

ANXIETY

DEPRESSION

GRIEF AND LOSS

**POOR CONTACT
WITH REALITY**

SUICIDE

EMOTIONALLY DISTRESSED STUDENTS

Students experiencing emotional distress may struggle with any of the five concerns listed in this section. In this section, we will review the signs and symptoms for each type of concern and list educational resources for anyone interested in learning more.

Suggestions

What You Can Do

Let the student discuss their feelings and thoughts

Provide reassurance

Remain calm

Be clear and direct

Provide a safe and quiet environment until the symptoms subside

If situation is extreme and the student seems to need assistance, contact:

Personal Counseling Services: D-203,
(626) 585-7273

Utilize the Emergency Resource Contact List on page 31 of this Guide

Complete the Maxient *C-PART Referral Form*

What to Avoid

Minimizing the perceived threat to which the student is reacting

Taking responsibility for their emotional state

Overwhelming them with information or ideas to “fix” their condition

ANXIETY

Stress, worry and anxiety are normal, expected and inevitable parts of college life. The area that causes the most stress for students includes grades, schoolwork, finances and relationships.

When worry and stress become overwhelming or unmanageable, this may be indicative of an anxiety disorder. Anxiety disorders are distinguished from normal, everyday stress when the anxiety is more intense, lasts longer and lead to avoidance behaviors that interfere with one’s life.

Anxiety can be generalized across many different situations, or situation-specific, such as test anxiety, social anxiety, specific phobia or public speaking anxiety. For some students, the cause of anxiety is clear, and for others, it is less apparent. Students can exhibit anxiety in different ways and in varying levels of intensity.

Signs and Symptoms

- Students may talk about high levels of pressure, feeling tense, stressed, burned out or overwhelmed
- Anxiety may arise in the form of a panic attack (pounding heartbeat, sweating, shaking, shortness of breath, chest pain, dizziness, and fear of losing control)

RESOURCES

Anxiety and Depression Association of America
www.adaa.org/

American Psychological Association Help Center
www.apa.org/helpcenter/index

Anxiety Resources for Universities and College Students
www.anxiety.org

Suggestions

What You Can Do

Inform the student that you are aware of the change in their behavior

Encourage the student to discuss how they are feeling with someone they trust

Offer to assist the student in referring them to Personal Counseling Services

If situation is extreme and the student seems to need assistance, contact:

Personal Counseling Services: D-203,
(626) 585-7273

Utilize the Emergency Resource Contact List on page 31 of this Guide

Complete the Maxient *C-PART Referral Form*

What to Avoid

Minimizing the student's feelings, e.g., "Do not worry", "Everything will be better tomorrow"

Bombarding the student with "fix it" solutions or advice

Chastising the student for poor or incomplete work

Being afraid to ask the student whether they are having suicidal thoughts

DEPRESSION

Clinical depression is one of the most common mental health issues seen on college campuses. While almost everyone has had periods in their lives when have felt sad or down, these feelings tend to become less intense with the passage of time. However, clinical depression occurs when feelings of extreme sadness or despair last for at least two weeks or longer and interfere with the ability to function in different areas such as schoolwork and/or relationships.

Depression can affect one's ability to do simple day-to-day activities. A depressed person often has difficulty making decisions or doing things they may usually do with ease (paying bills, attending classes, reading assignments) may seem overwhelming. Depression is highly treatable with appropriate intervention.

Signs and Symptoms

- Feelings of emptiness, hopelessness, helplessness and worthlessness
- A deep sense of sadness
- Lack of energy, fatigue
- Loss of interest in activities
- Loss of appetite or eating too much
- Problems falling asleep, staying asleep, or sleeping too much
- Difficulties with concentration, memory and decision-making
- Thoughts of suicide or suicide attempts

RESOURCES

Anxiety and Depression Association of America
www.adaa.org/

Depression and College Students
www.affordablecollegesonline./college-resource-center/college-student-depression/

ULifeline
www.ulifeline.org/topics/128- depression

Suggestions

What You Can Do

Listen carefully and compassionately

Consider the option of allowing the student to postpone submitting assigned work

Be on alert for signs that the student feels a need to self-harm as a way to cope with the pain

Talk to the student regarding seeking some professional help to deal with the loss

If situation is extreme and the student seems to need assistance, contact:

