ASSISTING THE DISTRESSED STUDENT

A Practical Guide for Faculty & Staff

WEST VALLEY COLLEGE

MHSAC
MENTAL HEALTH SERVICES

ADVISORY COMMITTEE
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Introduction

Dear Colleagues,

Pursuing one’s educational goals should be a journey of wonder, exhilaration, and discovery. Our role as educators is to not only fuel the mind but to support the development of each student so that the vital learning processes of intellectual inquiry and cognitive engagement are supported by a healthy physical and mental outlook.

At West Valley College, we have a strong program of support in place for our students in need of mental health counseling and intervention. The high caliber of this program is due to the commitment of our dedicated faculty, staff, consultants, and interns who provide these important services. We are proud to be able to serve students in such a holistic manner and to provide high quality support.

Addressing the needs of the “whole” student requires collaboration between you, our colleagues in student support services, and our students in need. Please use this guide to assist you in responding to students who may need counseling or support. I encourage you to contact any of the individuals listed in this guide for assistance in handling difficult situations arising in the classroom, computer labs, athletic fields, or anywhere else our students may need us.

On behalf of West Valley College, I thank you for your empathy, support, and steadfast commitment to each student’s development as they pursue their educational dreams. Together, we can create our future.

Warm regards,

Bradley J. Davis, J.D.
Chancellor
West Valley Mission College District

Acknowledgements

This guide is a result of the collaborative efforts of many community college educators throughout the state dedicated to providing an optimal learning environment for all students. Special thanks to: Virginia Polytechnic Institute & State University, Tufts University, and Utah Valley University.

Guide revised 2019

When in doubt, consult.
Your Role

As a faculty or staff member, you are in a unique position to identify and help students who are in distress. This may be especially important for students who are unable turn to family or friends for support. Your expression of interest and concern may be a critical factor in supporting a student’s well-being, or even saving a student’s life.

West Valley College has developed this document as a guide to assist faculty and staff in recognizing certain signs and behaviors that might indicate that a student is in distress and requires assistance. Students may come to you directly to discuss a concern, but often difficulties are expressed indirectly. Sometimes signs of distress are evident through academic performance or classroom behavior. The following list identifies signs which may indicate that the student is distressed and would benefit from assistance, especially if the signs are persistent, severe, or represent a marked change.

Possible Signs of Distress:

- Poor performance or preparation in class activities/assignments
- Excessive absences or tardiness
- Marked inattentiveness or sleepiness in class
- Attending class under the influence of alcohol or drugs
- Communication of personal problems in written assignments or outside of class
- Noticeably depressed, sad, or apathetic mood; references to feeling hopeless or helpless
- Hyperactivity or very rapid speech; restlessness
- Noticeable anxiety or panic
- Deterioration in personal hygiene
- Dramatic weight fluctuations
- Social isolation or concern from peers
- Disruptive or inappropriate behavior
- Bizarre, disorganized, or erratic behavior
- Signs of loss of contact with reality
- Statements or actions about harm to self or others
- Your hunch or gut-level feeling that something is wrong

When in doubt, consult.
Consultation and Support

Student Health Services: (408) 741-2027, wvm.health-services@westvalley.edu
Offices located in the Student Services Center. Faculty and staff can contact Health Services for consultation on issues such as:

- your concerns and how to proceed
- assessing the seriousness of the situation
- suggesting potential resources or solutions
- facilitating options for student support
- clarifying your own feelings about the student or the situation

MHSAC:
The Mental Health Services Advisory Committee (MHSAC) is another resource providing leadership and consultation for faculty, staff, and students. MHSAC is a collaborative college-wide committee focusing on early identification and support for students of concern. The MHSAC includes representatives from several areas across campus such as staff, faculty, administrators, district police, and counselors.

Attend a meeting or contact one of the members below for consultation and assistance (please remember not to send identifying student information via email).

George Mageles - MHSAC Co-Chair, Supervisor of Mental Health Services
gleorge.mageles@westvalley.edu, 408.741.2612

Alfred Forrest - Health Services Director, alfred.forrest@westvalley.edu, 408.741.2159

When in doubt, consult.
Crisis Response Guidelines

Use the chart below to help determine how to respond when faced with a distressed or distressing student. When in doubt, err on the side of making the call.

