



ANTELOPE VALLEY COLLEGE

**Behavioral Intervention Team (BIT) Manual
Administrator/Faculty/Staff Guide
2014 – 2015**

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Introduction

The Academic Senate for the California Community Colleges adopted the Standards of Practice for counseling in the colleges in this state in spring 1997. They derived the “Core Functions” of counseling from the California Educational Code and from the American Counseling Association. Colleges must provide the following Crisis Intervention in relation to counseling services:

1. Personal counseling, in which the student is assisted with personal, family or other social concerns, when that assistance is related to the student’s education.
2. Crisis intervention directly or through cooperative arrangements with other resources on campus or in the community. For the requirements for the provision for Crisis Intervention, as stated in the Ed. Code, refer to [Appendix B](#).

To assist in defining crises that can occur in this college, the different types are identified in the text that follows. These are found alphabetically in the body of the manual. You can also find them by title in the Table of Contents. These are some of the types of events or behaviors that may constitute a crisis.

The Behavior Intervention Team (BIT) is here to assist with the problem you may be dealing with. For example, you as instructor, staff, or administrator, observe a student behaving in ways that could indicate a personal problem, i.e., a noticeable change in performance or an attitude indicating despondency. These could be symptoms of a personal crisis that can be helped. The more dramatic behaviors also described below are those that require immediate response.

This manual is not intended to give you the skills to deal with extreme situations but to help you identify those that need to be dealt with. If you need advice in deciding the appropriate action to take, call one of us, members of the Behavior Intervention Team (our names and telephone extensions are listed on the [Who to Call](#) page). The most serious crises are those that can cause injury to the individual and or others. Other behaviors may become crises because they impair the quality of the learning environment. To protect individuals and the learning environment, this college provides the following to maintain the well-being of all who are part of this institution.

1. Assessing the situations and referring the cases to the appropriate source.
2. Initiating formal disciplinary action when indicated.
3. Establishing guidelines for disciplinary action in serious cases.
4. Conferring with the student to determine disposition, i.e., readmission, etc.
5. Referring cases to the Crisis Intervention Team for intervention and follow up, if needed.
6. Advice regarding Ed. Code statutes which govern actions that can be taken.
7. Investigate complaints of unlawful discrimination, including sexual harassment.
8. Intervening in any situation in which safety of an individual is in jeopardy or laws have been violated.
9. Making an arrest when necessary.
10. Initiating a 5150: a law which allows a police officer to transport an individual who is dangerous to self or others to a mental health facility for observation and assessment of their mental status without the individual’s consent.
11. Advice regarding Ed. Code statutes which govern actions that can be taken.

Mission Statement

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Goals

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BIT Team Members

Dr. Erin Vines
Dr. Jill Zimmerman
Dr. De'Nean Coleman
Dr. Louis Lucero
Gary Roggenstein
Annamarie Becerra
Ramon Murgatroyd
Terry Cleveland
Jennifer Winn

These members will make an effort to manage the situation and to refer to the appropriate sources, i.e., to the Vice President of Student Services, Dean of Student Life, Campus Police or outside sources; will document each crisis incident; and will maintain confidentiality.

Team Member Description

The Behavioral Intervention Team consists of college personnel with expertise in human resources/employee assistance, law enforcement/threat assessment/tactical applications, university operations, medical and mental health knowledge, and student affairs. Membership is based on the position and not the individual. The members selected here have regular contact with campus community members in some manner, which will aid in assessment of persons of concern, and/or the authority to receive a BIT recommendation and take the appropriate action. A collaborative process to assess threats and concerns will be used. Depending on the situation, personnel with areas of specialization or responsibility may be called upon to assist the Team. The Team may also consult other individuals as needed, such as a faculty member who has a concern about a student, a professional counselor to share expertise, and/or a manager who has information concerning an employee. The BIT Chair will keep senior college officials advised of situations and specifically will communicate with the **Assistant Vice President for University Relations**, as needed.