Personal Counseling Services: D-203, (626) 585-7273

Utilize the Emergency Resource Contact List on page 31 of this Guide

Complete the Maxient *C-PART Referral Form*

What to Avoid

Feeling afraid of seeing students cry, as a natural and healthy way of releasing emotions

Being uncomfortable of discussing the deceased person with the student

Saying well-intentioned things to the student that might imply the grief is not valid, e.g., *"It cannot be that bad"*

GRIEF AND LOSS

Grief is a normal response to the sorrow, emotion and confusion that come from losing someone or something important to you. It is a natural part of life. Grief is a typical reaction to death, divorce, job loss, a move away from family and friends, or loss of good health due to illness. Grief is difficult at any time in one's life, but it can be devastating during college. A student's grade point average can significantly decrease during the semester of loss.

Signs and Symptoms

- Feelings of emptiness and numbness, as if they are in shock
- Physical changes (trembling, nausea, trouble breathing, trouble sleeping and eating)
- Some students become angry
- Socially withdrawing or lack desire to return to class or work

RESOURCES

The National Students of AMF Support Network

www.studentofamf.org/grief-support-resources/college-grief-statistics/

Suggestions

What You Can Do

Respond with warm and kindness, but with firm reasoning

Remove extra stimulation of the environment and see them in a quiet atmosphere (if you are comfortable in doing so)

Acknowledge your concerns and state that you can see they need assistance

Acknowledge the feelings or fears without supporting the misconceptions

Reveal your difficulty in understanding them (when appropriate)

If situation is extreme and the student seems to need assistance, contact:

Personal Counseling Services: D-203,
(626) 585-7273

Utilize the Emergency Resource
Contact List on page 31 of this Guide

Complete the Maxient *C-PART*
Referral Form

What to Avoid

Arguing or trying to convince them of the irrationality of their thinking, which may lead them to defend their position (false perceptions) more ardently

Playing along, e.g., “Oh yes, I hear the voices”

Demanding commanding or ordering the student

POOR CONTACT WITH REALITY

It can be especially challenging and difficult when dealing with a student who seems to have poor contact with reality. A key characteristic of these students is that they exhibit thoughts or behaviors that are bizarre and seem to be out of touch with reality.

Signs and Symptoms

- Odd or peculiar beliefs that involve a misinterpretation of reality
- Hearing voices, belief that these voices are talking to them
- Seeing things that are not there
- Talking to themselves
- Laughing to self
- Disorganized speech or behavior (bizarre or incoherent language or writings)
- Failure to exhibit any emotion or displaying inappropriate emotions (laughing aloud in class when talking about serious topics)

RESOURCES

Mental Health and Wellbeing for College Students
learnpsychology.org/mental-health/

Suggestions

What You Can Do

Become aware of others around you.

Take time to listen

Learn to recognize the subtle cues and warning signs

Walk the student to Personal Counseling Services

If necessary, contact PCC Police and College Safety (626) 583-7484

Refer to Personal Counseling Services: D-203, (626) 585-7273

Complete the Maxient *C-PART Referral Form*

Call 9-1-1 if threat of suicide is imminent

What to Avoid

Minimizing the situation or depth of feeling, e.g., *“oh, it will be better tomorrow”*

Ignoring your limitations

Overcommitting yourself, therefore not being able to deliver on what you promise

Being afraid to ask the student if they want to harm themselves

SUICIDE

Suicide is the second leading cause of death among college students, killing more young people between the ages of 18 and 24 than all physical illnesses combined. Students may view suicide as a way out of a problem or crisis that is causing intense emotional pain and suffering. It is associated with feelings of helplessness, hopelessness and a need for escape. The person who is suicidal often sees very limited options for themselves, and views suicide as a problem-solving strategy to end the emotional struggle.

Signs and Symptoms

- Statements (verbal or written) implying the person does not intend to be around in the future
- Statements expressing hopelessness and a wish to die
- Preoccupation with death and dying
- Prolonged depressed mood
- Increased drug and alcohol use
- Deterioration in hygiene
- Social isolation
- Pessimistic view of the future

RESOURCES

National Suicide Prevention Lifeline 24-hour crisis line: *1-800-272-TALK (8255)*, www.suicidepreventionlifeline.org

Suicide Prevention Resource Center
www.sprc.org

Higher Education Mental Health Alliance
www.hemha.org

NAMI – Risk of Suicide
www.nami.org/learn-more/mental-health-conditions/related-conditions/risk-of-suicide

**AGGRESSIVE /
POTENTIALLY VIOLENT**

**DISRUPTIVE /
DISOBEDIENCE**

**EXCESSIVELY
DEMANDING / DEPENDENT**

DISTRESSING AND DISRUPTIVE STUDENTS

On occasion, you may find a student whose behavior is causing distress for you or others. These types of concerns vary greatly but can be broadly categorized by those who are excessively demanding or dependent, and those who are aggressive or perceived to be potentially violent.