**IS THE STUDENT A DANGER TO SELF OR OTHERS? DOES THE STUDENT NEED IMMEDIATE ASSISTANCE?**

<table>
<thead>
<tr>
<th>YES</th>
<th>NOT SURE</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>The student’s conduct is clearly and imminently reckless, disorderly, dangerous, or threatening (includes self-harm behavior) <strong>OR</strong> there is a medical emergency.</td>
<td>The student shows signs of distress but I am unsure how serious it is. My interaction has left me feeling uneasy and/or concerned about the student.</td>
<td>I’m not concerned for the students’ immediate safety, but the student is having significant academic and/or personal issues and could use some support or additional resources.</td>
</tr>
<tr>
<td>911 or Campus Police (408) 299-3233</td>
<td>Health Services 408-741-2027 or Campus Police 408-299-3233</td>
<td>Health Services 408-741-2027 or Counseling Services 408-741-2009</td>
</tr>
</tbody>
</table>

### Strategies During a Crisis

Stay calm and stay safe. If you feel unsafe, avoid meeting with the student alone and consult with your Dean/Department Chair, Health Services, or District Police for support. Act sooner rather than later - **early intervention is preferable to crisis intervention.** Don’t hesitate to call 911 in an emergency.

When dealing with most students in crisis, conveying your concern and willingness to help in any way you can, including referral to campus resources, is probably the most important thing you can do.

*When in doubt, consult.*
Guidelines for Intervention

Reaching out to a student can save a life. A distressed individual often wants help but doesn’t know how to ask. Whether you reach out to a student or a student approaches you directly, here are some suggestions for how to help.

Tips for Effective Communication:

- Talk to the student in private when both of you have time and are not rushed or preoccupied. Just a few minutes of effective listening on your part may be enough.

- Be direct by expressing your concerns in behavioral, nonjudgmental terms. For example, “I notice you’ve been absent from class a lot lately” or, “You seem to be having a hard time lately – I’m concerned about you.”

- Avoid judging, evaluating, or criticizing, even if the student asks your opinion. It is important to respect the student’s value system, even if you don’t agree with it.

- Listen to the student’s thoughts and feelings in a sensitive, non-threatening manner. Don’t feel that you have to be an expert or offer a solution. The most important thing is to listen.

- Offer hope that there are ways through their current difficulties without minimizing their distress. Let the student know that they are not alone and that there are many resources and people who can help them.

Making a Referral to Health Services for Personal Counseling:

- Point out that we all need help at some point and that seeking help is a sign of strength rather than weakness. Remind students that getting professional help for other problems (e.g. medical or legal) is good judgment.

- Tell the student about personal counseling, emphasizing that many students benefit from the free, confidential counseling available on campus. Give the student a copy of the Personal Counseling Postcard (page 9) and let them know they can email Health Services for a counseling appointment: wvc.health-services@westvalley.edu

- Be sensitive to how a student’s personal and cultural contexts affect their attitudes about mental health concerns and counseling.

When in doubt, consult.
Guidelines for Intervention

• Remember it’s up to the student whether or not to seek counseling; sometimes students need time to consider your suggestions for getting more help. However, if you know that a student made an attempt to end their life while enrolled at West Valley College, or shortly before enrolling, or has stated plans or intentions to die by suicide, you must alert District Police, Student Health Services, or an Administrator.

• Follow up with the student later to see whether they followed your referral suggestion. Even if the student did not take this step, it will show your continued interest and support.

• Know your limits. You don’t have to try to help a student alone. Faculty and staff are always welcome to consult with Health Services, MHSAC, or the Dean of Student Services to discuss concerns about a student.

Please refer to page 8-9 for Personal Counseling referral information.

When in doubt, consult.
Confidentiality and FERPA

If you are concerned about the welfare or safety of a student, you may share student information with college administrators, campus police, or Health Services; this is not a violation of student privacy. Please remember NOT to send identifying student information via email.

**Safety concerns warranting disclosure could include a student’s suicidal statements or ideations, unusually erratic and angry behaviors, or similar conduct that others would reasonably see as posing a risk of serious harm.**

FERPA applies only to information derived from student education records, and not to personal knowledge derived from direct experience with a student. For example, a faculty or staff member who personally observes a student engaging in erratic and threatening behavior is not prohibited by FERPA from disclosing that observation to other school officials who have legitimate educational interests in the information.

