Any student who has paid the Health Center fee, may use the services of the Center. Students are encouraged to make their own appointments if possible. (Telephone: 474-7043). Because many students use our services, there may be a wait, from a few hours to a few days, before seeing a counselor. **In urgent situations, however, we will assist any student immediately.**

At the student’s first visit to the Center, information and consent forms will be filled out prior to the session. During the first appointment, the counselor will begin to assess the student’s needs and determine the most effective ways of helping. Options may include counseling at the Center or a referral to another provider.

### In an Emergency

Try to stay calm. Find someone to stay with the student while calls are made.

*For students expressing a direct threat to themselves or others, or who act in a disruptive, a bizarre, or a highly irrational way, call:*

- **University Police** (24 hours)  
  474-1911  
  For transportation and/or protection.
- **UAF Student Health and Counseling Center**  
  (8am—5pm)  
  474-7043  
  For emergency consultation, evaluation, treatment, and referral.
- **Office of the Dean of Students** (8am—5pm)  
  474-7317  
  For emergency consultation.

*For students who exhibit severe anxiety, depression, suicidal thoughts, or any other intense emotional disturbance, and for whom no immediate harm seems likely, call:*

- **UAF Student Health and Counseling Center**  
  (8am—4:30pm) Monday thru Friday  
  474-7043  
  For consultation, evaluation, treatment, and referral.
- **Crisis Line** (24 hour telephone service)
Faculty as Helping Resources for Students

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

Alaska has the HIGHEST rate of suicide in the United States.

Given these two statistics, it is especially important that we at UAF be aware of what we can do to prevent such a tragedy.

This brochure is provided to assist you in becoming aware of signs of a distressed student, things that you might do to help the student, signs of suicidal ideation, and when and how to make effective referrals for additional help.

There are basically four types of warning signs:

1. **Situational**: stressful or traumatic experience.
2. **Depressive**: changes in usual behavior, inability to concentrate, socially withdrawn, easily agitated, apathy, crying, sense of worthlessness, appears sad, abusing substances.
3. **Verbal signs**: direct or indirect; verbally or in written material (e.g., assignments, papers, etc.).
4. **Behavioral**: giving away possessions, writing a suicide note, acquiring means to commit suicide, organizing business and personal matters, suddenly resigning from organizations or clubs.

Look for a cluster of clues. A suicidal person who gives warning signs will most often present more than one clue.

**When the situation is not clear:**
- Share your concerns with the student directly to find out.
- Consult a mental health professional, such as the counselors at the Center for Health and Counseling.

**Tips for Recognizing Troubled Students**

At one time or another, everyone feels depressed or upset. However, there are three levels of student distress which, when present over a period of time, suggest that the problems are more than the “normal” ones.

**Level 1** - Although not disruptive to others in your class, these behaviors may indicate that something is wrong and that help may be needed:
- Serious grade problems
- Unaccountable change from good to poor performance
- Change from frequent attendance to excessive absences
- Change in pattern of interaction
- Marked change in mood, motor activity, or speech
- Marked change in physical appearance.

**Level 2** - These behaviors may indicate significant emotional distress or a reluctance or an inability to acknowledge a need for personal help:
- Repeated request for special consideration
- New or regularly occurring behavior which pushes the limits and may interfere with class management
- Unusual or exaggerated emotional response.

**Level 3** - These behaviors usually show 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 (seeing/hearing things that are not there, beliefs or actions at odds with reality)
- Overt suicidal thoughts (suicide is a current option)
- Homicidal threats.

**What You Can Do to Help**

**Responses to Level 1/Level 2 Behavior:**
- Talk to the student in private when you both have time.
- Express your concern in non-judgmental terms.
- Listen to the student and repeat the gist of what the student is saying.
- Clarify the costs and the benefits of each option for handling the problem from the student’s point of view.
- Respect the student’s value system.
- Ask if the student is considering suicide.
- Make appropriate referrals if necessary.
- Make sure the student understands what action is necessary.

**Responses to Level 3 Behavior:**
- Stay calm.
- Call emergency referral on the back of this pamphlet.

**Do’s and Don’ts in Responding to Suicidality:**
- **DO** show that you take the student’s feelings seriously.
- **DO** let the student know that you want to help.
- **DO** listen attentively and empathize.
- **DO** reassure that with help he/she will recover.
- **DO** stay close until help is available or risk has passed.
- **DON’T** try to shock or challenge the student.
- **DON’T** analyze the student’s motives.
- **DON’T** become argumentative.
- **DON’T** react with shock or disdain at the student’s thoughts and feelings.
- **DON’T** minimize the student’s distress.