

The Calm Psychological Response

C.P.R.

Reference Guide A Primer On Crisis Intervention For College Professionals

Prepared by:
Deborah Tull, M.S.
Project Director

Mental Health Education Consortium Project
Funded by Fund for Instructional Improvement
Chancellor's Office
California Community Colleges
1998-99

Acknowledgment

The Mental Health Education Consortium Project is a collaborative effort between the Los Angeles Community College District and the Los Angeles County Department of Mental Health. The Project wishes to give a very special acknowledgement for the tremendous support that was provided by the following individuals: Sarah Minden, Barbara Wallace, Surrah De Almeida, Amarylles Hall, Gary Perkins, Frank Quiambao, Susan Steele, Steven Swaim, Marsha Grove, and Patricia Waldeck.

For Further Information Regarding this Project and This Reference Guide

Please Contact:

Deborah Tull, Project Director
Mental Health Education Consortium Project
Los Angeles Harbor College
1111 Figueroa Place
Wilmington, CA 90744
(310) 522-8281
E-Mail: tull@laccd.cc.ca.us

TABLE OF CONTENTS

Topic	Page(s)
What is a Crisis?	3
What is a Crisis Situation on a College Campus?	3
What is Crisis Intervention?	4
Working With Students In Emotional Crisis	5
Skills Necessary for Successful Crisis Intervention	5
The Actual Crisis Intervention Process	6-9
Resources	10-14
References	15

WHAT IS A CRISIS?

Dictionary Definition:

- ◆ ***Crisis:*** A critical point or situation in the course of anything; a turning point.

What is a Crisis Situation on a College Campus?

- ◆ ***Student in Emotional Crisis:*** A student exhibiting the signs of psychological disequilibrium that may be characterized by depression, fear and anxiety, low self-esteem and feelings of inadequacy, panic and fear, or a threat of harm to themselves or others.
- ◆ ***Disruptive Student:*** A student that manifests behavior that is in breach of the Student Code of Conduct (such as a student that is verbally abusive to students or faculty).
- ◆ ***Student with a Normal Reaction to a Real-Life Crisis Situation:*** A student's reaction to a natural disaster or emergency situation that has just occurred on the campus or in their home environment.

WHAT IS CRISIS INTERVENTION?

Crisis intervention is the act of intervening in a crisis situation to re-establish control and bring about a Calm Psychological Response for all concerned.

Student in Emotional Crisis: Crisis intervention is the act of applying “emotional first aid” to a student in psychological distress and referring them to appropriate resources for help.

Disruptive Student: Crisis intervention is the act of re-establishing control by doing either of the following:

- ◆ Contact campus police if the disruption warrants it
Or
- ◆ Contact the Vice President of Student Services or appropriate campus Administrator to uphold the Standards of Student Conduct through disciplinary action.

The law states that every student (regardless of disability status) has the responsibility of adhering to the Student Code of Conduct. There are no exceptions. All college professionals need to do what they can to preserve a “safe and secure learning environment” for faculty/staff and students.

Student Reacting to a Real-Life Crisis Situation: Crisis intervention is the act of applying “emotional first aid” to the student in psychological distress, perhaps contacting the Campus Police for assistance and referring students to resources as appropriate.

WORKING WITH STUDENTS IN EMOTIONAL CRISIS

A crisis may occur when a student becomes unable to successfully cope with a stressful change that may occur in their environment. This change may occur in their own personal life, home-life or be related to academic problems that they are facing on the campus.

It should be noted that the “change in their life” is not necessarily the crisis. The crisis occurs from the student’s inability to “successfully cope with or manage the event or situation that is perceived as being so stressful.” It is the responsibility of the college professional intervening in the “crisis” to teach the student the appropriate coping skills to manage their crisis situation and regain control over their lives.

Every crisis situation needs an individual assessment of the most appropriate course of action. For some students teaching some very basic life management skills would help them regain control of their lives. For other students with psychological disabilities the teaching of any coping skills should include teaching the student about the importance of contacting their doctor or therapist when they “feel” as if they are losing control.