FERPA limits the disclosure of information from student education records. Education records include virtually all records maintained by an educational institution, in any format, that identify a student on its face or from which a student’s identity could be deduced from descriptive or other information contained in the record, either alone or in combination with other publicly available information.

FERPA permits the disclosure of information from student education records to appropriate parties either inside or outside of West Valley College in connection with an emergency, if knowledge of the information is necessary to protect the health or safety of the student or other individuals.

Thanks to Cornell University for this information on FERPA. www.policy.cornell.edu

*When in doubt, consult.*
Personal Counseling

WVC Health Services Personal Counseling is designed for students who can benefit from short-term intervention and support. If it is determined that the student would benefit from additional or on-going counseling, it is likely that a “warm hand-off” or referral will be made to off-campus community resources. Early intervention is preferable to crisis intervention.

Students are welcome to access Personal Counseling Services to talk about all types of concerns, big and small.

Services include free individual counseling, crisis services, screenings for DESP accommodations, and information and referral to campus and community resources.

Personal counseling is provided by MFT and Social Work graduate student interns who are supervised by licensed mental health professionals at Student Health Services.

Student Health Services maintains a strict policy of confidentiality within HIPAA and FERPA guidelines.

If you are concerned about the welfare or safety of a student, you may share student information with college administrators, campus police, or health services; this is not a violation of student privacy. Please remember NOT to send identifying student information via email.

During Health Services Office Hours:
(408) 741-2027, Monday – Thursday, 9:00 am to 4:30 pm

Outside Operational Hours: District Police (408) 299-3233 or 9-1-1 in an emergency.

Refer Students to 24/7 Crisis Resources:
- 24 Hour Suicide and Crisis Service, County of Santa Clara: (855) 278-4204
- National Suicide Prevention Lifeline: (800) 273-TALK (8255)
- Crisis Text Line: text HELLO to 741741

When in doubt, consult.
WHAT DOES STUDENT HEALTH SERVICES PERSONAL COUNSELING PROVIDE?
• Free individual counseling
• Walk-in crisis services
• Referral for DESP accommodations
• Information and referral to campus and community resources

DO I NEED TO HAVE A SERIOUS PSYCHOLOGICAL PROBLEM TO COME TO PERSONAL COUNSELING?
No. Students come to talk about all types of concerns, big and small.

WHAT ARE SOME THINGS I CAN TALK ABOUT?
• Whatever is on your mind
• Academic pressure
• Stress and anxiety
• Depression and loneliness
• Relationships and communication
• Sexuality and gender
• Substance use and addictions
• Disordered eating
• Death or loss
• Suicidal thoughts
• Cultural adjustment
• Sexual assault

WHO ARE THE STAFF?
Licensed mental health professionals, MFT and Social Work graduate student interns.

WHAT ABOUT PRIVACY? ARE THE SERVICES CONFIDENTIAL?
Yes, Student Health Services maintains a strict policy of confidentiality within HIPAA and FERPA guidelines.

HOW DO I MAKE AN APPOINTMENT?
Call (408) 741–2027 or drop by the Health Services office on campus.
Hours: Monday – Thursday from 9:00 AM – 4:30 PM

FOR FREE, CONFIDENTIAL, 24/7 HELP PLEASE CONTACT:
• 24 Hour Suicide and Crisis Service, County of Santa Clara: (855) 278-4204
• National Suicide Prevention Lifeline: (800) 273-TALK (8255)
• Crisis Text Line: text HELLO to 741741
• 911 for Life Threatening Emergencies
Identifying Students in Need of Assistance

The Depressed Student
When depressive symptoms begin to interfere with a student’s ability to function in their school, work, or social environment, the student may come to your attention as in need of assistance. Faculty and staff are often the first to recognize that a student is in distress. Look for a pattern of these indicators:

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

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

Do:
- Let the student know you’re concerned about them and would like to help.
- Encourage the student to talk about their feelings with someone they trust.
- Offer information about personal counseling at Health Services (page 9).
- Be direct. If you suspect the student could be suicidal ask one of the following questions: “Are you thinking about suicide? / Are you thinking about killing yourself? / Are you thinking about ending your life?”

