

Supporting Students in Distress:
Guidelines for Faculty
at the University of Guelph



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1. About

Contributors

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Purpose

This guide was developed by the Teaching Assistants' Training Program in response to the University of Toronto-wide effort to promote mental health. It is based on the systemic approach proposed in the University's Report of the Provostial Advisory Committee on Student Mental Health (2014). It aims to provide clear and comprehensive guidelines to respond effectively to students experiencing distress.

Target users

This guide targets Faculty who are front-line teaching and may encounter students experiencing distress in their work. Developed as a reference tool and manual, this guide contains authentic scenarios and examples to guide Faculty through the entire process of assisting students in distress and strategies for how to respond effectively to the difficulties and challenges of these complex situations.

Navigating the guide

The guide is divided into three parts. The first section offers a brief explanation of mental health and its framework at the University of Guelph. The second part explains the guidelines on how to recognize, respond, and refer students in distress. It guides Faculty on what to look for, what to say, and what to do when assisting students, all while ensuring their own safety and care. The third section lists various services and resources offered at the University of Guelph. It also outlines numerous resources in the greater community (at city and provincial levels).

2. Your Role as a Faculty at the University of Guelph

As a Faculty at the University of Guelph, you play an important role in fostering an environment that promotes student mental health and well-being. As a faculty member, yours is a front-line role, which means that you may be one of the first people to notice when a student is experiencing distress. Students may also choose to disclose to you that they are facing difficulty or are in distress; your ability to recognize when a student may be in distress and require help makes you a key figure in supporting early intervention, something that may be critical to preventing an escalation of the issue. This guide is intended to help you feel confident in responding to students in distress and referring them to available campus or community resources.

3. Understanding Mental Well-being

While most students flourish during their undergraduate and graduate years, many others experience challenges that may put them at risk. One's sense of well-being can range from healthy and flourishing behaviour where students feel comfortable, confident and capable of performing, to experiences involving anxiety and stress, to clinical disorders that persist and impair their ability to function in a safe and productive manner. The Centre for Addiction and Mental Health (CAMH) defines mental health as follows:

"Mental health involves finding balance in all aspects of your life: physically, mentally, emotionally, and spiritually. It is the ability to enjoy life and deal with the challenges you face every day - whether that involves making choices and decisions, adapting to and coping in difficult situations, or talking about your needs and desires." (CAMH, 2003, 11)

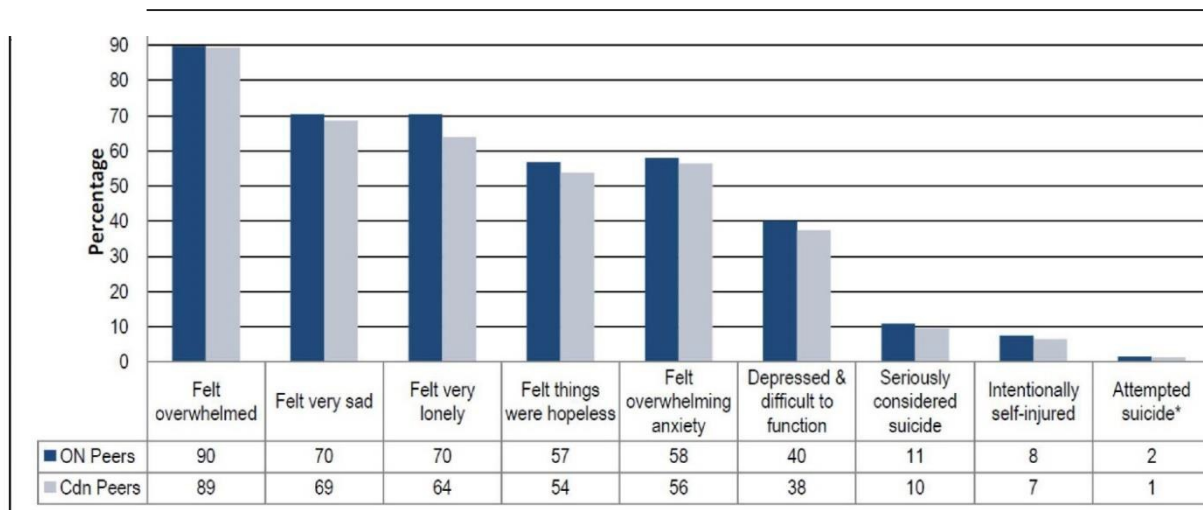
"Mental illness is the term used to refer to mental health problems that are diagnosed and treated by mental health professionals. This would include such problems as depression, bipolar disorder, anxiety, social phobia, eating disorders, schizophrenia, and personality disorders." (CAMH, n.d.)

Mental illness is not a result of personal weakness, character flaws, poor upbringing, or lack of intelligence. They can arise from a myriad of complex psychological, social, and biological factors.

According to CAMH, an estimated one in five Canadians, in any given year, will experience a mental health or addiction problem.

The graph below illustrates how commonly post-secondary students experience emotional or psychological difficulties in Canada. In the 2013 American College Health Association-National College Health Assessment (ACHA-NCHA) survey, students responded in the following way:

The experience of students within the past 12 months...