Suggestions

What You Can Do

Immediately seek assistance, contact PCC Police and College Safety; leave the room/area as soon as possible

Prevent total frustration and helplessness by quickly and calmly acknowledging the intensity of the situation, e.g., *"I can see you are really upset"*

Explain clearly and directly what behaviors are acceptable, e.g., *"You certainly have the right to be angry, but breaking things is not okay"*

Stay safe; maintain easy access to a door/keep furniture between you and the student

Complete the online Maxient *Student Conduct Complaint Form*

What to Avoid

Ignoring warning signs that the person is about to explode (yelling, screaming, clenched fists, threats)

Threatening or cornering the student

Touching the student

AGGRESSIVE/POTENTIALLY VIOLENT

It is very difficult to predict aggression. When a student faces a frustrating situation that they perceive to be insurmountable, the student may become angry and direct that anger toward others. Yet, in spite of recent high-profile tragedies, a student acting out violently is fairly a rare event.

No one can predict violence. There are indicators that suggest a person may have the potential for violence. These include having a prior history of family violence or abuse, volatility or inability to control aggressive impulses due to organic or learned behavior.

Signs and Symptoms

- Hostile, suspicious and agitated behavior
- Extreme dependency
- Delusions and hallucinations
- Potential loss of control
- Anger or predatory behavior
- Loud and pressured verbal communication

RESOURCES

National Behavioral Intervention Team Association (NaBITA)
www.nabita.org

Suggestions

What You Can Do

Acknowledge their anger and frustration, e.g., *"I hear how angry you are"*

Reduce stimulation: invite the student to a quiet place if this is comfortable and the place is safe

Allow them to vent, express their feelings, and tell you what is upsetting them; listen

Be direct and firm regarding the behaviors you will accept, e.g., *"Please stand back, you are too close"*, *"I cannot listen to you when you yell and scream at me that way"*

Remember: Safety First

Prohibit the student from entering your work area/classroom/office, if behavior continues

If situation is extreme and the student seems to need assistance, contact: PCC Police and College Safety, (626) 585-7484

Inform the Division Dean of the situation

Complete the online Maxient *Student Conduct Complaint Form*

What to Avoid

Engaging into an argument or shouting match

Becoming hostile or punitive, e.g., *"You cannot speak to me that way!"*

Ignoring the situation

Touching the student

DISRUPTIVE/DISOBEDIENCE

Disruptive behaviors may include using profanity, talking loudly, arguing instead of discussing; or challenging everything presented as right or wrong, or out of control yelling in anger.

It is important to take precautions to take care of yourself and others in the situation if the person is behaving menacingly. Ask the student to talk privately away from the group and try to calm the situation.

Faculty may (and should) remove a disruptive student from class addressed in Administrative Procedure (AP) 5500. Removal from class (Education Code § 76032): Any instructor may order a student removed from class for the day of the removal and the next class meeting.

See Board AP 5500 -Misconduct Penalties

b. Temporary Class Removal – Removal of a student from a class by the instructor when the student's behavior has interfered with the teaching/learning process within the classroom/laboratory environment. A student may also be removed from the instructional setting if the instructor determines that the student's actions are unsafe and/or dangerous to self or others. In either case, the duration shall not exceed the day of the removal and the next class meeting. Temporary class removal may be undertaken only after the instructor has warned the student and given the student a chance to improve, except in cases where the violation is so flagrant that immediate removal from the class, clinic, or laboratory is in order. The instructor must notify the Division Dean of the temporary class removal.

RESOURCES

Non-Academic Violation Form:
www.cm.maxient.com/reportingform.php?PasadenaCityCollege&layout_id=2

Suggestions

What You Can Do

Allow them to make their own decisions

Set firm and clear limits on your personal time and involvement

Offer referrals to other resources on and off campus

Set and enforce limits to prevent disruption of a class

If situation is extreme and the student seems to need assistance, contact:
PCC Police and College Safety, (626) 585-7484

Division Dean or Supervisor

Complete the online Maxient *C-PART Referral Form*

What to Avoid

Feeling obligated into providing advice, special conditions, changing your schedule, etc.