Don’t:
- Minimize the student’s feelings (“Don’t worry. Everything will be better tomorrow.”)
- Bombard the student with “fix it” solutions or advice.
- Chastise the student for poor or incomplete work.
- Be afraid to ask the student whether he/she is suicidal.
The Suicidal Student

Suicide is the second leading cause of death among college students. There is no single cause. Suicide most often occurs when stressors exceed current coping abilities of someone suffering from a mental health condition. Suicide warning signs include:

- Talk about killing themselves or having no reason to live
- Feelings of hopelessness, helplessness, and futility
- Feelings of alienation and isolation
- Severe loss, threat of loss, or painful life event
- A detailed suicide plan
- History of a previous suicide attempt
- History of alcohol or drug abuse

Most people who take their lives exhibit one or more warning signs, either through what they say or what they do. It is important to view all suicidal comments as serious and contact Student Health Services or Campus Police immediately. People who contemplate suicide are often ambivalent about killing themselves and willing to get help when someone facilitates the process for them. Students who are feeling suicidal are often relieved when someone finally asks them “Are you thinking of killing yourself?” They no longer have to struggle with their feelings alone. Asking them if they are suicidal will not “put the thought” into their head.

**Do:**

- Take the student seriously. Listen to their story and let them know you care.
- Ask if the student is suicidal - this question will not increase the likelihood that they will attempt suicide. Be clear and direct by asking one of the following: “Are you thinking about suicide? / Are you thinking about killing yourself? / Are you thinking about ending your life?”
- Stay with the student while you contact help.
- Contact Health Services at 408-741-2027 or an Administrator. **If you are concerned about immediate threats to safety: Call 911 or Campus Police at 408-299-3233**
- Refer Students to 24/7 Crisis Resources:
  - 24 Hour Suicide and Crisis Service, County of Santa Clara: (855) 278-4204
  - National Suicide Prevention Lifeline: (800) 273-TALK (8255)
  - Crisis Text Line: text HELLO to 741741
- Report the incident via the WV incident reporting process online. Reporting the incident will ensure the student gets the support that they need quickly, while maintaining the safety of everyone on campus.

**Don’t:**

- Overstep the boundaries of your professional role. Avoid advice to “fix” the problem.
- Minimize the person’s feelings.
- Challenge or agree with any mistaken or illogical beliefs.
- Be ambiguous.

*When in doubt, consult.*
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 will be clear but for others it is difficult to pinpoint. Regardless of the cause, symptoms of anxiety may 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 edge,” having difficulty making decisions, or being too fearful to take action.

If a student is experiencing a panic attack, the physical symptoms can occur spontaneously and intensely and the student may fear they are dying. The following guidelines remain appropriate in most cases:

**Do:**
- Let them discuss their feelings and thoughts. Often this alone relieves a great deal of pressure.
- Provide reassurance but maintain professional boundaries.
- Remain calm.
- Be clear and directive. Don’t feel compelled to find a solution.
- Provide a safe and quiet environment until the symptoms subside.
- Offer information about Health Services personal counseling (page 9).

**Don’t:**
- Minimize the perceived threat to which the student is reacting.
- Take responsibility for their emotional state.
- Overwhelm them with information or ideas to “fix” their condition.

When in doubt, consult.
The Student in Poor Contact with Reality
These students have difficulty distinguishing fantasy from reality or the dream from the waking state. Their thinking is typically illogical, confused, or irrational; their emotional responses may be incongruent or inappropriate; and their behavior may be bizarre and disturbing. This student may elicit alarm or fear from others; however, they are generally not dangerous and are typically very frightened and overwhelmed.

Do:
- Respond with warmth and kindness, but with firm reasoning.
- Remove extra stimulation from the environment (step outside of a noisy classroom).
- Acknowledge your concerns. State that you can see they need help.
- Contact Health Services at 408-741-2027 or Campus Police at 408-299-3233.
- Acknowledge their feelings or fears without supporting misperceptions, e.g., “I understand you think someone is following you, but I don’t see anyone and I believe you’re safe.”
- Focus on the “here and now.” Ask for specific information about the student’s awareness of time, place, and destination.
- Speak to their healthy side, which they have. It’s okay to laugh and joke when appropriate.
- Report the incident via the WV incident reporting process online. Reporting the incident will ensure the student gets the support that they need quickly, while maintaining the safety of everyone on campus.