Data Collection, Storage, and Security

Anyone can report concerning or threatening behavior to the Behavioral Intervention Team by speaking directly to a Team member, submitting an on-line referral through the [] database, or an anonymous report through Campus Police. The Maxient electronic incident report can be accessed through the college's website and will display instructions, a series of drop-down selections, and a text box for a descriptive narrative. Once submitted the report will be forwarded to the BIT chair and selected members of the Team for review. The submitted report will automatically become part of the electronic database used for active assessment of persons of concern and to generate report data. Maxient allows BIT members to review referrals, dispositions of academic and non-academic misconduct, and identify patterns of behavior. BIT members are informed as they join the team and reminded during regular trainings that many of these records are very dynamic in nature. What the team believes to be true today may change as a situation unfolds. Much care should be taken not to form judgments or use the information in decision making outside of BIT. In addition, none of the data may be distributed or viewed by non-BIT personnel without first consulting with the Chair.

Making notes in cases files is limited to the Chair, assigned hearing officers, or case managers. As part of regular training, these scribes should review what is appropriate to place in a file.

Who to Call

BIT Team Members:

<<list names of people to call here>>

Consulting may involve:

- Discussions to assess the situation
- Clarification of action to be taken
- Steps to rectify the situation

What to Do in Case of a Crisis

Whenever you are faced with any of the following situations, consider calling for assistance from one of the BIT members. This can be for intervention, a consultation, referral sources, or follow up. The following are examples of crises, the behaviors that cause them, and the steps to take to manage them. These members are trained and prepared to deal with the individuals suffering a crisis. They may provide brief crisis counseling to individuals and make appropriate referrals to counseling services outside the college as provided for the Confidential Student Assistance Program.

They will also follow up the consultation or management of the crisis by further discussing the resolution of the case with the person requesting the assistance of the individual in crisis. Students may be referred to **Lt. Chad Wehrmeister, Campus Police, or to Gail Newman, Senior Dean of Student Services, for follow up as needed**

Your Role

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 behavior, especially if it is inconsistent with your previous observations, could well constitute an inarticulate attempt to draw attention to his/her plight. . . "a cry for help". Your ability 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.

Signs of Distress

- Bizarre behavior
- Confusion
- Dangerous behavior
- Disheveled appearance
- Inability to concentrate
- Increased irritability
- Indecisiveness
- Missed classes/assignments
- Mood swings
- Persistent worrying
- Procrastination
- Restlessness
- Social isolation

Guidelines for Intervention

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. We encourage you, whenever possible, to speak directly and honestly to a student when you sense that s/he is in academic and/or personal distress.

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. Attempt to identify the student's problem or concern as well as your concerns 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. You are legally responsible in terms of the mandatory reporting of child abuse and elder abuse (contact a BIT member for assistance).

Extending oneself to others always involves some risk-taking, but it can be a gratifying experience when kept within realistic limits.

Referring Students for Personal Counseling

To make a personal counseling appointment, direct the student to go to or call the Antelope Valley College Student Health Center at ext. 6683. Appointments are made based on availability of licensed counselors.

To ensure that the student follows through with the referral, ask the student for permission to contact him/her at a later date. If your relationship with the student is such that you are confident s/he trusts your actions, you might also request permission to contact the referral provider directly. This communication arrangement maximizes the potential for successful follow through.

Personal Counseling Services

AVC personal counseling services are designed for students who can benefit from short-term counseling. If the initial assessor determines the student requires longer term counseling, s/he will likely be referred to a more appropriate off-campus resource. Early intervention is preferable to crisis intervention.

When you do discuss a referral for personal counseling services with a student, it is helpful for the student to hear in a clear, concise manner your concerns and why you think counseling would be helpful. You might tell them a few facts about our services. For instance, all services are free to regularly enrolled students. All discussion are confidential except when the student presents a danger to self or others or when the counselor has reasonable suspicion that child or elder abuse is occurring. These situations mandate reporting.

Placing the initiative on the student to seek an appointment increases his/her responsibility and commitment to come in for counseling. There may be urgent times, however, when it is more appropriate for you to call to make an appointment for him/her or to accompany the student in getting to a counselor on campus (e.g. crisis situation).

To refer a student for personal counseling, there are staff persons available as follows to insure prompt attention in beginning the process:

During Daytime Hours: Monday - Thursday 8:00 A.M. to 6:00 P.M.
Student Health Services, ext. 6683

Outside Operational Hours:

Call the Counseling Center and leave a message. A counselor will return your call on the next working day.