It is not the responsibility of the college professional to provide long-term therapy. It is the college responsibility to respond to crisis situations and be available for short-term personal counseling. Crisis intervention should be seen as the opportunity to supply the student with “emotional first aid” in order to bring about a calm psychological response to a specific situation, provide some instruction on better life management or coping skills, and successfully refer the student to mental health professionals for longer term therapy situations as necessary.

SKILLS NECESSARY FOR SUCCESSFUL CRISIS INTERVENTION

Training in basic counseling skills is especially important when dealing with crisis situations. Skills such as empathy, genuineness and acceptance are of particular value. Empathy allows a Crisis Counselor to sense and understand a student's inner feelings and communicate this understanding in a meaningful manner. Genuineness allows a Crisis Counselor to "be real" without any plastic facades being placed between the counselor and the student. An attitude of acceptance on the part of the Crisis Counselor demonstrates respect, caring, and unconditional acceptance of the student in crisis.

Familiarity with both non-directive and directive counseling approaches is also beneficial. If a crisis-ridden student has some personal control and ability to respond on their own, the more non-directive collaborative approach is best since it allows the student to regain some of their control. It also allows them to take personal responsibility for a Plan of Action to restore balance and harmony in their lives.

There are some instances where an understanding and application of the more directive counseling approaches is necessary. These occur when a crisis-ridden student becomes immobilized by any of the following:

- ◆ Health problems or chemical abuse;
- ◆ Severe depression;
- ◆ Severe shock, bereavement, or loss;
- ◆ State of panic in which the student is totally overwhelmed by anxiety;
- ◆ Being out of touch with reality (as in a psychotic break);
- ◆ Feeling suicidal.

THE ACTUAL CRISIS INTERVENTION PROCESS

A crisis can be a turning point for positive change in a student's life. It has been said many times that the seed of healing is in the crisis itself. College professionals that participate in crisis intervention activities have a wonderful opportunity to restore balance and meaning to a student's life.

The actual crisis intervention process has three basic components:

- ◆ Identification of the crisis itself;
- ◆ Assessment of the full impact of the crisis;
- ◆ Resolving the crisis situation through intervention.

IDENTIFICATION

The identification process clearly delineates that a crisis situation exists. Crisis Counselors must determine what specific events in a student's life might have triggered a crisis and what the student's current functioning is. Relevant information would be whether the "crisis trigger" is due to a long-standing life situation or an unpredictable traumatic life event that just happened (such as the pain and life altering impact of a long term disability or a situational event such as a death or divorce).

Life events that may trigger a crisis can include any of the following:

- ◆ Progression through significant life stages (adolescence or retirement);
- ◆ Suicide, death or personal loss of a person or possession;
- ◆ Violence (rape, drive by shootings, incest etc.);
- ◆ Changing Relationships;
- ◆ Social unrest;
- ◆ Environmental disasters.

There are also some physical, emotional and behavioral signs that could help identify a student in crisis. Physical changes such as a decline in overall health, a change in eating and sleeping habits, a change in energy or activity level could indicate that there is a problem. Emotional signs that might indicate that a student is in crisis could be emotional outbursts, agitation and temperament changes. Behavioral signs could include social withdrawal, difficulty with concentration and attendance problems.

ASSESSMENT

After identifying that a crisis actually exists there needs to be a determination of the actual impact of the crisis on the student's life. How deeply has the crisis impacted the student?

Crisis Counselors need to compassionately communicate with the student. A foundation of trust, acceptance and unconditional positive regard for the student must be established. Crisis Counselors should demonstrate a total commitment to help the student and instill the "feeling" that there most certainly is a positive solution to their problem.

Warm, open communication with the crisis-ridden student is imperative. It is important to support and empathize with the student in crisis. Good listening skills are critical in these situations. Be sure to establish good eye contact. Try to avoid over-using the phrase "I understand" so the student will feel more compelled to explain their feelings and emotions. Let the student know that you want to fully understand and help as much as you can. It is extremely important to recognize and openly acknowledge any social or cultural factors that may relate to the crisis. There is also a critical need to understand and openly respect all differences inherent in each culture when dealing with a crisis situation.