Attempting to take of the student or feeling guilty about not doing more

Ignoring the student as an alternative to setting and enforcing limits

Allowing the student to intimidate you

EXCESSIVELY DEMANDING/DEPENDENT

There are students whose personal styles create interpersonal difficulties for those around them. These students often present with a sense of entitlement, are unwilling to listen, cannot take “no” for an answer, exhibit disrespect or verbal abuse toward others, or act in a persistently demanding way.

Students who are demanding can be intrusive and persistent and may require more time and attention. Demanding traits can be associated with anxiety, panic, depression, personality problems and/or thought disorders, mania, substance abuse.

Signs and Symptoms

- A sense of entitlement
- An inability to empathize
- A need for control
- Difficulty in dealing with ambiguity
- Often intrusive and persistent
- Strong drive for perfectionism
- Difficulty respecting structure, limits and rules
- Dependency on others to take care of them.
- Elevated mood
- Substance abuse

RESOURCES

National Behavioral Intervention Team Association (NaBITA)
www.nabita.org



SUBSTANCE ABUSE

WELLNESS DISTRESS



Students may become distressed due to trouble with transitions, academic difficulties, or health and wellness concerns. In this section, we will provide information on the following health and wellness concerns specifically related to substance abuse, and list educational resources for anyone interested in learning more.

Suggestions

What You Can Do

Address the substance abuse issue if the student is open and willing

Offer concern for the student's overall well-being

If situation is extreme and the student seems to need assistance, contact:

Personal Counseling Services: D-203,
(626) 585-7273

Utilize the Emergency Resource
Contact List on page 31 of this Guide

Complete the Maxient *C-PART
Referral Form*

What to Avoid

Judging or criticizing the student's
substance abuse

Making allowances for the student's
irresponsible behavior

Ignoring signs of intoxication in the
classroom

SUBSTANCE ABUSE

Faculty and staff usually are the ones who identify alcohol abuse by a student.

Irresponsible, unpredictable behavior affecting the learning situation (i.e., drunk and disorderly in class), or a combination of the health and social impairments associated with alcohol abuse noticeable sabotages student performance. Due to denial that exists in most substance abusers, it is important to express your concern to the student in terms of specific changes to behavior performance rather than terms of suspicions about alcohol/drug abuse.

Signs and Symptoms

- Decline in class attendance (tardiness, disappearance from class for long periods)
- Physical signs (bloodshot eyes, slurred speech, and poor hygiene)
- Behavioral signs (avoiding eye contact, fatigue, hyperactive)
- Changes in mood (depression, emotional instability, angry, irritable, aggressive behavior)

RESOURCES

Addiction Resource
www.addictionresource.com

Guidebook to Addiction on College Campuses
www.learnpsychology.org/college-campus-addiction-resources/

Drug Rehab-Advice Center
www.help.org



SEXUAL HARASSMENT

HARASSMENT



Sexual harassment is a form of discrimination. Federal legislation that addressed discrimination are Title VI and Title VII of the Civil Rights Act of 1964 and Title IX of the Educational Amendments of 1972.

Suggestions

What You Can Do

Listen carefully to the student, validating their experience

Separate your personal biases from your professional role - maintain objectivity

Encourage the student keep a log or find a witness

Assist the student to seek informal advice through a counselor

For further assistance, please contact:

Title IX Office, (626) 585-7310

PCC Police and College Safety,
Chief of Police, (626)585-7484

Personal Counseling Services,
(626)585-7273 (confidential resource)

Deputy Title IX Coordinator/Dean of
Student Life, (626) 585-7384

Complete the Maxient *C-PART*
Referral Form

What to Avoid

Ignoring the situation; avoiding action invalidates the student's report to you

Overreacting

SEXUAL HARASSMENT

Sexual harassment involves unwelcome sexual advances, requests for sexual favors and other verbal or physical contact. You usually see these behaviors 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 than counts. As long as the conduct interferes with a student's academic performance or creates an intimidating, hostile or offensive learning environment, it is sexual harassment.