Personal Counseling on Campus

(Please copy and give this page to students as appropriate)

Instructions for Students:

To make a Personal Counseling appointment, please go to or call the Student Health Services department and ask for a “Personal Counseling appointment.” The first appointment will be an initial intake for up to one hour. Each follow-up appointment will be 30 minutes.

Student Health Services – (661) 722-6300, ext. 6683, Room SSV 180.

Community Hotline and Referral List

(Please copy and give this page to students as appropriate)

Community-Older Services

AV Adult Day Care	661-949-6278
AV Committee on Aging	661-942-6244
AV Senior Center – Lancaster	661-726-4400
Elder Abuse Hotline	877-477-3646
Heritage Clinic (Mental Health Services)	661-575-9365
Palmdale Senior	661-269-5904
Senior Citizen Legal Services	800-222-1753
Supplemental Security Income	800-784-2433

Crisis Lines/Hotlines

LA County Info Line	211
Child Abuse Hotline (24 hr)	800-540-4000
Covenant House	800-999-9999
Domestic Violence Hotline (24 hr)	800-978-3600
Elder Abuse Hotline	800-978-3600
Friendship Warm Hotline	877-477-3646
Girls and Boys Town National Hotline	800-448-3000
Phone a Friend (Teen/Child)	661-949-8662
Rape, Abuse, & Incest National Network	800-656-4673
Suicide Prevention Hotline (24 hr)	800-273-8255
Veterans Administration Hotline	800-273-8255

Food, Shelter, Clothing

60-Day Emergency Shelter (24 hr)	661-945-6736
Domestic Violence Shelter	661-945-6736
Grace Resource Center	661-940-5272
Homeless Solutions Center	661-942-2758
LA Family Housing Corp. (Transitional)	818-982-4196
LA Youth Network	323-957-7364
Lancaster Community Shelter	661-945-7524
Salvation Army	661-948-3418
San Fernando Valley Rescue SAVES	818-785-4020
Shelter Hotlines (LA County)	661-267-5191
	909-623-4364
	818-505-0900
	323-653-4045
St. Vincent De Paul	661-942-3222
Suh-Kuhr Paragon Shelter	661-466-6182
Underage Teen Shelter	323-469-2946
Winter Shelter Hotline	800-548-6047
Valley Oasis	661-945-5509

Mental Health Services

Anxiety Support Group	818-999-7719
AV Mental Health Clinic	661-723-4260
Psychiatric Mobile Response Team (daytime)	661-223-3838
Psychiatric Mobile Response Team (off hours)	800-854-7771
Clutterers' Anonymous	805-583-5011
Depression and Bipolar Support Alliance (DBSA)	323-254-6492
Emotions Anonymous	818-377-4341
Field Capable Clinical Services	661-575-1800
Henry Mayo Hospital Manic Depression Support Group	661-253-8989
Heritage Clinic (older adults)	661-575-9365
LA County Department of Mental Health (DMH) (Wellness Center)	661-974-8400
LA County DMH – Community Reintegration Program	626-403-4370
LA County DMH – Family Advocate	213-738-2868
Mental Health America (daytime)	661-726-2850
(after hours)	661-733-8885
National Alliance on Mental Illness (NAMI) – Antelope Valley	661-341-8041
OCA / OCD Support Group	818-386-9570
Palmdale Mental Health (daytime)	661-575-1800
State Department of Mental Health	916-654-2209
Tarzana Treatment Center	661-726-2630

Mental Health Services (Children/Teens)

Alafia Mental Health – Children's Bureau	661-940-9094
Lancaster	661-949-0131
Palmdale	661-272-9996
Children's Center of AV	661-949-1206
Penny Lane	661-266-4783
Tarzana Treatment Center	661-726-2630
Valley Child Guidance Center	661-265-8627

Domestic Abuse or Sexual Assault

Adult Protective Services	800-451-5155
Domestic Violence Center of Santa Clarita	661-259-8175
Domestic Violence Hotline	800-978-3600
Kayla’s Place	661-949-3269
LA County Victim – Witness Services	661-974-7717
National Domestic Violence Hotline	800-799-SAFE
Paving the Way Foundation, Inc. RAIIN	661-339-2733 800-656-HOPE
Safe Way Out	800-978-3600
Two Lifestyles (survivors’ support group)	661-361-1590
Valley Oasis Domestic Violence Shelter	661-945-5509
Valley Oasis SARS	661-949-6143
VINE (Victim Information and Notification Everyday)	800-721-8021