Don’t:
- Argue or try to convince them of the irrationality of their thinking. This commonly produces a stronger defense of the false perceptions.
- Play along, e.g., “Oh yeah, I hear the voices (or see the devil).”
- Encourage further discussion of the delusional processes.
- Demand, command, or order.
- Expect customary emotional responses.
The Disruptive Student
Students may become verbally abusive when in frustrating situations that they see as being beyond their control. Anger and frustration may result in explosive outbursts or ongoing belligerent, hostile behavior - this may be the 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 his/her world and you are the object of pent-up frustrations. This behavior may be associated with the use of alcohol and other substances.

Do:
- Acknowledge their anger and frustration, e.g., “I hear how angry you are.”
- Rephrase what they are saying and identify their emotion, e.g., “I can see how upset you are because you feel your rights are being violated and nobody will listen.”
- Reduce stimulation; invite the person to a quiet place. Consider whether or not you feel safe meeting with the student alone.
- Speak calmly at a normal volume.
- Allow them to vent, get the feelings out, and tell you what is upsetting them; listen.
- Be directive and firm about the behaviors you will accept, e.g., “Please stand back, you’re too close.” “I cannot listen to you when you yell and scream at me that way.” “Let’s step outside to discuss this further.”
- Contact Health Services at 408-741-2027 or Campus Police 408-299-3233
- Remember, safety first. If there is a threat to safety do not hesitate to call 9-1-1.
- Report the incident via the WV incident reporting process online. Reporting the incident will ensure the student gets the support that they need quickly, while maintaining the safety of everyone on campus.

Don’t:
- Get into an argument or shouting match.
- Become hostile or punitive, e.g., “You can’t talk to me that way!”
- Press for explanations for their behavior.
- Ignore the situation.
- Touch the student.

When in doubt, consult.
The Violent Student
Violence due to emotional distress is rare. Violent behavior typically occurs when a student’s level of frustration has become so intense or has 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 may also be associated with the use of alcohol or 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.”
- Explain clearly and directly what behaviors are acceptable, e.g., “You certainly have the right to be angry, but throwing things is not okay.”
- Stay safe; maintain easy access to a door; keep furniture between you and the student; avoid meeting with the student alone.
- Immediately seek assistance; contact Police at 9-1-1 or 408-299-3233.
- Report the incident via the WV incident reporting process online. Reporting the incident will ensure the student gets the support that they need quickly, while maintaining the safety of everyone on campus.

Don’t:
- Ignore warning signs that the person is about to explode, e.g., yelling, screaming, clenched fists, threats.
- Threaten or corner the student.
- Touch the student.

When in doubt, consult.
The Demanding Passive Student

Typically, even the utmost time and energy given to these students is not enough. Often they will seek to control your time and unconsciously believe the amount of time received is a reflection of their worth. You may find yourself increasingly drained and feeling responsible for this student in a way that is beyond your normal involvement. It is important that this student be connected with many sources of support, both on and off campus.

**Do:**
- Let the student make their own decisions.
- Set firm and clear limits on your personal time and involvement.
- Offer referrals to other resources on and off campus, including Health Services (page 9).
- During repeated interactions, stand while speaking with the student. Limit discussion time to 3 minutes.
- Consult with Student Health Services or the MHSAC for strategies on how to set healthy limits and boundaries.

**Don’t:**
- Get trapped into giving advice or allowing for special conditions.
- Avoid the student as an alternative to setting and enforcing limits.

*When in doubt, consult.*
The Student Under the Influence
Alcohol is the most widely used psychoactive drug. It is common in college populations for alcohol abusers to also be abusing other drugs, including both prescription and illicit. Currently, alcohol is the preferred drug on college campuses. The effects of alcohol on the user are well known to most of us. Irresponsible or unpredictable behavior affecting the learning situation (i.e., drunk and disorderly on campus) or a combination of health and social impairments associated with alcohol abuse can noticeably sabotage student performance. Because of denial that exists in most substance abusers, it is important to express your concern to the student in terms of specific changes in behavior or performance rather than in terms of suspicions about alcohol or drug use.

Do:
- Speak with the student about the behavior that is of concern.
- Address the substance abuse issue if the student is open and willing.
- Offer concern for the student’s overall well-being.
- Refer the student to Health Services, 408-741-2027 (Page 9)
- Report the incident via the WV incident reporting process online. Reporting the incident will ensure the student gets the support that they need quickly, while maintaining the safety of everyone on campus.

Don’t:
- Convey judgment or criticism about the student’s substance abuse.
- Make allowances for the student’s irresponsible behavior.
- Ignore signs of intoxication in the classroom.

