

A guide for Staff, Faculty,
and Administrators at
Imperial Valley College



Dear Colleagues,


Attending college is a journey that brings moments of excitement, challenge, and reward for many of our students. At times, however, our students' educational path is impeded by psychological, financial, social, and family pressure that overwhelms many, even the well-adjusted student.

5h= a dYf]U` J U`Ym 7c`Y[Yž`k Y` \Uj Y`gYj YfU`dfc[fUa g`j]b`d`UW`hc`UXXfYgg`ci f`gh XYbhg`
myriad needs. Included in these programs are ongoing mental health counseling, crisis support, campus safety, student services, and student development.

Additionally, IVC has a Behavioral Care Team (BCT), comprised of campus members trained and experienced in working with students who pose a risk to the safety of the campus community. Clinical Mental Health Counselors are also available and will be called by Campus Safety Officers as needed.

We, as faculty, staff, and administrators, are often students' first point of contact when they are experiencing emotional distress. This guide was created to provide you with resources in





As a faculty, staff or administrator interacting with students, you are in an excellent position to recognize behavior changes that characterize the emotionally distressed student. A student's inability to articulate their concerns or inability to recognize the signs of emotional distress and to acknowledge your concerns directly to him/her is often noted by students as the most significant factor in their successful problem resolution.

- Be aware of early signs of distress
- Locate the closest phone to your work site
- Know your surroundings
- Memorize emergency numbers
- Read confidentiality and mandated reporting laws

IVC Deputy Sheriff: 760-483-7411 (Cell phone) or ext. 1111 (from ShoreTel)
IVC Campus Safety: 760-355-6308
Sure Helpline Crisis Center: 760-352-7878
Imperial County Crisis Line (24/7): 1-800-817-5292
Imperial County Crisis Referral Desk: 442-265





Suicide is the second leading cause of death among college students.



High-risk indicators include:

- Feelings of hopelessness
- Helplessness and futility
- A severe loss or threat of loss
- A detailed suicide plan, a history of a previous attempt
- History of alcohol or drug abuse
- Feelings of alienation and isolation.

Take the student seriously – 80 percent of suicides give a warning of their intent.

Be direct – ask if the student is suicidal, if he/she has a plan and if he/she has the means to carry out that plan. Exploring this with the student actually decreases the impulse to do it.

Be available to listen.

Activate the Crisis Protocol by contacting the Campus Deputy Sheriff or Safety Officers at 760-483-7411.

You can always call 9-1-1 if threat of suicide is imminent.

Assure the student that you are his/her best friend (it is ok to agree you are a stranger, but even strangers can be concerned.)

Be overly warm and nurturing.

:`UhhYf`cf`dUfhjWjdUhy`]b`h\Y]f`[`Ua`Yg/`mci`XcbDh`_bck`h\Y]f`fi`Yg"

Be cute or humorous.

Challenge or agree with any mistaken or illogical beliefs.

Be ambiguous.



5bl]Yhm]g'U'bcfa U''fYgdcbgY'hc'U'dYfWj] YX'XUb[Yf'cf'h'fYU'h'hc'cbY@] well-being.


Regardless of the cause, the resulting symptoms maybe experienced as rapid heart palpitations, chest pain or discomfort, dizziness, sweating, trembling or shaking, and cold, clammy hands. The student may also complain of difficultm'W'bw'bfUh]b[ž'U'k Umg'VY]b['í cb' h\Y'YX[Yž' \Uj]b['X]Z]W' hm'a U_]b['XYW]g]cbg'cf'VY]b['hc'c'ZYUfZ' 'hc'hU_Y'UW]cb" =b'fUfY' cases, a student may experience a panic attack in which the physical symptoms occur spontaneously and intensely in such a way that the student may fear he/she is dying. The following guidelines remain appropriate in most cases.

- Let them discuss their feelings and thoughts. Often this alone relieves a great deal of pressure.
- Provide reassurance.
- Remain calm.
- Be clear and directive.
- Provide a safe and quiet environment until the symptoms subside (refer student to Health Services for rest).
- Offer to refer him/her for Mental Health Counseling, and submit a Student of Concern Referral form.

- Minimize the perceived threat to which the student is reacting.
- Take responsibility for their emotional state.
- Cj Yfk \Y'a 'h\Ya 'k]h']bZcfa Uh]cb'cf']XYUg'hc'í Z]l 'h\Y]f'W'bx]h]cb"



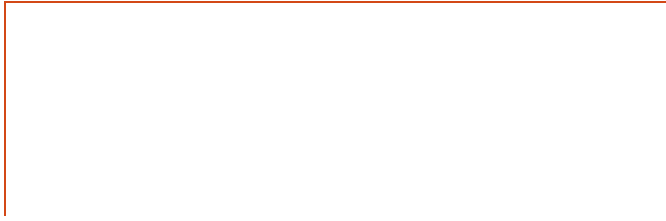
These students have difficulty distinguishing fantasy from reality, the dream from the waking state. Their thinking is typically illogical, confused or irrational; their emotional responses may be incongruent or inappropriate; and their behavior may be bizarre and disturbing. This student may elicit alarm or fear from others, they are generally not dangerous and are more frightened and overwhelmed by you than you are by them.