Signs and Symptoms

Sexual harassment usually is not an isolated one-time-only case but a repeated pattern of behavior that may include:

- Comments about one's body or clothing
- Questions about one's sexual behavior
- Demeaning references to one's gender
- Sexually oriented jokes
- Conversations filled with innuendoes and double meanings
- Displaying of sexually suggestive pictures or objects
- Repeat non-reciprocated demands for dates or sex

Common reactions of students who have been harassed is to doubt their perceptions, wondering if it was joke, did it really happen, or if in some way, they have brought it on themselves. A student may begin to participate less in the classroom, avoid or drop classes, or even change majors.

RESOURCES

TITLE IX: SEXUAL HARASSMENT, SEXUAL ASSAULT, NON-DISCRIMINATION
www.pasadena.edu/hr/eeo/title-ix/index.php



ABUSIVE RELATIONSHIPS

SEXUAL ASSAULT / SEXUAL VIOLENCE

STALKING

TRAUMA AND ABUSE



Some students may experience distress after abuse or trauma. Without proper support, survivors can develop post-traumatic stress disorder (PTSD), Acute Stress Disorder, Adjustment Disorder, or other anxiety related conditions. In this section, we will provide information about the various types of trauma/abuse listed below and list educational resources for anyone interested in learning more.

Suggestions

What You Can Do

Meet with the student in private

Remember that abusive relationships involve complex dynamics including high levels of denial and thus, are difficult to change

Encourage the student to seek support via on and off-campus resources

Refer the student to the Title IX Deputy Coordinator for Students (626) 585-7384

Consult with the C-PART on the best ways to assist the student

What to Avoid

Pressuring the student to leave the abusive relationship without careful safety planning with a professional (without this, it exposes the student to greater danger)

Blaming the student for not leaving the relationship

ABUSIVE RELATIONSHIPS

Abusive relationships often involve a repeating pattern of verbal, sexual, emotional, and physical abuse that increases over time. The offender could be a romantic partner, a parent or guardian, or a care attendant.

Signs and Symptoms

- Verbal abuse
- Isolation from friends and family
- Fear of abuser's temper
- Feeling trapped
- Acceptance of highly controlling behavior
- Assuming responsibility for other's abusive behavior

RESOURCES

An Abuse, Rape & Domestic Violence Aid & Resource Collection
www.aardvarc.org

U.S. Department of Justice Office on Violence Against Women
www.justice.gov/ovw

Suggestions

What You Can Do

Listen to what the student tells you and believe them

Encourage the student to seek support

Refer the student to the Title IX Deputy Coordinator for Students (626) 585-7384

Refer to Personal Counseling Services: D-203, (626) 585-7273

Complete the online Maxient *Title IX Complaint Form*

What to Avoid

Do not ask a lot of prying questions as you may inadvertently send the message that you do not believe the student or you are questioning how they handled the situation

Do not blame the student for what happened regardless of the circumstances under which the assault occurred

Do not be skeptical or show that you do not believe the student

The vast majority of students do not invent stories regarding sexual assaults

Do not try to be the student's only support. Recovery takes a long time and often involves the need for professional services

Do not pressure the student to report the crime

Do not report the crime against the student's wishes

SEXUAL ASSAULT/SEXUAL VIOLENCE

The definition of sexual assault is any sexual contact or activity that is forced or non-sensual. It includes a person's inability to give consent because of threat of harm, coercion and/or physical violence; due to being under the influence of alcohol or drugs, unconscious, or asleep; or due to mental, developmental or physical disability.

Signs and Symptoms

- Shock, confusion disbelief or denial
- Disruption in routines of daily life (unwanted memories, flashbacks, nightmares)
- Concerns for personal safety (fear, sense of powerlessness, loss of control)
- Self-blame, guilt and/or shame
- Intense feelings and emotions (apathy, detachment)
- Increase alcohol/substance use
- Psychological disorders (major depression, post-traumatic stress disorder)
- Relationship difficulties
- Academic or work problems (lack of motivation, missing deadlines, not completing assignments)

RESOURCES

Peace Over Violence, (626) 793-3385
www.peaceoverviolence.org/

Rape and Battering Hotline, (626) 793-3385

RAINN (Rape, Abuse, and Incest National Network)
www.rainn.org/

National Center for Victims of Crime
victimsofcrime.org/

California Coalition Against Sexual Assault
calcasa.org/

An Abuse, Rape & Domestic Violence Aid & Resource Collection
aardvarc.org

Suggestions

What You Can Do

Encourage the victimized student to trust their instincts

Advise the student to contact PCC Police and College Safety

Advise the student to document unwanted contacts and maintain evidence of harassment