When in doubt, consult.
The Suspicious Student

Typically, the suspicious student tends to present as tense, anxious, mistrustful, and socially isolated. They tend to interpret minor oversights as significant personal rejection and often overreact to insignificant occurrences. They frequently see themselves as the focal point of everyone’s behavior and often attribute special meaning to everything that happens to them. They can be overly concerned with fairness and being treated equally, and feelings of worthlessness and inadequacy underlie most of their behavior. They often seem capable and bright.

Do:

- Express compassion while maintaining professional boundaries. Remember that suspicious students have trouble with closeness and warmth.
- Be firm, steady, punctual, and consistent.
- Be specific and clear regarding the standards of behavior you expect.
- Suggest to the student that personal counseling is free, confidential, and helpful for many students at West Valley. Give the student information on personal counseling (Page 9).

Don’t:

- Assure the student that you are his/her friend; agree you are a stranger, but even strangers can be concerned.
- Overstep the boundaries of your professional role.
- Be humorous or try to make light of the situation.
- Challenge or agree with any mistaken or illogical beliefs.
- Be ambiguous.

When in doubt, consult.
The Harassed Student

Harassment involves unwelcome advances, requests, or other verbal or physical conduct; it is often found in the context of a relationship of unequal power, rank, or status. It does not matter that the person’s intention was not to harass. It is the effect it has on others that counts. As long as the conduct interferes with a student’s academic performance or creates an intimidating, hostile, or offensive learning environment, it is considered harassment. Harassment is a pattern of behavior that may include:

- Following or “stalking” behavior.
- Taking pictures or posting on social media without permission.
- Comments, questions, references, or jokes that make the person uncomfortable.
- Sexually suggestive conversations.
- Repeated non-reciprocated requests or demands.

Common reactions by students who have been harassed include: doubting their perceptions, wondering if it was a joke, questioning whether it really happened, or worrying that they may have brought it on themselves. A student may begin to participate less in the classroom, avoid or drop classes, or even change majors. The California Education Code, Section 89535, defines sexual harassment of students.

Do:
- Listen carefully to the student if they are willing to share about their experience.
- Separate your personal biases from your professional role - maintain objectivity.
- Help the student seek advice through a department chair, supervisor, or counselor; give the student information about personal counseling at Health Services (page 9).
- Inform the student that informal and formal complaints can begin with the Vice President of Student Services.

Don’t:
- Ignore the situation. Taking no action invalidates the student’s already shaky perception and puts the college in a vulnerable position should this behavior continue.

When in doubt, consult.
The Student on the Autism Spectrum

In 2013, Autism, Asperger’s Syndrome, and other related disorders were combined into one diagnosis, Autism Spectrum Disorder (ASD). There is a wide range of functioning and abilities seen across individuals diagnosed with an autism spectrum disorder. Generalities are hard to make except to say that communication and social skills deficits are present. There are also neurological differences that affect everyone on the autism spectrum.

As a result of these challenges, the observable behaviors of students on the autism spectrum may make them appear inattentive, bored, rude, defiant, or possibly even under the influence. Ritualistic or repetitive behaviors and additional unusual communication and social skills (especially under stress) can make some of these students seem odd and bring unwanted attention to them. Intellectually students with autism spectrum diagnosis are often very bright, but many may face a variety of “hidden challenges” that can undermine their ability to navigate a typical college campus and perform well in class. Some of these possible challenges are listed below.

Receptive difficulties:
Processing verbal exchanges more slowly; misunderstanding sarcasm, idioms and jokes; very literal interpretation of words; misunderstanding gestures and body language.

Expressive difficulties:
Problems initiating communication; even for students who seem very articulate/talkative. Trouble staying on topic, turn taking, and following conversational “protocol”. Slower to organize thoughts and speak, unusual voice tone/volume, idiosyncratic use of words and phrases.

Social challenges:
Problems understanding others perspectives, sharing space, and making eye contact. Extreme social anxiety, difficulty negotiating with others or interacting/working in pairs or groups. Difficulty understanding the “unwritten” classroom etiquette, misinterpretation of facial expressions and other non-verbal cues.

Sensory differences:
Extreme over sensitivity or under sensitivity to input, from the environment to the five senses. Difficulty filtering out environmental stimuli. A student may make a last minute request for a seating change and/or may leave abruptly due to sensory overload.

