Dealing with Students in Crisis

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Overview

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The Problem

- A student can experience a crisis when he or she perceives or experiences an event or situation as an intolerable difficulty that exceeds his or her current resources and coping mechanisms (Richard K. James, *Crisis Intervention Strategies*, 2008)
- These crises can compromise students’ academic success as well as their overall quality of life
• The rate of college mental health crises has been increasing
• Problems are more severe and complex
• Both undergraduate and graduate students exhibit a range of mental health challenges
• Anxiety and depression have been the top student complaints and in 2009-2010 anxiety surpassed depression, according to the annual report of the Association of University and College Counseling Center Directors
• In 2008 the Graduate School administered a wellness survey to students (544 respondents)
• To provide a basic assessment of Loyola’s graduate and professional students’ sense of well-being
• To identify strategies for the improvement of students’ quality of life
• To assess the use and knowledge of mental wellness services among this cohort of students
• Just over half of those responding reported having an emotional or stress-related problem that affected their well-being in the 12 months previous to the survey
Respondent comments suggested that the combination of anxiety and financial concerns as well as other types of psychosocial issues impaired academic progress.

33% sought counseling services either through Loyola’s Wellness Center or an off-campus mental health provider.

Two persistent concerns were the limited number of sessions allowed at the Wellness Center and the variable nature of academic and programmatic support systems.
As a Jesuit institution, Loyola University Chicago is guided by its mission. Two key elements of that mission are *cura personalis* – care for the whole person and *hominis pro aliis* – people caring for others. Since the early 2000s, Loyola has been much more intentional in playing out its mission at both the undergraduate and graduate levels. Efforts employed when working with students experiencing crises are guided by these two principles.
Campus Resources

BCT: Behavioral Concerns Team
• One-stop reporting of concerns about student behavior
• Coordinated body for discussion and decision-making regarding students exhibiting suicidal, self-injurious, and other potential threatening behaviors
• Appeared in wake of tragedies at Virginia Tech and Northern Illinois universities
• In Illinois, an approach mandated by state legislation

University Chaplains
• Available on all campuses
• 24-hour page-a-chaplain
• Provide personal support for students in need

Office of Student Conduct and Conflict Resolution
• Variety of services to assist in conflict resolution and mediation
• Oversees resolution of student misconduct
• Assists survivors of sexual assault and victims of bias-related incidents
Wellness Center

- Short term mental health counseling
- Thesis and Dissertation Support Group which provides general emotional support, strategies for time management and student-faculty interaction, and limited clinical services
- LUC Faculty and Staff “911” Guide to help faculty and staff assist students experiencing distress or intervene with students who may be causing disruptions or disturbances
Our Approach

• Work in conjunction with the BCT when student issues reach this level of concern

• Facilitate the resolution of other student-related issues before they reach the BCT stage

• Influenced by the principles of restorative justice with stresses repair of harm and a cooperative process that includes all stakeholders

• Focus on the student as a whole person

• Help students navigate the various Graduate School forms and procedures

• Provide appropriate programming and resources for students

• Engage in periodic assessments to best align graduate student needs and institutional resources

_Cura Personalis_  
_Homines Pro Aliis_
Web of Care

The Graduate School

BCT

Wellness Center

Faculty

Academic Programs

Student

Registration and Records

Financial Aid

Appropriate Outside Stakeholders
Best Practices

• Work cooperatively as student wellness issues are multi-faceted
• With individual students:
  – Listen
  – Problem-solve as a mechanism to handle stress, expressing concern and options in non-judgmental terms
  – Point out that help is available and that seeking help is a sign of strength and courage, rather than of weakness and failure
  – Offer to make referrals and facilitate interactions with university stakeholders
  – Expressions of interest/concern are critical factors in getting an individual to seek appropriate help
• Conduct and respond to periodic assessments of graduate students on campus, paying special attention to developmentally-appropriate programming and outreach that differentiates their needs from the undergraduate population
Best Practices, continued....

• Advocate for additional mental health staffing and extended care for graduate students
• Provide ongoing education and outreach about mental health issues and services
• Work with Graduate Program Directors as necessary to foster intra-departmental supportive programming and encourage active mentoring by graduate faculty
• Facilitate opportunities for inter-program community building through activities and organizations as networks of diverse peers can provide support, friendship, and engagement
Challenges

• Concern of students that admitting a need for or seeking help suggests they are weak: “I am a highly successful competitive achiever. Having to say ‘I think I need help’ just made me feel pathetic.”

• Service limitations of Wellness Centers: “Limited number of sessions,” “Location and times.” “Confidentiality…since other graduate students work there as part of their program.”

• Inconsistent level of faculty attentiveness to students’ well-being, specifically “inattentive advisor,” “limited nature of departmental programming to bring graduate students together,” “program culture that promotes student isolation.” Critical since students report program supportiveness positively correlates with their overall quality of life.

• Predisposition of clinically-based programs to handle psychosocial issues themselves before bringing in the Graduate School.
Resources


- *Fall 2008 Survey of Loyola Graduate Students*. The Graduate School. Loyola University Chicago.


- Technical/professional assistance: David De Boer, Associate Director, Wellness Center; Jane Neufeld, Dean of Students; Camille O’Brien, Administrative Assistant/Awards Coordinator, The Graduate School. Loyola University Chicago.