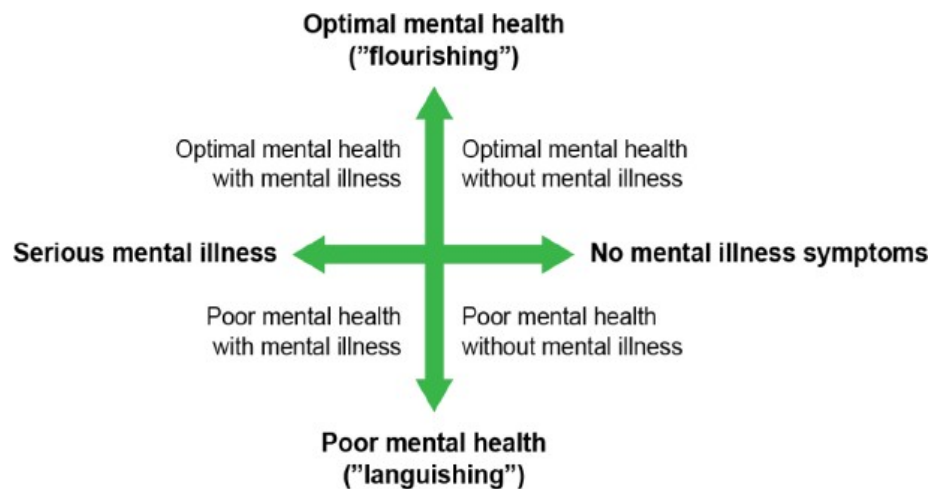


(American College Health Association-National College Health Assessment II (ACHA-NCHA-11), 2013, 13p 14.)

4. Flourishing and Languishing: The Dual Continuum

Mental health and mental illness are not mutually exclusive. With the proper care and support, a student experiencing mental illness may have very positive mental health. Likewise, a student without any diagnosable mental illness may be experiencing poor mental health. Poor mental health may be the result of many factors, such as an inability to cope with demands or adversity, the absence of a support network and meaningful relationships, poor self-esteem, and/or a tendency towards all or nothing thinking.

The graph below demonstrates the dual continuum of mental health and mental illness:



(Dual Continuum Model of Mental Health and Mental Illness; McKean, 2011; taken from Report of the Provostial Advisory Committee on Student Mental Health (2014).)

A student who has a diagnosis of a mental illness can have a high level of mental health and be flourishing. Conversely, a student who has no diagnosable mental illness and who has a low level of mental health can be languishing. Though supporting mental illness may require tailored intervention, mental health – like physical health – is something that we can all work to improve in ourselves and support others to improve as well.

5. Understanding Student Distress

Most often, the term "distress" describes the emotions or feelings that interfere with a person's ability to carry out daily activities. Distress is closely related to the term "crisis", which can occur when a student experiences distress and their resources have been overwhelmed by demands or challenges. As an example, a student in distress may be struggling with their academics or day-to-day tasks and this struggle, if prolonged and intense, may evolve into a crisis. These events are in response to a real/perceived threat, barrier, or traumatic incident but also presents an opportunity for change and growth (Ontario College of Art and Design University, 2014).

Early identification that a student is in distress supports early intervention and the possible prevention of an escalation to crisis.

Distress in a student's life can emerge from a variety of challenges:

- a. A student who may be the first in their family to attend post-secondary study
- b. A student who may be coming to the University from a distant country and culture
- c. Living with a diagnosed or undiagnosed mental illness
- d. Identifying with an underrepresented group, such as Aboriginal students or students with disabilities
- e. Experiencing societal discrimination as a result of gender, religion, or sexual orientation
- f. Living with a learning disability
- g. Managing personal health problems
- h. Experiencing external challenges owing to financial or familial obligations
- i. Substance abuse or addiction
- j. Sexual harassment and/or sexual assault

Of course, current challenges associated with the COVID-19 pandemic may also contribute to students' stress and distress, and may exacerbate existing mental health challenges.

Stigma may also motivate distress. This refers to the negative qualities and perceptions that are attributed to people with mental health problems. Stigma is often associated with discrimination, prejudice, and stereotypes. People often avoid or delay medical care and treatment for their mental health problems because of stigma and the fear others will see them as "weak" or "different".

The negative reaction to mental illness leads to discrimination that can be as hard for people to deal with as the symptoms of the disorder itself. For people with mental illness, stigma can be a barrier to finding a place to live, finding a job, finding friends, building a long-term relationship and connecting to the broader community – things that benefit mental health (CAMH, 2001, 7.)

Unfortunately, sometimes stigmatized individuals adopt popular prejudices themselves, a process known as self-stigma. As a result, they may experience a loss of confidence or self-esteem that exacerbates their mental health challenges and prevents them from seeking needed support.

6. Guidelines on How to Recognize, Respond, and Refer Students in Distress

Use this document as a guide to help you know what to look for (recognize), say (respond), and do (refer).

Given that the mental health and well-being of students is a shared responsibility for all campus community members, it is important that you become aware of warning signs, learn how to assist students who are in distress, and effectively refer students to various University of Guelph services and resources.

There are people and services on campus to assist you in dealing with distressed students. Common reasons for consulting include determining the seriousness of a situation and how quickly it needs to be addressed.

Recognize: what to look for

Observing and recognizing when a student is in distress may be relatively straightforward when the signs are obvious. But when the signs are more subtle, it's more difficult and you may feel reluctant to intervene. In such cases, you can look for a number of indicators in a student's thoughts, feelings, actions, and academics.

Respond: what to say

Regardless of our individual roles on campus, any one of us may have the opportunity to help prevent the distress of a student from becoming a crisis. As a Faculty member, you may be in a unique position to respond to a student and provide guidance.

Refer: what to do

There may be any number of circumstances in which it would be appropriate for you to refer a student for help. In such cases, help the student to explore sources of possible support.

These three stages will be examined in the following section of the manual.

6.1 *Recognize: how to recognize that a student is in distress*

Changes in mental well-being may be reflected in the way a student thinks, feels, and acts. A student's academic performance may also be affected. You may notice one or several indicators that could suggest that a student is experiencing difficulty, or you may have a gut-level feeling that something is amiss.