Respond with warmth and kindness, but with firm reasoning.
Remove extra stimulation from the environment, (turn off the radio; step outside of a noisy classroom).
Acknowledge your concerns, state that you can see they need help.
Activate the



Students may become verbally abusive when in frustrating situations that they see as being beyond their control.



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 is often associated with the use of alcohol and other drugs.

5W_bck `YX[Y`h\Y]f`Ub[Yf`UbX`Zfi ghfUh]cbž`Y"["ž`Í =\`YUf`\ck`Ub[fm`mci`UfY"Î`
FYd\`fUgY`k` \Uh`h\`Ym`UfY`gUm]b[`UbX`]XYbh]Zm`h\`Y]f`Ya`ch]cbž`Y"["ž`Í =WU`b`gYY`
how upset you are because you think your rights have been violated and
bcVcXmik]``]ghYb"Î`

Reduce stimulation; invite the person to a quiet place if this is comfortable and the place is safe.

Allow them to vent, get the feelings out, and tell you what is upsetting them; listen.

6Y`X]fYW]j Y`UbX`Z]fa`UVci`h`h\`Y`VY`Uj`]c]fg`mci`k`]``UVW`dhž`Y"["ž`Í`D`YUgY`ghUbX`
VUW`ž`mci`FY`hcc`WcgY"Î`Í =WU`bbch`]ghYb`hc`mci`k` \Yb`mci`mY``UbX`gW`fYUm`at
a`Y`h\`Uh`k`Um"Î`Í`@Y`h]ghYd`ci`hg]XY`hc`X]gW`gg`h\]g`Zi`fh\Yf"Î`

Activate response by contacting Campus Safety at



Violence due to emotional distress is rare, but it might happen.





Alcohol is the most widely used psychoactive drug. It is common to find alcohol abusers in college populations also abusing other drugs, both prescription and illicit. Patterns of use are affected by fads and peer pressure.

The effects of alcohol on the user are well known to most of us. Alcohol abuse by a student is most often identified by faculty. 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 noticeably sabotages 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/performance rather than terms of suspicions about alcohol/drug use.

Confront the student with the behavior that is of concern.

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

Contact the Campus Deputy or Safety Office at 760-483-7411 if you encounter a student under the influence on campus.

Do not drink with the student.

Do not drink with the student.

Make allowances for the student's behavior.


Ignore signs of intoxication in the classroom.



Typically, these students complain about something other than their psychological difficulties. They are tense, anxious, mistrustful, loners, and have few friends.



Sexual harassment involves unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct; it is usually found in the context of a relationship of unequal power, rank or status.




When a student is in an intimidating, hostile or offensive learning environment, it is considered sexual harassment.


Sexual harassment usually is not an isolated one-time-only case but a repeated pattern of sexual behavior, demeaning conversations filled with innuendoes and double meanings, displaying of sexually suggestive pictures or objects, and repeated non-reciprocated demands for dates or sex.

Sexual harassment of students is defined by the California Education Code, Section 89535. Common reactions by students who have been harassed is to doubt their perceptions, wondering if it was a 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.





Openly acknowledge to students that you are aware of their distress, you are sincerely concerned about their welfare, the welfare of those around them, and that you are willing to help. Exploring their alternatives can have a profound effect.


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1. Request to see the student in private. This may help minimize embarrassment and defensiveness.
 2. Briefly acknowledge your observations of them (specific to behaviors and or performance); express your concerns directly and honestly.
 3. Listen carefully to what the student may be troubled about and try to see the issues from his/her point of view without necessarily agreeing or disagreeing.
 4. 5hYa dh'hc]XYbh]Zm'h\Y'gh' XYbh'g'dfcV`Ya `cf`W`bWfb`Ug`k Y``Ug'mci f`W`bWfbg` or uneasiness.
 5. Unusual and inappropriate behaviors should not be ignored. Comment directly on what you have observed.
 6. Involve yourself in the process as it impacts your immediate work area and situation. At times, in an attempt to reach or help a troubled student, you may become more involved than time or skill permits.
 7. _____

_____ (Please see Administrative Policy 3518 under General Institution)


<https://www.boarddocs.com/ca/caiccd/Board.nsf/Public#>)I







STUDENT HEALTH CENTER TEAM



Angie Garcia, MSW
Office Assistant II
760-355-5704 or 760-355-6310

Guadalupe (Lupita) E. Castro, M.S.C., LMFT
Director of Student Health Services
Chair of the Behavioral Care Team

Jacqueline Cortez, M.S.C., LMFT
Licensed Marriage and Family Therapist (LMFT 108775)
Clinical Mental Health Counselor

Gabia Ambrocio, M.S.C., LMFT
Licensed Marriage and Family Therapist (LMFT 114501)
Clinical Mental Health Counselor

Ana V. Beltran, LVN
Licensed Vocational Nurse
Pioneers Memorial Healthcare District
760-355-6128

BEHAVIORAL CARE TEAM (BCT)





RESOURCE	PHONE	AVAILABILITY
Imperial County Behavioral Health	442-265-1525	M-F, 8am-5p
Adult Protective Services	760-337-7878	