Advise the student to take precautions to ensure safety, including a change in routine travel routes and schedules

Refer the student to the Title IX Deputy Coordinator for Students, (626) 585-7384

Complete the online Maxient *C-PART Referral Form*

What to Avoid

Do not ignore or minimize the situation

Do not suggest that the student is responsible for the unwarranted attention

Do not take responsibility for protecting the student

STALKING

Stalking is defined as the repeated following or harassment of an individual in the attempt to install a sense of fear or danger. Stalkers often have an irrational obsession with the victim and try to gain power through control and intimidation. Stalking behaviors include following the victim as well as harassment via telephone, email, social media, letters, unwanted gifts and unwanted attentiveness.

Signs and Symptoms

- Fear of a partner, acquaintance or strangers
- Sadness and/or symptoms of depression
- Emotional numbness
- Low self-esteem, low self-worth
- Helplessness
- Poor eye contact
- Restrictions placed on travel, telephone use, friendships or money
- Appearing isolated from family or friends
- Unexplained excuses from work or class

MANDATED REPORTERS

PCC faculty, staff, and student employees who serve in leadership positions, supervise staff, or hold roles that require them to report other Code of Conduct violations are Mandated Reporters (also known as "responsible employees"). These individuals are required to report Sexual Assault, Domestic and Dating Violence, and Stalking to a Title IX Coordinator. Mandated Reporters cannot honor requests to maintain confidentiality but when they share personally identifiable information, they share only with those who have a legitimate need to know and with as few people as possible.