Indicators of distress from students

Thoughts:

- Fearful – worried about what others will think, worried that others will notice something is wrong, not understanding what they're experiencing
- Obvious confusion
- Statements of hopelessness or helplessness
- Overt references to suicide or threats of harm to others
- Extreme and repeated suspiciousness, paranoia

Feelings:

- High levels of nervousness and worry
- Decreased motivation, lethargic
- Feeling lonely, isolated, misunderstood, or worthless
- Extreme mood swings or persistent low mood
- Agitation, restlessness, or hyperactivity
- Unusual emotional reactions (e.g., inappropriate anger, crying, giggling) or being inexpressive/devoid of emotion

Actions:

- Behaviour that is a significant and persistent change from usual behaviour
- Isolating self from others. Little or no participation in activities they once enjoyed
- Significant problems with roommates, friends, or family
- Deterioration in personal hygiene. Sudden, unexplained weight gain or loss
- Frequent requests to talk/meet with you or other support persons in private

- Repeated hostile, sarcastic, or inappropriate remarks
- Seeing or hearing things that are not there

Academics:

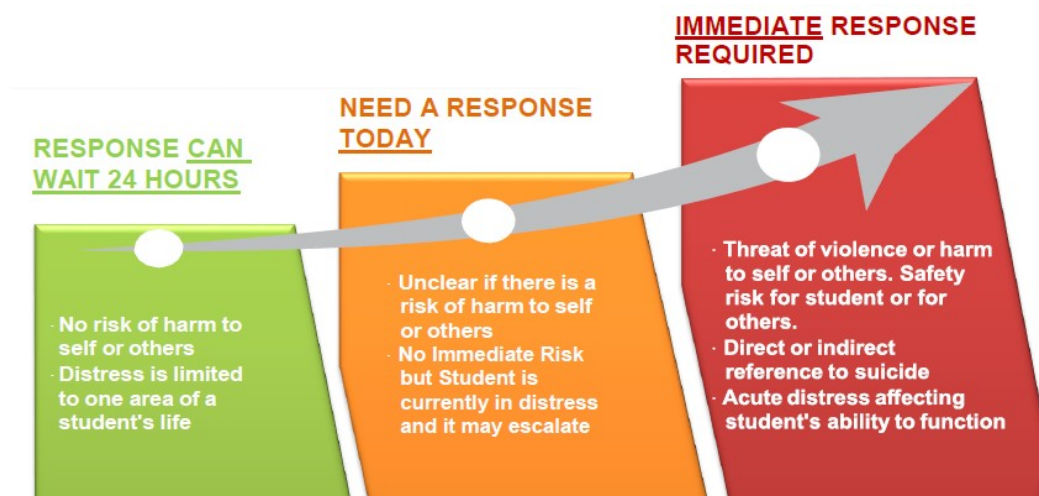
- Frequently missing classes and not handing in academic work
- Increased difficulty or inability to concentrate
- Written work that includes emotional outbursts, self-loathing, hopelessness, or disorganized thinking
- Avoiding classes when presenting or participation is expected
- Aggressive or disruptive behaviour in class

It is possible that a student exhibiting just one of the signs of distress is only having an off day. However, any single safety risk indicator (e.g., a student writes a paper expressing hopelessness and thoughts of suicide) or a cluster of lesser signs (e.g., emotional outbursts, repeated absences, and noticeable cuts on the arm) indicates a need to take action to support the student. Rather than noticing certain indicators, you may have a hunch or gut-level reaction that something is wrong.

Responding to different levels of distress/crisis

The University of Guelph employs a system to better recognize students in distress or crisis, and to identify emergency indicators. Please see the image below.

Please refer to the Reference Guide in Section 8 below for further information on stages of distress and assistance with identifying which campus and community services are appropriate.



Note: This document was created by the Centre for Teaching Support & Innovation, Teaching Assistants' Training Program, and the University of Toronto. Student Wellness at the University of Guelph has been given permission to use and modify this document.



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Students who are verbally aggressive and potentially violent

When a student is faced with a frustrating, seemingly insurmountable challenge, they may express anger toward others. Additionally, drugs or alcohol may increase some students' propensity for aggressive behaviour. Certain social situations may also elicit aggressive responses. In some cases, the aggression may be indicative of the onset of a mental health challenge. It is worth noting that students rarely act out violently.

Violence cannot be predicted, but there are some observable indicators that suggest a person may pose a danger of becoming violent. These include difficulty controlling emotions or behaviour, or difficulty controlling aggressive impulses. Since you will not always know the historical or immediate background of a student, it is important for you to be aware of "concerning behaviours" and to respond appropriately.

What you can do in an escalating situation

These are some things that you can do when you notice the situation is escalating:

- If you are concerned that a student may be violent, do not arrange to meet with them until you have consulted senior personnel or campus security to determine if this is an appropriate course of action.
- If a student seems to become angry during a meeting, use a time-out strategy (ask the student to reschedule a meeting with you after they have taken more time to think about their response).
- Stay calm and set limits (explain clearly and directly what behaviours are acceptable).
- Enlist the help of a co-worker (avoid meeting alone or in a private office with the student).
- If you feel it is appropriate to continue meeting with a distressed student, remain in an open area with a visible means of escape (remain at a safe distance, sit closest to the door, and keep a phone available to call for help).

Assess your level of safety and be cognizant of your intuition. **Call the campus police/local police if you feel the student may harm themselves, someone else, or you.**

6.2 Respond: how to interact with a student in distress

As a Faculty member, you may be in a position to help a student in distress. There are a number of strategies you could use to make your engagement with the student a supportive one.

Strategies for interacting with students in distress

Respect their right to privacy

When approaching the student, do so when others are not around so as to avoid any possible embarrassment to the student. This may help avoid a defensive response and increase the likelihood that the student will be open and honest with you.

Be direct & specific

Tell the student the specific behaviours you've observed and are concerned about. For example, you could say, "I've noticed that you're spending a lot of time alone and that you seem more sad than usual," rather than "are you okay?" or "is anything wrong?"

Listen actively

Choose a time when disruptions will be unlikely. Listen carefully and reflect back what you think you've heard. For example, say, "what I hear you saying is that you're really struggling with some personal issues and you're worried about how it's affecting your academics." Allow the student time to clarify or confirm your understanding.

Avoid giving immediate advice

Listen and try to understand what is distressing the student before giving advice. Advice given too early may be ill-informed and prevent the student from expressing their true feelings and/or cause them to feel unsupported by you. Once you have a good grasp of the situation, giving advice may be very appropriate.