Ask some insightful questions. Find out about the student's perception of the problem, the duration of the problem, what specific feelings he/she is undergoing, and how he/she is going to try and solve the problem. Ask if they have ever experienced this problem or something similar before. If so, find out how they handled it and if they were successful. Find out what they learned and if they could perhaps handle the situation differently this time. The questions may be either forced choice or open-ended. Pay attention to the specific use of language along with the student's tone, diction etc. Responses will help determine any difficulties that the student is having with communication, in making decisions and in actually solving their problems. The responses will let you know what level of control you need to take in the situation.

Many crisis intervention specialists believe that open-ended questions are the most beneficial since they require more than a yes or no answer. Sample questions include:

- ◆ Can you tell me a little bit about what's wrong?
- ◆ What are you thinking right now?
- ◆ What's bothering you?
- ◆ What do you think that you should do about your situation?
- ◆ Do you think that your solution will help?
- ◆ Can you describe a little but more about your feelings so that I can really understand?

During the assessment process also be sure to evaluate the student's nonverbal communication. What do their mannerisms, body and eye movements, posture and facial expressions tell you? Do they appear relaxed and connected to reality or so tension-filled that they can't physically or emotionally handle the situation?

Safety is a major issue of concern for crisis intervention workers. You must determine if the crisis-ridden student is at risk of taking his/her own life or someone else's. Call for help if you need assistance in making this determination.

The Campus Police or a licensed mental health professional must be immediately summoned to hospitalize the student if it appears that the student is a threat to themselves or others. Take immediate action!

If a crisis-ridden student appears to be a danger to himself or others, the Crisis Intervention Worker must shift the responsibility of care for the student to the police or mental health professional. It is appropriate and desirable however for a call from the initial Crisis Intervention Worker to be placed to the student in support of the student's recovery from the crisis situation. Students are often highly embarrassed after an on-campus crisis incident. The recovery process for a student is much smoother if they feel they are still respected and supported after such an incident.

CRISIS INTERVENTION AND RESOLUTION

The goals of successful crisis intervention and resolution are to accomplish the following:

- ◆ Protect the safety of all concerned.
- ◆ Identify and successfully link a student to community/campus resources
- ◆ Obtain a student's commitment to a short-term plan to deal with the specific crisis.
- ◆ Establish a long-term plan with full student commitment to improve long term coping and life management skills.
- ◆ Follow-up at the end of any crisis intervention to make sure that the student has moved beyond the immediate crisis and is on the road to recovery.

It is important that the confidentiality of the student be respected at all times. It is also important to follow-through with any special reporting that is necessary (such as child abuse reporting etc.).

The goal of successful crisis intervention and resolution for a student that is in danger of hurting themselves or others is met when the student is placed under police and/or mental health professional care. When the student's emotional status stabilizes they can work to establish improved long-term coping and life management skills.

Effective crisis intervention and resolution would be the following:

Student with a Diagnosed Psychological Disability

- ◆ Help the student reach a state of immediate psychological calm.
- ◆ Help the student make contact with their regular mental health professional for continuing therapeutic care.
- ◆ Help the student by teaching them how to improve their coping skills and college success skills.

Student Who Has Never Been Diagnosed with a Psychological Problem But Is Clearly Evidencing a Mental Illness Disturbance

- ◆ Help the student reach a state of immediate psychological calm.
- ◆ Access available mental health resources and directly refer the student for evaluation, treatment and possible medication.
- ◆ Continue to see the student on a short-term basis until you are sure that they have been successfully evaluated and are successfully under treatment.
- ◆ Teach the student how to improve their coping skills and college success skills.

Student That Is Experiencing a Situational Psychological Disturbance Due To a Traumatic Life Event or Disaster

- ◆ Help the student reach a state of immediate psychological calm.
- ◆ Access available mental health resources and directly refer the student for a mental health assessment and potential involvement in community support groups.
- ◆ Continue to see the student on a short-term basis until you are sure that they have been successfully evaluated and are involved in appropriate support group or other therapeutic activities.
- ◆ Teach the student how to improve their coping skills and college-success skills.

RESOURCES

An extremely important link to effective crisis resolution is to be able to successfully refer a student to appropriate resources. It is imperative that resource files be current and that an open line of communication for a smooth working relationship with the resource agencies/individuals be established prior to a crisis situation. Familiarity with the intake process at a clinic or hospital, the specific hours of operation for a walk-in crisis clinic, a working relationship with the clinicians on duty, knowledge about transportation to the facility etc. are very important if you expect to move through a crisis situation smoothly.