Learning style:
Challenges with general organization and planning skills, problems with impulsivity and problem solving, difficulty monitoring themselves in the completion of a goal. Poor sequential learning, easily bored with repetition once something is learned, attention problems, literal thinking, nebulous sense of time, perspective-taking deficits.

Coping skills:
Students may engage in stress relieving activities which look odd or make others feel uncomfortable, such as body rocking, pacing, waving/flapping hands or fingers repetitively, chewing on clothing/body, “lecturing” on a topic of interest, displaying the “opposite” emotion for the situation, or leaving a situation abruptly without explanation.

When in doubt, consult.
Do:
• Be clear, concise, concrete, and logical when communicating or asking for clarification.
• Acknowledge and reinforce acceptable classroom behaviors.
• Provide concrete examples for abstract or complex topics.
• Provide hands on learning, models, demonstrations, and other visuals when possible.
• Allow extra time for verbal responses.
• Give specific and detailed feedback on assignments and exams.

Consider:
• Providing study guides, review sheets, work checklists, and “sub” deadlines or intermittent “check-ins”.
• Allowing important exchanges of information to be done in written form.
• Allowing short breaks to leave class.
• Helping to devise an acceptable plan to address urgent sensory issues for the student, such as a signal/cue that the instructor can give to the student that means it is okay to leave or its time for a break.
• Assisting in the formation/monitoring of groups to assure proper inclusion of the student on the autism spectrum.
• Providing written rules for asking questions and other classroom logistics (as needed).
• Allowing hats, sunglasses, or ear plugs/earbuds to accommodate sensory differences.
• Allowing the student to choose their seat and helping to assure it is always available.

Don’t:
• Take seemingly rude behavior personally.
• Make assumptions about what students truly understand.
• Discourage or interrupt coping behaviors unless truly disruptive; understand that the student does not intend to be disrespectful.

Indiana University Bloomington, Indiana Resource Center for Autism
https://www.iidc.indiana.edu/pages/academic-supports-for-college-students-with-an-autism-spectrum-disorder

When in doubt, consult.
The Student Who Submits Disturbing Writings

A sense of what is disturbing will differ from person to person. However, most of us have a sense about what constitutes disturbing themes or disturbing writing. Content that warns of potential to self-harm or do harm to others naturally carries with it what appears to be an immediate threat. Themes of violence and gruesome details or writing that portrays deep desperation may also be included in the themes that arouse concern. However, these themes in themselves do not establish a problem.

In the case of outright threats there is little information gathering needed. This is a concerning incident and should be reported to the department chair and campus police.

The following questions are meant to support faculty in assessment of the student’s situation and whether what’s disturbing reflects creative exploration or a more concerning thought process.

- Is the creative work excessively violent?
- Do characters respond to everyday events with a level (or kind) of violence one does not expect, or may even find frightening?
- If so, does the violence seem more expressive of rage and anger than it does of a literary aesthetic?
- Does the level of violence hold thematic purpose?
- Are the characters’ thoughts as well as actions violent or threatening?
- Do characters think about or question their violent actions?
- If one set of characters demonstrates no self-awareness or moral consciousness, are other characters aware of or disturbed by what has taken place?
- If this awareness is missing, is the student receptive to adding that layer and to learning how to do so?
- Is the writing of concern the student’s first piece of violent writing?
- If yes, what is the nature of his or her other work?
- Is violence at the center of everything the student has written, or does other writing suggest that violence is something the student is experimenting with for literary effect?
- Are the violent actions in the work so disturbing or so extreme as to suggest they go beyond any possible sense of purpose in relation to the larger narrative?
- Do the violent acts seem to be the point of the piece, or a component?
- Does the nature of the violence or of the writing overall suggest extreme depression or suicidal thinking?
- Is the writing full of expressions of hostility toward other racial or ethnic groups?


When in doubt, consult.
Responding to Disturbing Writing

Do:
- Consult with your Department Chair or the English Department Chair.
- Consult with Student Health Services.
- Give the student information about personal counseling at Health Services (page 9).
- Bring the topic to the Mental Health Services Advisory Committee.

Don’t:
- Do nothing. Don’t keep the information to yourself.
- Wait to consult or refer; do so within 24 hours.

For information regarding students who write about negativity or violence toward others in a virtual setting, [www.cyberbullying.org](http://www.cyberbullying.org) is a great resource.