Instill a sense of hope

Encourage the student to focus on changing that which is within their power to change. Let them know that there may be resources available to help them. Also, when appropriate, try to normalize the student's feelings by reassuring them that other students in similar situations commonly feel the same way.

Maintain appropriate boundaries

Simply listening and providing emotional support may be enough to help some students through a difficult period. For others, you may not be equipped to deal with the complexity of the issue/s. If you're unsure of how to help the student, or if you're concerned about the student's safety and well-being, ask for help from your departmental Chair, senior administration, or Student Counselling Services. Support the student to seek professional help.

Don't promise to keep "secrets"

Never promise to keep secrets. Remember that you have an obligation to report in detail all information pertaining to the student in distress. When a student confides in you, respect that confidence and avoid sharing private information with colleagues and friends, but make sure to disclose this information to all involved/relevant University staff. Consult the crisis response team or a departmental chair for more information on the confidentiality policy.

Once you have observed that a student may be in distress

You have **two options** for responding. Your decision about which path to choose may be influenced by:

- Your level of experience
- The nature and severity of the problem
- Your ability to give time to the situation
- A variety of other personal factors

If you have an established relationship or rapport with the student

Speaking directly with the student may be the best option. Begin the conversation by expressing your concerns about the specific behaviours you have observed.

If you are not comfortable approaching the student

You may prefer to contact your departmental Chair for advice or support, or you might contact the University's Student Counselling Services or community safety staff (or another network resource, if the incident occurs after hours) and ask for advice on how to deal with the situation.

What's important is that you do something to help the student receive needed help.

Preparing for, and talking with, a student

The preparation for your meeting is as important as the meeting itself. Your positive attitude and information-seeking approach are vital to the success of the meeting. You play a big role in setting the tone, building trust, and incorporating the student's perspective into solutions. Reflect on what appears to be concerning for you.

It's easier to engage fully in the conversation with the student when you feel:

- Calm
- Hopeful for successful outcome to the meeting
- Physically comfortable
- Curious about what's going on for the student
- Open to finding solutions
- Confident in solutions that will benefit everyone
- Motivated to have this opportunity to turn around a difficult situation

Once you've noticed that a student may be in distress, you can speak to the student about your concerns. Research regarding brief interventions supports several strategies for initiating and having an effective conversation, even when the source of the problem is unknown.

The key is to try to understand the student's situation better so you can gather more information about what the student is experiencing and to make an appropriate referral.

By expressing concern, you communicate your willingness to be of help and create the possibility for the student to confide in you. Don't be afraid to point out specific changes you have observed about the student such as changes in behavior, attitude, etc. Avoid making statements that may be perceived as judgments, such as "you seem really anxious" or "are you feeling depressed?".

Strategies when talking about student distress

- Share your concern and ask permission to speak about it further

For example: "I'm concerned about ...I wonder if we could talk about ..."

For example: "Can you tell me more about what is happening?"

- Refer to specific behaviours or patterns of behaviour:

For example: "I've noticed that ..."

For example: "I noticed that you were crying during the lab yesterday. Would you like to talk?"

For example: "I've noticed that you have been more quiet than usual in class. Is everything okay?"

For example: "I noticed that you fell asleep at your desk today and you seem more tired in class than usual. Is everything okay?"

For example: "I've noticed that you've been absent from class lately and I'm concerned. Is everything okay?"

- Ask permission to talk about the topic and explore the student's concern with open-ended questions:

For example: "What concerns do you have about ...?"

For example: "Would it be okay if we talked about ..."

For example: "What problem has that situation caused you?"

- Provide room for disagreement:

For example: "I may be wrong, but..."

For example: "This may seem like it's coming out of left field, but..."

- Practice active listening; let the student tell their story:

For example: "I can certainly understand why that would be stressful. What happened?" "It sounds like you are frustrated with your parents."

- Acknowledge and support the student's courage in disclosing a personal difficulty:

For example: "I know that talking has been difficult; it is good that we talked."

For example: "It sounds like things are tough right now. But it doesn't mean things will always be this way."

For example: "That sounds so tough, I am sorry to hear you are going through such a hard time." "I know that talking about your significant other has been difficult."

General considerations when talking to students

- Encourage the student to speak uninterrupted while you listen attentively
- Listen without offering judgment or advice
- Avoid problem solving or making promises
- Allow for silences in the conversation
- Ask for clarification rather than make assumptions
- Meet privately with the student (choose a time and place when you will not be interrupted)

Respecting confidentiality

It is important to maintain confidentiality with respect to your interaction with the student. At the same time, avoid making sweeping promises of confidentiality, particularly if the student presents as a risk to themselves or to others. In circumstances where students are at risk of harming themselves or others, it is necessary to breach confidentiality to ensure the safety of those at risk.

"Safety trumps privacy"

Trust your instincts. Say something if you're worried about a student or if they leave you feeling concerned. **It's helpful to share your concerns about a student with someone at the University in order to provide the student with the support they need.** Not only is this appropriate but it is expected that you provide full disclosure. You will not know what information from your conversation with a student may be helpful to a health and wellness professional so make sure to disclose all the facts. Outside of the people involved in the response to the student in distress, do not discuss the case with colleagues or friends.

Maintaining professional boundaries

Students do not always know how much information they should/need to disclose. To maintain proper professional boundaries, you should ask only for required information (i.e., information needed for the safety of the student). The level of information needed may be different for students who are registered with Accessibility Services and those who are not.

You only need enough information to secure accommodations for students who need them, or to refer them to appropriate services. This process is easier when the student is registered with Accessibility Services. For example, a student with depression might need extra time for assignments and a student with anxiety may need a distraction-free room for exams. Students are under no obligation to disclose their diagnosis to you and you have no right to ask about their diagnosis.

Conversely, sometimes students share more information than is necessary. They may, for example, provide details about their diagnoses or symptoms. **Educators do not need this information, so they should not follow up with further questions.** If a student "over-shares," gently inform the student that you only need enough information to facilitate an accommodation.