Treatment Referrals

American Medical Association	800-621-8335
American Psychiatric Association	888-357-7924
American Psychological Association	800-374-2721
Association for Behavioral & Cognitive Therapies	212-677-1116
Substance Abuse and Mental Health Services Administration	800-729-6686

Other Community Services

AV Kidz Connection – Specialized Foster Care Program	661-223-3800
Department of Children and Family Services (DCFS)	
Lancaster	661-951-4107
Palmdale	661-223-4200
Grandparents as Parents	661-478-1881

Veterans Assistance

Real Warriors Campaign	866-966-1020
Mental Health of America (MHA)	661-579-8301
Military Resource Center	

Substance Abuse

ASAP Drug Hotline	800-367-2727
AV Council on Alcoholism & Direct Dependency	661-948-5046
California Smokers Helpline	800-844-2439
Drug Abuse Hotline	800-444-9999
Families Anonymous	800-736-9805
I-ADARP Drug & Alcohol Support	818-994-7454
Narconon	800-468-6933
Narcotics Anonymous	661-299-5599
Narcotics Anonymous World Service Office	818-773-9999
National Council on Alcoholism and Drug Dependence	818-997-0414
Right on Programs, Inc.	818-240-1683
Self Help and Recovery Exchange (SHARE)	877-742-7349
Tarzana Treatment Center	661-726-2630
Teen Abuse Hotline	800-462-9164
Valley Women’s Center	818-757-2188

Medical Resources

Antelope Valley Community Clinic	661-942-2391
Antelope Valley Hospital	661-949-5000
High Desert Health System	661-948-8581

Medication – Financial Help

Community Assistance Program	251-605-0918
Partnership for Prescription Assistance	888-477-2669
The Assistance Fund	877-245-4412

Therapy Referrals

Adriana Gutierrez M.A. MFTI	661-874-8940
Ana Chiesa-Kontarovshy	661-948-2322
Associated Christian Therapy Srv	661-940-4861
Jennifer Romans Ph.D, LMFT	661-361-2543
Jo Pierson M.A. MFT	661-609-5772
Kathy Romans LMFT, EMDR	661-361-2542
Marsha Houston MSW, LCSW	661-940-5533
Martha Joma M.A. MFTI	661-965-5596
Obdulia Herrera MFT (Spanish available)	661-816-8387
Patrisha Hodgman MFT	661-400-7295

Types of Crises

Aberrant Behavior

Irrational or inappropriate behavior causing disruption in or outside the classroom: i.e., inappropriate focusing of attention on self in class, going on and on about personal life in class, repeatedly taking class focus off track.

Ask to speak to student privately and confidentially. Indicate concern for the student's welfare and ask what started his/her reaction. Listen and determine whether the student needs to be referred to counseling for further assessment. When the time is right, state your rules for acceptable behavior in the class and set limits. If disruptive behavior continues, after a warning, the matter should be referred to the [Senior Dean of Student Services](#).

Abuse: Physical or Sexual

If a student starts to tell you that he/she has suffered abuse, as a child (while under the age of 18) stop the student from revealing this unless he/she is willing to have the information reported to the authorities. The law requires that a report be made to the authority which identifies the perpetrator, especially if he/she is still around children. If the abuse occurred as an adult, a complaint is up to the victim. Please refer the student to a BIT member and/or our [Community Hotline and Referral List](#) for reporting information.

Anxiety

Exaggerated fear of failing, nervousness and difficulty in concentrating, tendency to overreact with fear, or manic talking, or frenzied activity.

Ask to speak to student privately and confidentially. Indicate concern for the student's welfare and ask if he/she is aware of the behavior. Listen and determine whether the student needs to be referred to counseling for further assessment. Inform the student that this college has trained professional help available. Refer the student to a crisis counselor for an interview and assistance. If the situation is extreme and the student seems to need immediate help, walk him/her to the Student Health Service's office (SSV 180) for an appointment.

DO:

- 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 Student Health Services).
- Offer to assist the student in referring her/him for personal counseling.

DON'T:

- Minimize the perceived threat to which the student is reacting.
- Take responsibility for their emotional state.

- Overwhelm them with information or ideas to “fix” their condition.

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. May go on and on about becoming a star or going into movies or getting a scholarship to Harvard, etc.