When in doubt, consult.
Student Code of Conduct: 5.19 Student Conduct Policy
(Source: Student Services: District Policies, West Valley College website 2016)

It shall be the policy of the District to enforce a student code of conduct the purpose of which is to promote and maintain orderly conduct of a responsible student body in a manner compatible with the District and College function as an educational institution (Education Code 76030).

5.19.1 Students are subject to State and Federal laws and to the specific regulations established by the District and/or each College in the District. Violators shall be subject to disciplinary action, including possible cancellation of registration, and may be denied future admission to the Colleges of the District. Criminal actions may also result in referral for prosecution.

5.19.2 Prohibited actions that may result in disciplinary action against a student include, but are not limited to, the following:

a. Continued disruptive behavior, continued willful disobedience, habitual profanity or vulgarity, or the open and persistent defiance of the authority, or persistent abuse of, College or District personnel.

b. Assault, battery, or any threat of force or violence upon a student or College/District personnel.

c. Physical or verbal abuse or any conduct that intimidates, endangers, or threatens the health or safety of any person (either on campus or at any event sponsored or supervised by the College/District).

d. Theft of or damage to property (including College/District property or the property of any person while s/he is on the College campus).

e. Interference with the normal operations of the College/District.

f. Unauthorized entry into, or use of, College/District facilities.

g. Forgery, alteration, or misuse of College/District documents, records, or identification.

h. Dishonesty (such as cheating, plagiarism, or knowingly furnishing false information to the College or to a College/District official).

i. Disorderly conduct or lewd, indecent, or obscene conduct or expression on any College-owned or controlled property or at any College-sponsored or supervised function.

j. Extortion or breach of the peace on College/District property or at any College/District-sponsored or supervised function.

k. The manufacture, possession, sale, distribution, or use of narcotics or other dangerous or illegal drugs, as defined in California statutes, on College/District property or at any function sponsored or supervised by the College.

l. Possession or use of alcoholic beverages on College/District property or at any function sponsored or supervised by the College/District.

m. Illegal possession or use of firearms, explosives, dangerous chemicals, or other weapons on College/District property or at College/District-sponsored or supervised activities.

n. Smoking in classrooms or other unauthorized areas on College/District property as designated by the District non-smoking policy (See Chapter 2.9).

When in doubt, consult.
WVC Student Conduct Policy

o. Failure to satisfy College/District financial obligations (including fines, loans, borrowed property, et cetera).
p. Failure to comply with verbal directions or posted regulations of College/District officials, faculty, staff, or District Police officers who are acting in performance of their duties.
q. Failure to identify oneself when on College/District property or at a College/District-sponsored or supervised event, upon request of a College/District official acting in the performance of his/her duties.
r. Gambling in any form.
s. Violations of College or District policies or regulations concerning the registration of student organizations, the use of College/District facilities, or the time, place, and manner of public expression.
t. Acts of physical, verbal, or sexual harassment.
u. Acts of discrimination based on sex, color, religion, age (for individuals 40 years and over), physical or mental disability, ancestry, national origin, race, creed, medical condition, marital or parental status, or sexual orientation.
v. Violation of other applicable federal and state statutes and District and College policies.
"Mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community. In this positive sense, mental health is the foundation for individual well-being and the effective functioning of a community. Multiple social, psychological, and biological factors determine the level of mental health of a person at any point of time."

- The World Health Organization

“We all have chosen work that impacts lives. In doing so, we must draw from many sources to acquire the skills needed to be effective.”

Dr. Karl Menninger devoted his life to working with people whose lives were in trouble. He saw a side of life that many of us will never experience. The following comments were taken from an address he gave at the United Nations in 1981.

People are unreasonable, illogical, self-centered. Love them anyway.
If you do good, people will accuse you of selfish, ulterior motives.
Do good, anyway.
If you are successful, you will win false friends and true enemies.
Try to be successful, anyway.
The good you do today will be forgotten tomorrow. Do it, anyway.
Honesty and frankness make you vulnerable. Be honest and frank, anyway.
People favor underdogs, but I notice they follow the top dogs.
Fight for some underdogs, anyway.
What you spend years building may be destroyed overnight. Build, anyway.
People really need help, but they may attack you if you help them.
Try to help people, anyway.
Give the world the best you have, and you’ll get kicked in the teeth.
Give the world the best you have, anyway.

Karl A. Menninger, M.D.
From United Nations Address – 1981

When in doubt, consult.