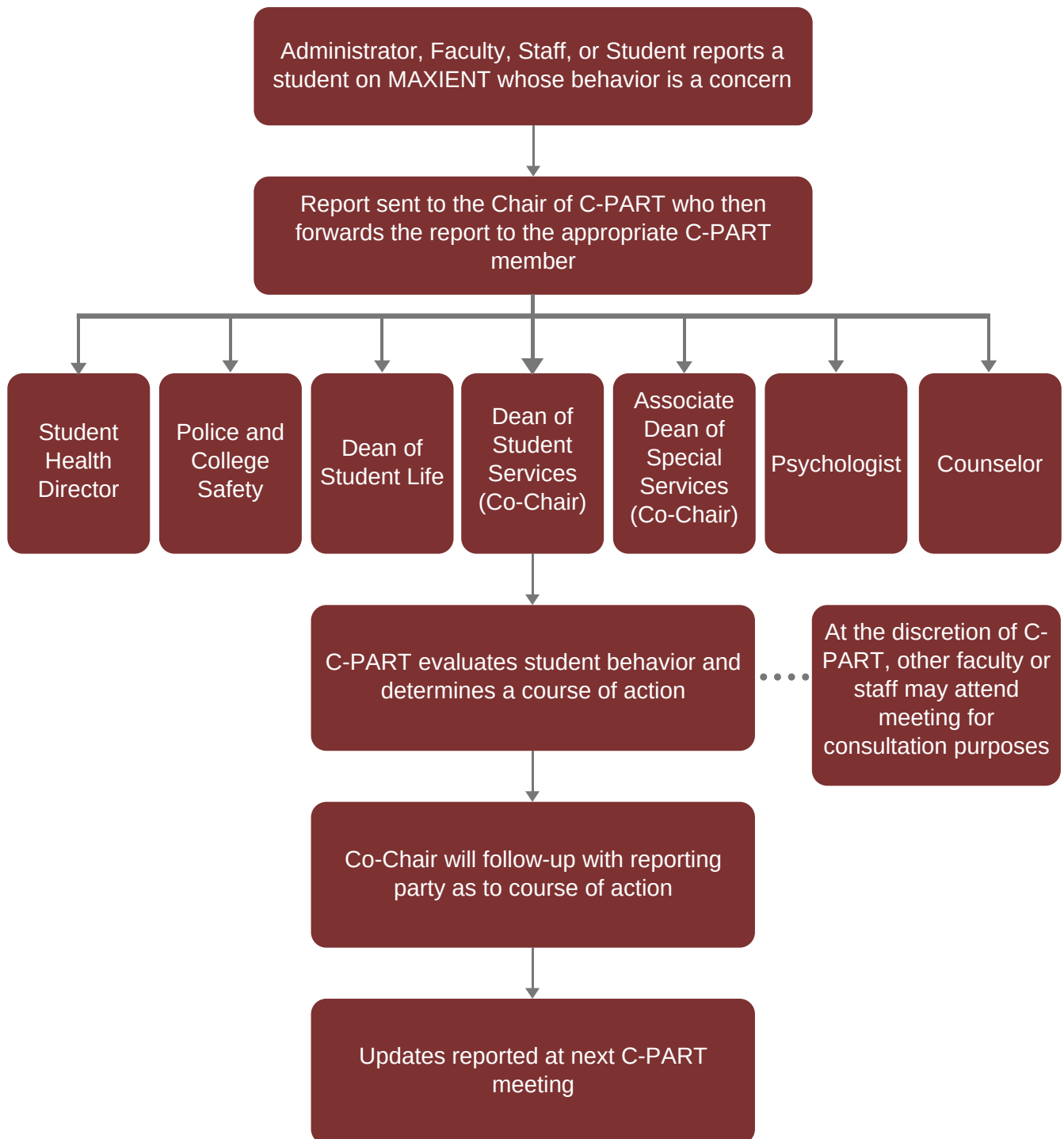
RESOURCES

The Stalking Resource Center, A Program of the National Center for Victims of Crime
www.victimsofcrime.org/our-programs/stalking-resource-center

APPENDICES



CRISIS PREVENTION AND RESPONSE TEAM (C-PART) REFERRAL FLOW CHART



EMERGENCY RESOURCES CONTACT LIST

Center for Pacific Asian Families

(1-800) 339-3940 (toll free)

Crisis Text Line

Get Help Now: Free, 24/7, Confidential

Text HOME to 741-741

Emergency Outreach Bureau

(1-800) 854-7771

National Domestic Violence

(1-800) 790-SAFE (7233)

**National Sexual Assault Hotline 24-hour online
hotline**

(1-800) 656-HOPE (4673)

National Suicide Prevention Lifeline

(1-800) 272-TALK (1-800-273-8258)

**Haven House (shelter & counseling for family
violence)**

(626) 564-8880 & (323) 681-2626 (Hotline)

Pasadena YMCA Rape Hotline

(626) 793-3385 (English/Spanish)

Suicide Prevention Center

(1-877) 727-4747 (toll free)

**The Trevor Lifeline (Suicide Prevention for
LGBTQ Youth)**

(1-800)-4-U-TREVOR (1-866-488-7386)

Treatment Referral Hotline (Substance Abuse)

(1-800) 662-HELP (4357)

Veterans' Suicide Prevention Lifeline

(1-800) 273-TALK (8255)

Information and referral for all alcohol and other drug related problems. Up-to-date listing of 12-step (recovery) group meetings, inpatient programs, outpatient counseling services, and prevention activities in the San Gabriel Valley area.

Pasadena Mental Health Center

1495 N. Lake Avenue
Pasadena, CA 91104
(626) 798-0907

Low cost counseling for personal or family problems; information and referral; no medication or hospitalization services, bilingual/bi-cultural Latino counseling program.

Peace Over Violence Rape and Battering Hotline

(English/Español)

West San Gabriel Valley Center
892 N. Fair Oaks Avenue, Suite D
Pasadena, Ca 91103-3046
(626) 793-3385

Emergency hotline offers emotional support, information, referral and advocacy services, to victims of sexual assault, domestic violence and stalking. This confidential, non-judgmental hotline is available 24 hours a day, seven days a week.

Suicide Prevention Center

4760 Sepulveda Boulevard
Culver City, CA 90230
(877) 727-4747 (Crisis Line: Toll free)

The Didi Hirsch Mental Health Services provide a continuum of prevention, early intervention and treatment services for individuals, families and the community. Their suicide prevention center has a 24-hour a day, seven days a week crisis line, the suicide prevention hotline is a free and confidential telephone service.

Westminster Center

867 E. Atchison Street
Pasadena, CA 91104
(626) 798-0915

Mental health center serving Pasadena, Altadena, and the surrounding areas.

ADDITIONAL RESOURCES

California Mental Health

www.calmhsa.org

Navigating a Mental Health Crisis

National Alliance and Mental Illness
www.nami.org

What is the difference between a Mental Health Emergency and a Mental Health Crisis?

University Hawaii, Honolulu, Community College
www.honolulu.hawaii.edu/sites/www2.honolulu.hawaii.edu/files/wellness-difference-emergency-crisis.pdf

DEFINITION OF TERMS

Anxiety: Exaggerated fear of failing, nervousness and difficulty concentrating, tendency to overact with fear, or manic talking or frenzied activity.

