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AUTHOR

Hengstenberg, James D.

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ABSTRACT

This brief guide is intended to aid instructors and counselors in helping students who are exhibiting emotional problems or suicidal behavior. Specific clues which indicate that a student is in emotional trouble or is potentially suicidal are listed along with action's which should be taken and crucial mistakes which should be avoided. (DC)

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BEING THERE: HELPING STUDENTS DEAL WITH CRISES

by James D. Hengstenberg

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BEING THERE: HELPING STUDENTS DEAL WITH CRISES

It comes as no surprise to college instructors and counselors that students are under considerable stress simply because they are students. The stresses associated with college are compounded by the natural turnoil of the teen years, the increasing divorce rate, the increasing number of families with both parents working, greater mobility, the availability of drugs and alcohol, and so on. A common thread in these circumstances is alienation: an absence of significant, caring relationships to rely on when the student encounters the disruptions of breakups, failure, disappointment, hopelessness. Lack of support for dealing with such situations accentuates both their impact and the student's sense of low self-esteem and loneliness.

The results of these stresses are shocking. In a national sample of people between 18 and 74, those below 29 show a higher incidence of depression than any other age group. Suicide is listed as the third leading cause of death among persons 15 to 24 years of age, following accidents and homicides. Derek Miller, chief of the adolescent program at Northwestern University's Institute of Psychiatry in Chicago, suggests that many deaths attributed to accident or homicide are actually suicides and that probably five times as many suicides occur than are reported:

As professionals who work with students on a regular basis, instructors have the opportunity to recognize students who are in emotional crisis and to help or obtain the help students need. Early identification of inappropriate emotional and behavioral responses to stress accompanied by proper diagnosis and quick and adequate treatment can result in a return to normal functioning without serious consequences.

There are several specific clues that tell us an individual is in emotional trouble:

Belligerence - walking around with a chip on her shoulder, ready to argue or quarrel at the slightest excuse or with no excuse at all.

Excessive moodiness - spells of the blues; feeling a great deal of time that nothing is worthwhile.

Exaggerated worry - continuous anxiety out of proportion to actual events.

Suspiciousness and mistrust - a persistent feeling that the world is full of dishonest, conniving people who are trying to take advantage of him.

Selfishness and greediness - lack of consideration of the needs of others, a what's-in-it-for-me attitude about almost everything.

Helplessiess and dependency - a tendency to let others carry the burden; difficulty in making decisions. - Poor emotional control - emotional outbursts out of proportion to the cause, and at inappropriate times.

Daydreaming and fantasy - spending a good part of the time imagining how things could be, rather than dealing with them the way they are:

Preoccupation with health.

Potentially suicidal persons also provide specific clues: A significant change in behavior or habits (eating, sleeping, school performance, activity level, involvement with others); Obvious depression, especially following a loss or problems with the law; A history of previous suicide attempts as a way of coping with pain; Verbal statements, either explicit ("I'm going to kill myself.") or implicit ("It doesn't matter what I get on the exam . . . I won't be around . . ."); Making final arrangements by giving away prized possessions or saying poignant good-byes; Increase in alcohol or drug use. A final factor to recognize is that 75 percent of all suicides are males; even in the younger age groups, while 75 percent of all attempts are made by females. Women are more likely to attempt suicide, but men are more likely to complete suicide:

What Can You Do?

Mental health professionals agree that understanding can both keep minor upsets from becoming worse and help emotionally and mentally ill people recover. The troubled person needs sympathy, even when her behavior is disturbing. She also needs rational understanding—that is, understanding that helps you keep things in perspective and puts you in a reasonable frame of mind to help her, rather than fight her. When you have the opportunity to help a student in trouble there are a number of steps to follow.



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Do let the person know you're interested and concerned. A person who's fighting the whole world will be relieved to Know someone else is on the same side. Your friendly attitude can help him to let down his defenses and to take a more relaxed attitude toward life.

Do be a good listener. People with problems need someone to talk to; someone with whom they can share their troubles. Make yourself available, and when the person starts talking, listen quietly and with little interr-

uption. You're there to help her get things off her chest, and not to vent your feelings.

Do try to help out with some practical problems. Sometimes emotional difficulties may be exacerbated by some simple; easy-to-adjust problem, like a financial difficulty, a study problem; difficulty on the job, or a housing problem. Doing anything to help the person work out the problem may help remove the emotional pressure

Do read literature on specific mental and emotional problems. Reading may give you additional understanding that will put you in a position to be more helpful.

Do get help from an expert. If the disturbance is prolonged and intense, indicating a serious problem, it may need the hand of an expert. You can make the person aware of expert services and help locate them.

Obviously you should avoid harmful actions:

Don't set vourself up as a judge. Since problem behavior is a trouble rather than a fault, it is unfair (and it may even be harmful) to condemn the person as we or selfish. Such negative judgments may only help confirm her belief that everyone is against her.

Don't tell him to "snap out of it." The troubled person usually cannot help doing what he is doing, or stop doing it when he is told to, anymore than a person with taberculosis can stop coughing on demand. The problem is often 50 deep-seated that much more than even a strong, sincere desire will be needed to correct the problem behavior. Telling such a person to snap out of it is likely to infuriate her; or make her feel even more helpless than she already does.

Don't try to argue her down: Trying to convince a troubled person that what she is doing is wrong is pointless. She has chosen the particular behavior as a way of protecting herself; trying to argue her out of it will be perceived by her as trying to take away the only defense she has. She will only resent this and resist you

even more strongly.

Don't try to be an amateur therapist. Even the best intentioned people sometimes yield to the temptation to act like an expert. Emotional problems require attention from a professional in that field. Being untrained you might fail to notice danger signals. You might also exaggerate the importance of a minor instance of disturbing behavior, and thus throw yourself and everyone else into a panic. If the problem looks more serious than can be helped by following the suggestions above; get professional advice:

Four crucial mistakes must be avoided in dealing with suicidal students:

- Do not give advice:
- Do not offer platitudes or glib answers.
- Do not dare him to do it. The shock approach doesn't work. It is, in fact, a most dangerous approach:
- Do not refuse to talk about suicide or shy away from the words "suicide" and "kill yourself:" Don't be afraid to ask her if she is thinking of killing herself. You won't put the idea in her head; and you will give the needed relief from the scare feelings that talking and being taken seriously can bring. The benefits of being there for troubled students are twofold: As an informed and caring instructor, you can help students; but you may also become less critical and more tolerant of yourself.

James D. Hengstenberg, The Suicide & Crisis Center 2910 Swiss; Dallas, TX 75204

For further information, contact the National Mental Health Association at 1800 North Kent Street, Arlington; VA 22209; or Dr. Pat Archer, Associate Editor, Innovation Abstracts.

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