Consult with a crisis counselor regarding the student. The counselor can subsequently come to the class on some pretext to observe. An interview can be arranged if the behavior does seem aberrant.

The Demanding Passive Student

Typically, even the utmost time and energy given to these students is not enough. They often seek to control your time and unconsciously believe the amount of time received is a reflection of their worth. You may find yourself increasingly drained and feeling responsible for this student in a way that is beyond your normal involvement. It is important that this student be connected with many resources of support on-campus and in the community in general.

DO:

- Let them make their own decisions.
- Set firm and clear limits on your personal time and involvement.
- Offer referrals to other resources on and off campus.
- During repeated interactions, stand while speaking with student; limit discussion to 3 minutes.

DON'T:

- Get trapped into giving advice, special conditions, etc.
- Avoid the student as an alternative to setting and enforcing limits.

Depression

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

Ask to speak to the student privately and confidentially. Indicate concern for the student's welfare and ask if he/she is aware of the behavior. Listen and determine whether the student needs to be referred to counseling for further assessment. Inform the student that this college has trained professional help available. Refer the student to a CRISIS COUNSELOR? for an interview and assistance. If the situation is extreme and the student seems to need immediate help, WALK HIM/HER TO THE COUNSELING OFFICE FOR AN APPOINTMENT?

DO:

- Let the student know you're aware she/he is feeling down and you would like to help.
- Encourage the student to discuss how she/he is feeling with someone they trust.
- Offer to assist the student in referring him/her for personal counseling.

DON'T:

- Minimize the student's feelings, e.g., “Don't worry.” “Everything will be better tomorrow”.

- Bombard the student with “fix it” solutions or advice.
- Chastise the student for poor or incomplete work.
- Be afraid to ask the student whether he/she is suicidal.

Disobedience, Willful

Refusing to follow directions or behaving disruptively in class, refusing to leave when asked, refusing to adhere to class rules.

Ask the person in a calm manner to talk to you privately away from peers. If this fails to produce acceptable behavior, END THE CLASS FOR THE DAY???, and contact a crisis counselor for assistance. If the student seems to be going out of control, call the campus police to handle it.

Disorientation

Somewhat glazed expression, a lack of appropriate affect when talking, difficulty in listening with concentration, literally complains of disorientation, or exhibits chronic self-talk, hearing voices, or seeing things that aren't there.

Consult with a CRISIS COUNSELOR? regarding the student. The counselor can subsequently come to the class on some pretext to observe. An interview can be arranged if the behavior does seem aberrant.

If the student's behavior is disrupting class, it may be appropriate to call for immediate assistance. You may contact the AVC Sheriff office at ext. 6399.

DO:

- 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 CIT BY CONTACTING THE COUNSELING CENTER AT EXT. – IS THAT WHAT AVC PROCEDURE WILL BE?**
- Acknowledge their feelings or fears without supporting the misperceptions, e.g., “I understand you think someone is following you, but I don't see anyone and I believe you're safe.”
- Focus on the “here and now”. Ask for specific information about the student's awareness of time, place and destination.
- **Speak to their healthy side, which they have. IT'S OK TO LAUGH AND JOKE WHEN APPROPRIATE...I DON'T BELIEVE MANY PEOPLE KNOW WHEN THIS IS APPROPRIATE TO DO?**

DON'T:

- Argue or try to convince them of the irrationality of their thinking. This commonly produces a stronger defense of the false perceptions.
- Play along, e.g., “Oh yeah, I hear the voices (or see the devil).”
- Encourage further discussion of the delusional processes.
- Demand, command, or order.
- Expect customary emotional responses.

Disruptive Behavior

Cussing or talking loudly, arguing instead of discussing, challenging everything that is presented as wrong, or out of control yelling in anger.

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 him/her down. If the behavior continues out of control, call the campus Sheriff's office and report the matter to the Vice President of Student Services Office.