Behavior of Concern: Any conduct of behavior that interferes with students attaining their academic goals, maintaining the orderly operations of the college, or presents a threat to the health and safety of the campus community.

C-PART: The Crisis Prevention and Response Team (C-PART) is a multi-disciplinary group who meets regularly to assess, evaluate, and respond to reports submitted concerning an enrolled student's behavior and/or the behavior of another campus community member. Typical reports pertain to students of concern who exhibit signs of distress, show a disturbance and/or that present a danger.

Delusional Behavior: Distortion of reality, i.e., belief that they are being singled out, or that they are super special individuals with special gifts or talents, or that the instructor is deliberately mistreating them.

Demanding Student: Sense of entitlement, an inability to empathize, a need to control, difficulty dealing with ambiguity, a strong drive for perfection, difficulty respecting structure, limits and rules, dependency on others to take care of them, and a fear of dealing with realities of life.

Depression: Sudden change in interest in class, flattened feelings, sad or fatigued, irritable, complaints of insomnia, and loss of desire to be in school or with friends.

Disruptive Classroom Behavior: Any conduct that makes it difficult for faculty to teach or students to learn.

Harassment, General: A student complains that another student has been making demeaning remarks or treating them in an acceptable manner.

Harassment, Sexual: Unwelcome sexual advances, requests for sexual favors and other verbal or physical contacts; it is usually found in the context of a relationship of unequal power, rank or status.

Disruptive Student: Any conduct that interferes with the orderly operations of the college, or presents a threat to the health and safety of the campus community.

Maxient: A client record management software program designated to assist with behavior management on college or university campuses.

FERPA: Family Educational Rights and Privacy Act; the federal law that protects the privacy of student educational records, which applies to all schools receiving federal funding via the U.S. Department of Education.

Suicide Potential: Irrational thinking regarding how bad life is, now and in the future. High-risk indicators include: feelings of hopelessness and futility; a sever loss or threat loss; a detail suicide plan; a history of a previous attempt; history of alcohol or drug abuse; feelings of alienation and isolation.

Threat: A person or issue likely to cause physical or mental danger or harm.

Title IX: A section of the Education Amendments of 1972 in U.S. Law, it states, “No person in the United States shall, based on sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity receiving federal financial assistance.”

Verbally Aggressive Student: Explosive outburst or ongoing belligerent, hostile behaviors become a student’s way of gaining power or control in an otherwise out-of-control experience and student’s anger at the world, and others become the object of increasing frustration.

Violence: Violence, because of emotional distress, is rare and typically occurs when the student’s level of frustration has been so intense or of such an enduring nature as to erode all of the student’s emotional controls.

Notice About This Guide

As a resource, the intention of this document is to provide the most essential information that a PCC employee will need to assist PCC students in crisis, as well as students struggling with important but less urgent challenges. As a member of a caring community, all of us play important roles in nurturing the development of our students. The Guide outlines important information regarding mental health. It also examines the role you play in providing a support academic environment that includes assisting students who may be in distress. These may include interpersonal conflict, recent changes in health, family relationships, time management, grief, a lack of personal goals and direction.

Regardless of the situation, use sound judgment and call PCC Police and College Safety (626) 585-7484 or the Personal Counseling Services Office (626) 585-7273, if in doubt.

Please note that if you have access to any district office telephone, you may dial 911, these calls are directly routed to the Police and College Safety dispatch.

REFERENCES

Assisting the Emotionally Distressed Student, A Guide for Staff, Faculty, and Administrators, Imperial Valley College, 2018-2019.

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Crisis Intervention Procedures & Guidelines for Assisting the Emotionally Distressed Student, Cabrillo College, 2011-202=12.

Crisis Intervention Procedures Manual, Guide for Administrators/Faculty/Staff, Allan Hancock College, 2017.

Crisis Response & Wellness Handbook, Los Mendanos College, 2019.

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Helping Students in Distress, A guide for Faculty & Staff, Rio Hondo College, 2016.

Mental Health Services Report, California Community Colleges, 2019.

National College Health Assessment, American College Health Association, 2015.

Promoting Student Mental Health, a Guide for UC Faculty, University of California, 2015-2016.

Student Conduct Team: A Guide for Behavior Assessment, Response, and Intervention, Citrus College, (undated).

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