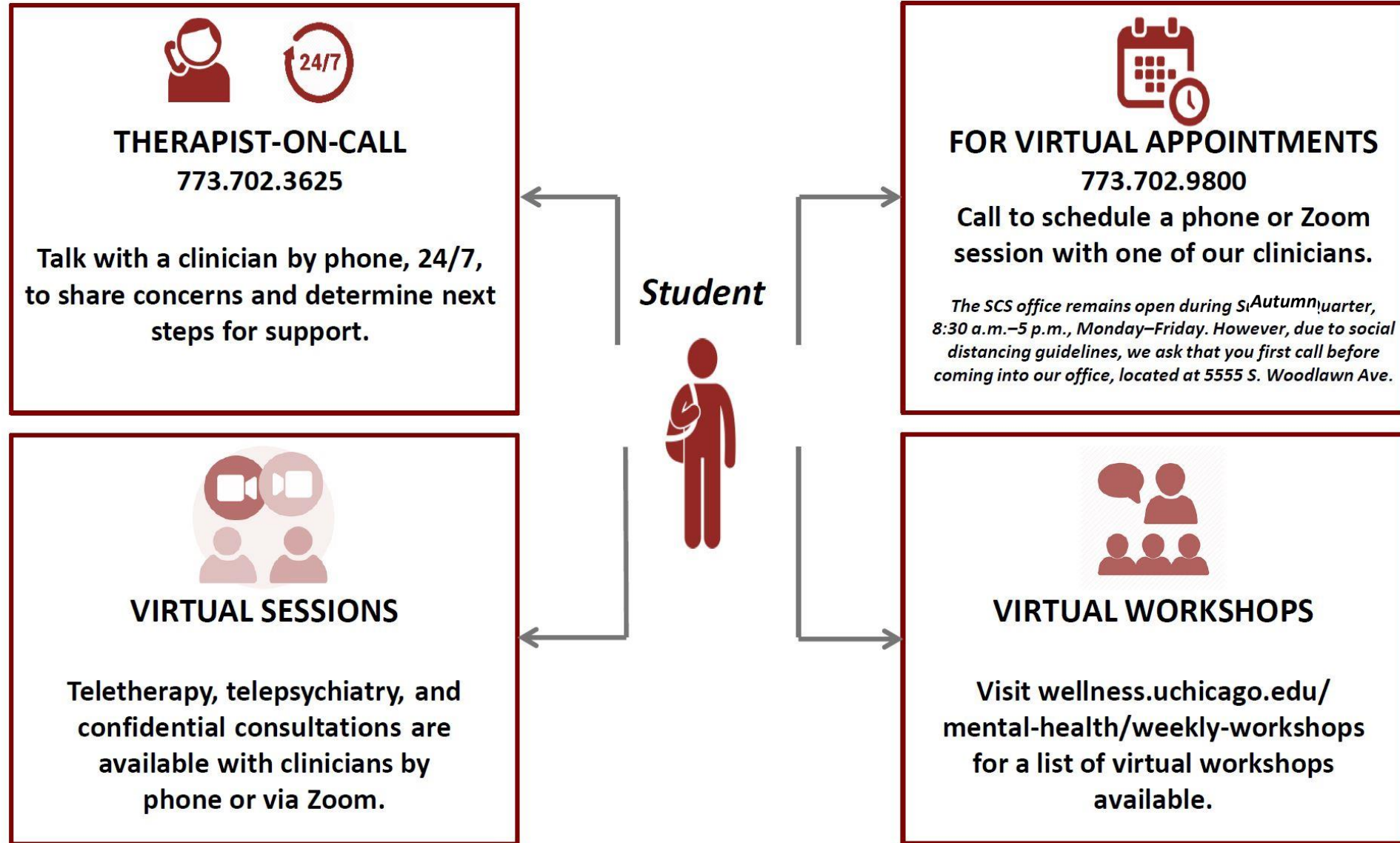


Confidential



HOW TO ACCESS MENTAL HEALTH SERVICES

UChicago Student Wellness provides virtual access to mental health care with the following options:



Contacting therapist on call