Lastly, don't take on too much responsibility and don't deal with a crisis alone. Remember that you are not a counselling professional and it is not your responsibility to diagnose the student or identify the source and impact of the student's distress. Your primary objective is to refer students to the most appropriate resources at the University of Guelph or in the community.

6.3 Refer: how to refer a student in distress

Please refer to the Reference Guide in Section 8 below for further information on stages of distress and assistance with identifying which campus and community services are appropriate.

Think about what you have seen and heard from the student. It's okay to feel unsure about how to respond and you don't need to have all the answers. **Choosing any response over remaining silent is always the best option.**

Strategies when offering a referral

Listen, validate non-judgmentally and encourage healthy coping

Remember that you are not diagnosing the student but rather checking in with them to refer them to university services or community resources:

- 6.3.1 Reinforce help seeking behaviours
- 6.3.2 Cheer-lead – validate the student's strength and ability to cope/survive
- 6.3.3 Reinforce progress towards goals – reinforce the small steps
- 6.3.4 Negotiate – offer the options you are willing to offer and have clear limits
- 6.3.5 Suggest alternatives to the behaviour if possible
- 6.3.6 Normalize the notion of seeking help, reaching for resources, and talking to professionals

For example: "What do you think will help you get back on a healthy path?"

For example: "There are some services on and off campus that have people who could help you work through this situation."

For example: "I'm concerned about you and I want to support you. I'd like to share a few resources with you that might help."

Offer hope

- 6.3.7 Assure the student that the situation can get better.
- 6.3.8 Give the student hope and encouragement. This can help build alliance, calm high emotions, and encourage support seeking behaviours.

For example: "It sounds like things are tough right now. But it doesn't mean things will always be this way." "I know you can figure this out, I want to help you be successful both academically and personally."

Provide advice and suggestions

- 6.3.9 Suggest to the student that there may be a number of options for getting help. Here again, it is helpful to ask permission before giving advice.

For example: "Other students have found a couple of different things to be useful (helpful) in situations like this. Would you be willing to talk about these strategies (resources)?"

- 6.3.10 When talking about other services, try to provide a menu of options so that the student has choices, including discussions with a health care provider/counsellor or working to make changes on one's own. After providing a range of suggestions, ask for the student's opinion of these options.

For example: "What do you think? Which of these do you believe might be most helpful to you?"

6.3.11 Emphasize personal control:

For example: "Whatever you decide, it is ultimately up to you."

6.3.12 Emphasize that the student does not need to deal with these issues alone:

For example: "There's no shame in seeking help or using the resources available to you. This is a good way to approach the problem."

6.3.13 Close the discussion positively and leave room for further conversation. Thank the student for speaking honestly with you:

For example: "I am glad we had a chance to chat."

6.3.14 Summarize a plan for change:

For example: "It sounds like you recognize that ..." "Specifically you plan to..."

6.3.15 Keep the door open:

For example: "I'd really like to hear how things are going with you. Would you feel comfortable checking back?"

As an educator, you don't need to abandon your standards for behaviour and performance in order to support students who are in distress. All students, whether in distress or not, deserve to be approached with a helpful, non-judgmental attitude.

Encouraging a student to seek support

A student may not know help is available or may hesitate to ask for it. **Point out to the student that help is available, that seeking help can be scary, and that reaching out when in need is a sign of strength.**

It is equally important that you explain to the student the limitations of your knowledge and experience and to refer the student to appropriate support resources. When possible, provide the student with referral material or make a phone call from your office to a service. Encourage the student to contact one of the resources that you mention.

If a student appears reluctant, you can help by:

- 6.3.16 Offering to contact the resource on their behalf while they are in your office
- 6.3.17 Offering to sit with the student while they make the initial contact themselves

Listen to the student's concerns about seeking help. Normalize the referral process, making it clear that referring the student to resources does not mean that you think that there is something wrong with the student. **To prevent the student from feeling stigmatized, don't try to diagnose or label the student.** Emphasize that campus services are free and easy to access, and that the student can investigate them to see if it is helpful, without any obligations to continue.

Above all, keep the lines of communication open.

Enhancing student self-care

We all need to value and take time in our busy day to care for our own mental well-being. For students, staying well is key to making the most of their university life/experience and achieving their personal and academic goals. **Stress is unavoidable, and not always negative.** Stress can be a powerful motivator to better oneself. By prioritizing self-care, getting adequate sleep, eating a healthy diet, getting regular physical activity, and nurturing trusting and supportive relationships, students may enhance their ability to cope effectively with periods of more intense stress.

Encourage help-seeking behaviour as a strength and an important aspect of self-care. There are resources available to help students cope with various challenges and stressors. Encourage students to explore strategies to cope with stress through programs available at the university and within the community, as well as by making friends and building a network of support through involvement in student groups, work student study opportunities, or volunteering.

Finding the appropriate service or resource

There are many services and resources available on and off campus to which you can refer a student in distress.

There are many different professionals at the University who can offer support and guidance.

The key is to normalize help-seeking behaviours and the process of talking to specialists.

Encourage students to ask for help early and often as swift intervention is key to success.

Below are some examples of professionals that may offer help to students on campus:

- Counsellors
- Accessibility advisors
- Student Wellness navigators
- Deans of Students
- Dieticians
- Library Staff
- Undergraduate Program Advisors
- Peer Mentors
- Psychologists
- Registrar's Office
- Residence Life Staff
- Doctors/Nurses
- Student Experience Staff

If a student doesn't seem to want help

Do not take it personally if your offer for referral is rejected by the student. It remains the right and responsibility of the student to access supports. Restate your concern and recommendation that the student access support services. However, make sure that you respect their decision. Don't force the issue or trick them into going to a referred resource. **Accepting or refusing assistance must be left up to the student, except in emergencies.**

Acknowledge that it is the student's choice to take the referral and reinforce that taking that step may help them reach positive change. **You might want to offer to meet with the student again once they have had time to think about this decision.** It can help to keep the lines of communication open. You can invite the student back to follow up. In such instances, the key is to leave room for reconsideration at a later time.