What follows is some specific information on “Information and Referral Hotlines” and some Mental Health Websites that should assist crisis counselors in developing their current resource files:

Information and Referral Hotlines

Adult Protective Services
(213) 351-5401

Agency responds to crisis situations involving abuse of elderly adults (65 and over) and dependent adults (mentally or physically disabled ages 18-64)).

AIDS/HIV Hotline
(800) 822-7422

Support, information and referrals for HIV infected individuals.

Al-Anon Family Groups
(818) 760-7122

Referrals to over 500 L.A. County group self-help meetings for friends and family of those with drug/alcohol problems.

Alcohol Help line
(800) 252-6465

24 hour information and referral line for alcoholics (nationwide).

Battered Women’s Hotline
(310) 392-8381

24 hour, 7 days a week support and referral (L.A. Commission on for battered women and children and legal Assault Against Women) services for rape/incest victims.

INFORMATION AND REFERRAL HOTLINES

CA Dept. of Health
(916) 445-0174

Information on local state health service
Services Programs.

CA Self Help Center
(800) 222-5465

Referrals to statewide self-help groups for a
wide range of problems.

Child Abuse Hotline
L.A. County Dept.
Of Children's Services
(800) 272-6699
(800) 540-4000

24 hours a day, 7 days a week.
For child abuse reporting and crisis
counseling

Elder Abuse Hotline
(800) 992-1660

Counseling for elder abuse situations.

Health Services Information
(800) 427-8700
(800) 427-8700

Referral and Information to L.A. County
Health programs.

Help Now Hotline
(800) 435-7609

24-hour referral to mental health agencies.

Housing Hotline
(213) 468-7464

24-hour hotline for housing referrals.

Info-Line, L.A. County
(800) 339-6993

24 hour L.A. County human service agency
information.

L.A. County Mental
Health Crisis Line
(800) 854-7771

24 hour mental health hotline,
for suicide crisis situations.

INFORMATION AND REFERRAL HOTLINES

L.A. County Alcohol/Drug
(800) 564-6600

Provide drug abuse referrals, crisis intervention Services and self-help group referrals.

L.A. County Mental
Health Information
(213) 738-4961

Mental Health and Social Services
Program information throughout
L.A. County.

Mental Health Info Line
(213) 738-4961

Message Tape after hours. Information
and referrals to L.A. County Mental Health
Programs throughout the county.

Narcotics Anonymous
(213) 933-5395

24 hour help line to refer individuals to
Self help groups.

Suicide Prevention
Crisis Hotline
(310) 391-1253

24 hour, 7 days a week crisis hotline
for suicide prevention and referral. Free.

WORLD WIDE WEB RESOURCES

American Psychiatric Association

www.psych.org

American Psychological Association

www.apa.org

Center for Psychiatric Rehabilitation

www.bu.edu/sarpsych/

Journal of the Alliance for the Mentally Ill

www.mhsource.com/hy/journal.html

Knowledge Exchange Network, Center for Mental Health Services,
Substance Abuse and Mental Health Services Administration

www.mentalhealth.org

Mental Health Infosource

www.mhsource.com

National Alliance for the Mentally Ill

www.nami.org

National Institute of Mental Health

www.nimh.nih.gov

National Institute on Alcohol Abuse and Alcoholism

www.niaaa.nih.gov

National Institute on Drug Abuse

www.nida.nih.gov

National Mental Health Association

www.nmha.com

World Wide Web Mental Health Home Page

www.mentalhealth.com

REFERENCES

California Association of Counseling and Development, Caution: Crisis Ahead, A Crisis Counseling Handbook. California Association of Counseling and Development, 1996.

Carter, R. Helping Someone With Mental Illness. New York : Random House, 1998.

Morris, W. Editor, American Heritage Dictionary, Boston:Houghton Mifflin Company, 1969.

Riddick-Norton, G. Social Service Resource Directory for L.A. County. Orange:Glenna Riddick-Norton, 1998.

Stevens, B. and Ellerbrock, L., "Crisis Intervention: An Opportunity To Change," Eric Clearinghouse on Counseling and Student Services, Greensboro, N.C. ED405535.