DO:

- Acknowledge their anger and frustration, e.g., "I hear how angry you are."
- Rephrase what they are saying and identify their emotion, e.g., "I can see how upset you are because you feel your rights are being violated and nobody will listen."
- Reduce stimulation; invite the person to a quiet place if this is comfortable and the place is safe.
- Allow them to ventilate, get the feelings out, and tell you what is upsetting them; listen.
- Be directive and firm about the behaviors you will accept, e.g., "Please stand back, you're too close." "I cannot listen to you when you yell and scream at me that way." "Let's step outside to discuss this further." (Refer to the AVC Student Code of Conduct, [Appendix A](#)).
- **ACTIVATE THE CIT BY CONTACTING THE COUNSELING CENTER AT EXT. 3334, OR DISTRICT POLICE AT EXT. 3122...NEED TO PLACE OUR PROCEDURE FOR ACTIVATION, HERE.**
- Remember: Safety First.
- Prohibit the student from entering your work area/classroom/office if behavior is repeated.

DON'T:

- Get into an argument or shouting match.
- Become hostile or punitive, e.g., "You can't talk to me that way!"
- Press for explanations for their behavior.
- Ignore the situation.
- Touch the student.

Distraught and Anxious

A sudden change in attitude from normal to unfocused, preoccupied, or poor performance might be caused by depression. Distress is usually caused by personal problems that seem overwhelming and anxiety is one form of distress that may stem from school related or personal concerns.

Talk to the student privately by indicating that you have noticed a change in their manner or behavior and inquire if there is something that they might need help with. Often the student will open up, in which case, listen empathetically and suggest that we have services through the counseling department which might help them. Then, refer the student to a CRISIS COUNSELOR? You might consult with the counselor as an intermediary step.

If the student resists or assures you that there is nothing going on to cause concern, respect his/her judgment and thank them for responding to your inquiry. You might consult with a counselor anyway to note if the student may be simply resisting, and for information for what to observe for in the immediate future which may indicate more serious problems.

Harassment, General

A student complains to you that another student has been making demeaning remarks or treating her/him in an unacceptable manner.

Listen to the student and refer the matter to the VICE PRESIDENT OF STUDENT SERVICES.

Harassment, Sexual

Sexual harassment involves unwelcome sexual advances, requests for sexual favors and other verbal or physical contact; it is usually found 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 that counts. As long as the conduct interferes with a student's academic performance or creates 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 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.
- Repeated non-reciprocated demands for dates or sex.

Sexual harassment of students is defined by the California Education Code, Section 89535. Common reactions of 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.

DO:

- Listen carefully to the student, validating her/his experience.
- Separate your personal biases from your professional role – maintain objectivity.
- **REPORT THIS SITUATION TO THE VICE PRESIDENT OF STUDENT SERVICES, EXT.???**
- Encourage the student to keep a log or find a witness.
- Help student seek informal advice through a department chair, supervisor or advisor.

DON'T:

- Do nothing. Taking no action invalidates the student's already shaky perception and puts the college in a vulnerable position should this behavior continue.
- Overreact.

Misconduct

Disrupting class with irrelevant talk or disturbing others, occupying areas not meant for loitering, sitting on cafeteria tables, or smoking in prohibited areas.

If it is a one-time incident, tell the student or students that smoking is prohibited in that area. If one persists, talk privately to the person and indicate that a referral to the **Senior Dean of Student Services** will become necessary if the student persists. Report to the **Senior Dean of Student Services** for appropriate disciplinary intervention if necessary.

Misconduct Resulting in Injury or Damage to Property

Throwing objects, applying graffiti, scratching cars, smashing plants, etc.

Report this to the campus police and report incident to the **Senior Dean of Student Services**.

Performance Change

Difficulty in concentrating, freezing up on tests, or chronic personal problems which distract him/her from adequate academic performance.

Discuss the problem and explore the nature of the concerns together. Personal problems may be resolved with information to manage them, e.g., in the case of test anxiety, a short term course on test taking may be needed. However, difficulty in concentrating may be caused by concerns that may pass or could indicate more serious problems. If it seems to be the latter, a referral to a crisis counselor would be in order. If the problem has existed for years, the person might be served by the DSP&S Program. It could stem from any of several causes including psychological disorder. Let the experts determine this. Always provide follow-up sessions to show support for the student's well-being.

Post-Traumatic Stress Disorder

Post-traumatic stress disorder occurs when a person suffers an unexpected psychological shock. Many throughout the country suffered this after the 9/11 attack. The symptoms can be insomnia with flashbacks, unexplained anxiety, mild depression, exaggerated vigilance for danger, and/or withdrawal from normal activities. Assault victims or even the witness of a tragic incident can cause traumatic stress. Many may suffer this from involvement with our war on Iraq.