For example: "I respect your decision. I hope you will keep these options in mind. My door is always open."

For example: "I respect your decision. Please keep in mind that there are many valuable services around campus available to you."

Following up

If possible, follow up with the student but don't insist on knowing what the student has done. **Although you might feel responsible for the student and want to find out what happened and whether or not the student received help, you have no right to know.** It is important that you avoid stigmatizing the student or asking any questions about the type of help or resources that the student sought. Be comfortable with the student who doesn't want to disclose any details about their situation as well as potential diagnoses and/or treatment.

For example: "How are things since our talk last week?"

For example: "I'd really like to hear how things are going with you. Would you feel comfortable checking back?"

For example: "I am still here to listen and help." "Were you able to find help?"

7. Safety & Self-Care

To support others effectively and compassionately, **you need to begin by being sensitive to your own needs and taking care of yourself.**

Safety

You can play a vital role in promoting student mental health by taking action when you notice someone exhibiting signs of distress. **It is important, though, to respond in ways that do not compromise anyone's safety, including your own.** By working with other members of the University community, you can help at-risk students connect with the services and resources they need while maintaining your own well-being. Through early intervention, you may help avoid considerable harm and/or hardship to all parties involved.

Self-care

Supporting students who are experiencing difficulty or are in distress can lead to feelings of worry, frustration and exhaustion. Students may attempt to blame you for their distress or situation, or you may begin to feel responsible for the well-being of a student.

Below are some examples of emotional responses you may experience:

- "I've never met anyone who has mental illness."
- "Working with stressed out students stresses me out."
- "Dealing with health issues among students is not part of my job."
- "Who can I turn to when I need support?"
- "I can't help someone who refuses help."
- "I get stressed out just thinking about having to talk to that student – we never get anywhere."
- "This student seems to be blaming the school and me for her anxiety disorder."
- "Is there a counsellor that I could speak to about the student?"

After offering support to a student in distress, contact your supervisor to report the incident and to debrief.

In order for you to support others effectively and compassionately, you need to begin by being sensitive to your own needs and taking care of yourself.

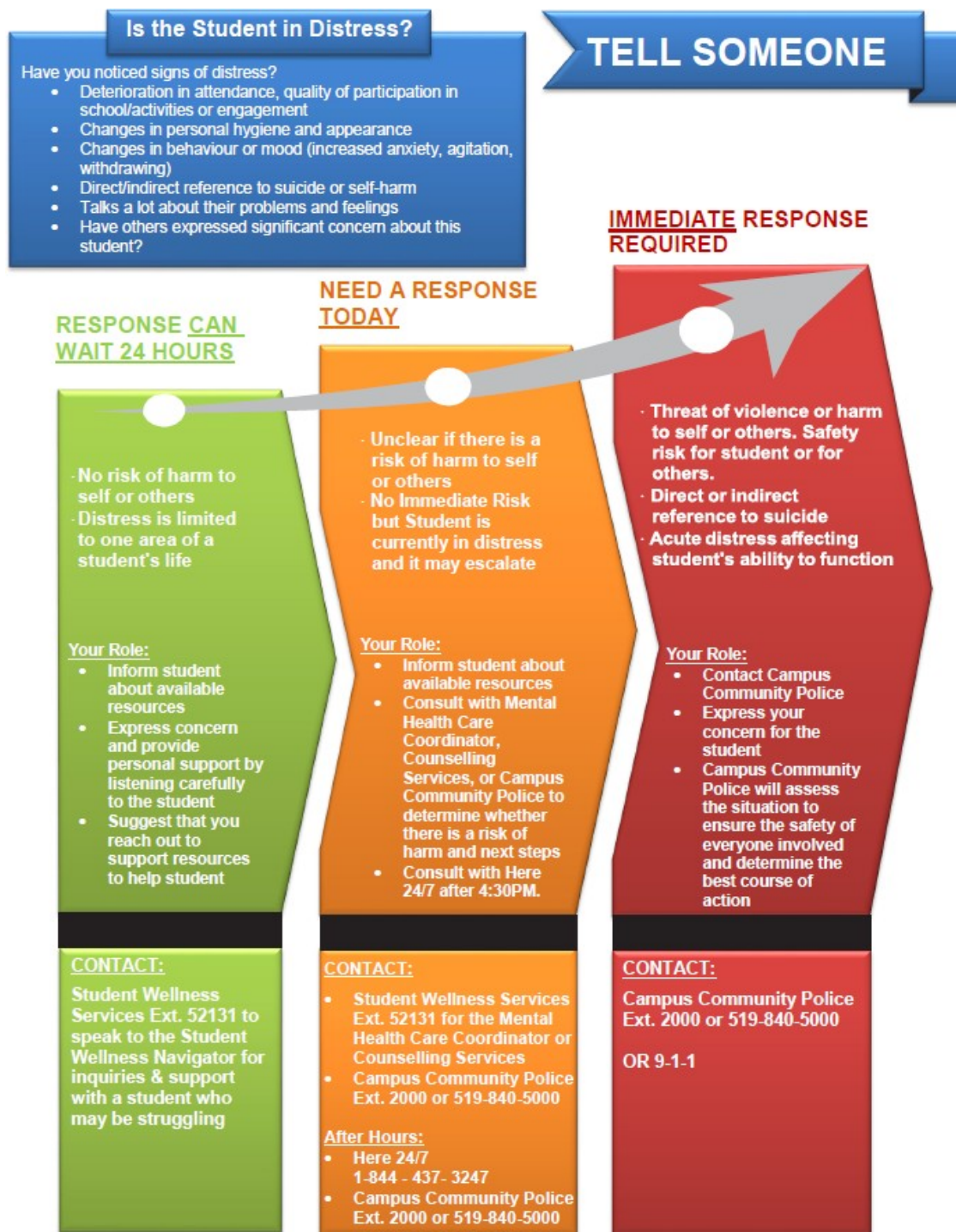
Here are some tips that can help you take care of yourself and help you to reduce burnout:

- Take care of your physical well-being.
- Seek support from colleagues.
- Practice being self-aware so that you can recognize when you've reached your limit and the stress of supporting another is negatively impacting you. Be clear and upfront with yourself and others about your limits.
- Take time out for yourself to engage in healthy activities that help you relieve stress (e.g., go for a walk, meet with friends, etc.).

Wellness@Work also offers a variety of workshops and programming to support wellness and well-being. For details, please visit: <https://www.uoguelph.ca/wellnessatwork/>

8. Reference Guide

Please find below guidelines from the University of Guelph on identifying and supporting student distress:



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8.1 Resources

Campus Resource Information – During COVID-19

We're here to support you now and always - whether we're on campus or off.

To contact a resource using their extension, first dial **519-824-4120** and then enter the 5 digit extension number.

EMERGENCY & 24 HOUR RESOURCES

On Campus

Campus Police, Fire and Ambulance	Emergency Ext. 2000
	Non-emergency Ext. 52245

Student Housing Services	
Lennox Addington Residence	Ext. 58122
East Residence	Ext. 58124

In Guelph

Sexual Assault Domestic Violence	519-837-6440 Ext. 2728
Care and Treatment Centre	24 hour – Ext. 2210
Here 24/7	1-844-437-3247

All Students

Good2Talk (Ontario residents)	1-866-925-5454
Crisis Text Line	Text UofG to 686868

RESOURCES

Student Wellness

wellness.uoguelph.ca

Counselling Services	Ext. 53244
Health Clinic Services	Ext. 52131
Wellness Education & Promotion Centre	wellness@uoguelph.ca
Accessibility Services	Ext. 56208
Student Support Network (peer to peer support)	ssn@uoguelph.ca
wellness.uoguelph.ca/ssn for hours of operation	
Sexual Violence Support and Education Coordinator	svinfo@uoguelph.ca
Health & Performance Centre	Ext. 53039
Stress Management and High Performance Clinic, Kathy Sommers	www.selfregulationskills.ca

Non-Academic Advisors

Indigenous, International and Cultural Diversity Advisors	student@uoguelph.ca
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Revised July 2020

Campus Resource Information - Generally

To contact a resource using their extension, first dial **519-824-4120** and then enter the 5 digit extension number.

EMERGENCY & 24 HOUR RESOURCES

Campus Police, Fire and Ambulance	Emergency Ext. 2000
	Non-emergency Ext. 52245
Good2Talk	1-866-925-5454
Here 24/7	1-844-437-3247
Crisis Text Line	Text UofG to 686868
Student Housing Services	
Prairie Residence	Ext. 58123
Lennox Addington Residence	Ext. 58122
East Residence	Ext. 58124

RESOURCES

Student Wellness: wellness.uoguelph.ca

Counselling Services	Ext. 53244
Health and Performance Centre	Ext. 53039
Health Clinic	Ext. 52131
Accessibility Services	Ext. 56208
Student Support Network (peer to peer drop-in support)	
Monday – Friday, noon – 10pm	J.T. Powell Building
Monday – Tuesday, 2pm – 6pm	Library Rm. 111
Wednesday – Thursday, 4pm – 8pm	
Wellness Education & Promotion Centre	Ext. 53327
Student Experience Department: Bounce Back / LGBTQ2IA+ / Multi Faith Resource Team / New, Diverse, Commuter, International and Aboriginal Students / STARTonTrack / Experiential Learning Hub (Co-op, Peer Helpers, Work Study)	Ext. 52214
Sexual Violence Support and Education Coordinator	Ext. 53020
Academic Advising	Ext. 56613
Athletics Centre	Ext. 56253
Central Student Association (CSA)	Ext. 56748
Graduate Student Association (GSA)	Ext. 56685
Learning and Curriculum Support / Library	Ext. 53617
Stress Management and High Performance Clinic, Kathy Somers	Ext. 52662
Student Financial Services	Ext. 58715
Student Housing Services	Ext. 58700
Smoke-Free Campus Supports: uoguelph.ca/smokefree	

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Campus and Community Resource Information



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SUPPORT RESOURCES

STUDENT RESOURCES

The following services are available to students **free of charge**:

Student Wellness Services:

*All located within the J.T. Powell Building, Reception on 1st Floor

Health Services

x52131, Mon. to Fri.: 8:30am - 4:30pm

- Drop-In Clinic as well as booked appointments with doctors

Counselling Services

x53244, Mon. to Fri.: 8:30am - 4:30pm

- Drop-in Counselling Mon to Fri 12:30pm-3:30pm

Wellness Education Centre

x53327, Mon. to Fri.: 8:30am - 4:30pm

Student Support Network

Mon. to Fri.: 12pm - 10pm
& In Library Room 111

- One to One Peer Support

Accessibility Services

x56208, Mon. to Fri.: 8:30am - 4:30pm

- Students requiring academic accommodations because of a disability (temporary or permanent)

*For current information on Student Wellness Services' hours and locations please visit:

wellness.uoguelph.ca

OTHER RESOURCES

Mental Health Training
morefeetontheground.ca

Feeling Better Now
feelingbetternow.com/uoguelph

AVAILABLE AT ALL TIMESCampus Community Police

Trent Building on Campus
x2000 or 519-840-5000
uoguelph.ca/police

Here 24/7 Crisis Line

1-844-437-3247

Text Crisis Line

Text UOFG to 686868

Good2Talk Crisis Line

1-866-925-5454

SEXUAL VIOLENCE RESOURCESSexual Violence Support Services on Campus (Non-Urgent)

x53020, Mon. to Fri.: 8:30am - 4:30pm

Call **Women In Crisis** at 1-800-265-7233 for **24-Hour Crisis Support** regarding Sexual or Domestic Violence

*People of all genders may call for support

Guelph General Hospital Care and Treatment Centre for Sexual and Domestic Violence

153 Delhi Street, 519-837-6440 x2728
or call x2210 After Hours

Sexual Violence Support & Information

uoguelph.ca/vpacademic/sexual-assault

STAFF RESOURCESEmployee & Family Assistance Program

The Employee & Family Assistance Program (EFAP) is available to eligible employees and their immediate family members in need of confidential, professional counselling for personal, family, relationship, and wellness issues.

Access at any time: 1-800-663-1142 or contact the Manager of Occupational Health and Wellness at x52133

Responding to Students in Distress

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8.2 Additional mental health resources

More On-Campus Resources

Aboriginal Resource Center

- <https://www.uoguelph.ca/studentexperience/aboriginal-advising>
- From mainstream counselling to visiting with Elders, there are a number of ways Aboriginal students (both undergraduate and graduate) can access support on campus. This can be an informal chat or something more structured, depending on your comfort. The support provided through the Aboriginal Resource Centre can be a chance to talk things through, seek advice or simply share with someone who will respect the challenges you're experiencing

On-Campus Advising and Support

- <https://www.uoguelph.ca/studentexperience/advising-and-support>
- Campus offers advising based on the differing backgrounds students may come from. This includes aboriginal student advising, sexual and gender diversity advisor and international student advisor.

Local-Based Resources

Canadian Mental Health Association Waterloo Wellington

<https://cmhaww.ca/>

The Canadian Mental Health Association Waterloo Wellington (CMHA WW) provides a full care system and programs for those with addictions, mental health or developmental needs. They are able to serve everyone from child to adults to seniors. Their program helps individuals and families to lead lives filled with meaning and promise. They have offices in Cambridge, Waterloo, Kitchener, Guelph, Fergus, and Mount Forest. They are also able to provide visiting/satellite services in Arthur, Shelburne, Erin & Palmerston.

Homewood Health Centre

[Website](#); Telephone: 1-844-443-8780

With over 130 years of treatment experience and the broadest range of treatment solutions in Canada, Homewood Health Services have unique capabilities to help you or someone you care about on a recovery path through solution-focused and evidence-based treatment programs. This health centre provides inpatient programs and is located in Guelph.

Ontario-Based Resources

211 Ontario

- <http://www.211ontario.ca/>
- Dial 211

211's award-winning telephone helpline (2-1-1) and website provide a gateway to community, social, non-clinical health and related government services. 211 helps to navigate the complex network of human services quickly and easily, 24 hours a day, 7 days a week, in over 100 languages.

Mental Health Helpline

- Telephone: 1.866.531.2600

The Mental Health Helpline provides information about mental health services in Ontario.

Connex Ontario

- <http://www.connexontario.ca/>
- Drug and Alcohol Helpline: 1-800-565-8603
- Mental Health Helpline: 1-866-531-2600
- Ontario Problem Gambling Helpline: 1-888-230-3505

ConnexOntario provides free and confidential health services information for people experiencing problems with alcohol, drugs, mental health or gambling.

Telehealth Ontario

- Telephone: 1-866-797-0000

Call to speak to a nurse about a medical or health-related issue.

Family Navigation Project

- <https://sunnybrook.ca/content/?page=family-navigation-project>
- 1-800-380-9FNP (9367)

Developed by families for families, the Family Navigation Project seeks to engage with, inform, advocate and provide connections *for*, support, and empower the families of youth with serious mental health and addictions problems so that the youth and families receive the help they need at the right time, in the right place and from the right people.

Mood Disorders Association of Ontario

- <https://www.mooddorders.ca/>
- 1-866-363-MOOD (6663)

MDAO offers free support programs to people across Ontario, and their families, who are living with depression, anxiety or bipolar disorder.

Mind Your Mind

- <https://mindyourmind.ca/>

Mindyourmind is an award-winning, non-profit mental health program that engages youth, emerging adults and the professionals who serve them to co-develop reliable and relevant resources. These resources are designed to reduce the stigma associated with mental illness and increase access and use of community support, both professional and peer-based.

Schizophrenia Society of Ontario

- <http://www.schizophrenia.on.ca/>
- 1-800-449-9949

Offers a help line to people and families affected by schizophrenia.

Assistance in your own language

Across Boundaries

- <http://www.acrossboundaries.ca/>
- 416-787-3007

This ethno-racial community mental health centre can put you in touch with supports and services familiar with your culture and language. Provides services in many languages including Urdu, Hindi, Tamil, Farsi (Dari and Pashto) Somali, Swahili, Amharic, English, Mandarin, Filipino, Sinhalese, Arabic, Antawi, Yoruba, and Punjabi.

Canadian Mental Health Association - Rehabilitation Action Program

- 416-289-6285

The program offers specialized services to the Tamil, Somali and Afghan communities and has the capacity to serve members of the culturally diverse population.

Hong Fook Mental Health Association

- <http://www.hongfook.ca/>
- 416-493-4242

Is able to work with the Cambodian, Chinese, Korean and Vietnamese communities. The Association aims to help people with linguistic and cultural barriers to gain access to mental health services.

Canadian Centre for Victims of Torture

- <http://www.ccvvt.org/>
- 416-363-1066

Helps people heal from torture. Their website has lots of practical information about recovery, and links to services in Toronto.

Anishnawbe Health Toronto 24/7 Mental Health Crisis Management Service

- <http://www.aht.ca/>
- 416-891-8606

Promotes Traditional Aboriginal practices but has affirmed and placed them at its core. Its model of health care is based on Traditional practices and approaches and are reflected in the design of its programs and services. There are three locations across Toronto.

COSTI Immigrant Services

- <http://www.costi.org/>
- 416-658-1600

Assists settlement, information and referral, advocacy, orientation, sponsorship, job search training, translation and interpretation, mental health services, and LINC classes (Language Instruction for Newcomers to Canada).

9. Reference List

Please note that some content in this guide has been directly borrowed and/or adapted from the following sources:

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