Unusual fears or anxiety during this war period may be symptoms of traumatic stress disorder and could benefit from counseling. Consult with a crisis counselor to determine what might help, i.e., coming to class to discuss reactions to the war and the violence or fear of terrorist attacks, or seeing students for individual counseling.

Rape

Listen supportively and observe for quality of state of mind, i.e., depressed, suicidal potential, anxiety or rage. Advise of the right to file a complaint. Inform him/her of rape victim support services. (see [Community Hotline and Referral List](#))

Substance Abuse

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. Currently, alcohol is the preferred drug on college campuses.

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 abuse.

DO:

- Confront the student with the behavior that is of concern (Refer to AVC Student Code of Conduct, [Appendix A](#)).
- Address the substance abuse issue if the student is open and willing.
- Offer concern for the student's overall well-being.
- Refer student to Student Health Services or the [Community Hotline and Referral List](#).

DON'T:

- Convey judgment or criticism about the student's substance abuse.
- Make allowances for the student's irresponsible behavior.
- Ignore signs of intoxication in the classroom.

Suicide Potential

Always take threats seriously and get help immediately. Listen supportively and contact a crisis counselor. If none are available, call the suicide hotline. The general number is 800-309-2131 or you may call the Contra Costa Crisis Center at 800-833-2900. Ask the student for the names of individuals who can follow up observing this person through the next day. If suicide seems imminent, ask if he/she is willing to commit himself/herself to a mental health hospital for observation and treatment. If the person is not willing, consider whether or not to call the campus police to effect a 5150 commitment.

DO:

- 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 use it.
- Be available to listen.
- Activate the BIT by contacting [the Counseling Center at ext. 3334](#).
- Advise District Police if threat of suicide is imminent.

DON'T

- Assure the student that you are his/her best friend; agree you are a stranger, but even strangers can be concerned.
- Be overly warm and nurturing.
- Flatter or participate in their games; you don't know their rules.
- Be cute or humorous.
- Challenge or agree with any mistaken or illogical beliefs.
- Be ambiguous.

Traumatic Incident Stress

Death in the family, spousal abuse, being evicted, was fired, loss of a pregnancy, death of a class member, divorce, etc.

Approach the student privately before or after class and indicate your concern. In some cases, the student may approach you to reveal that he/she was absent due to something you see as traumatic. This allows you a means of inquiring how the student is coping with the situation. Indicate to the student that this incident may be more serious than it appears and offer the resources of our crisis counseling services. If a student in the class dies, you can contact a member of the Crisis Intervention Team to determine the best way to support other students in the class.

The Violent Student

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. The adage, "An ounce of prevention is worth a pound of cure," best applies here. This behavior is often associated with the use of alcohol and other drugs.

DO:

- Prevent total frustration and helplessness by quickly and calmly acknowledging the intensity of the situation, e.g., "I can see you're 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.
- Immediately seek assistance; contact AVC Sheriff's Department at extension 6399.

DON'T:

- Ignore warning signs that the person is about to explode, e.g., yelling, screaming, clenched fists, threats.
- Threaten or corner the student.
- Touch the student.

APPENDIXES

APPENDIX A – Protection of Orderly Operation of the College/Protecting the Well-Being of the Student

Protection of the Orderly Operation of the College

With regard to protecting the well-being of the college, we referred to the “laws protecting **Los Medanos College**” **DOES THIS POLICY APPLY TO AVC OR IS THIS SPECIFIC FOR THEIR COLLEGE?** which focus on students who create crises. Students who “willfully disrupt the orderly operation of the campus” can be subject to suspension, dismissal or expulsion as outlined in the Student Code of Conduct.

An instructor, for good cause, may remove a student from his or her class for the day of the removal and the next class meeting (Ed Code 76032 and 76033). Procedures related to the removal are outlined in Section VIII of the Student Code of Conduct. “Good Cause” includes, but is not limited to the following offenses:

1. Continued disruptive behavior, continued willful disobedience, habitual profanity or vulgarity, or the open and persistent defiance of the authority of, or persistent abuse of, college personnel.
2. Assault, battery, or any threat of force or violence upon a student or college personnel.
3. Willful misconduct which results in injury or death of a student or college personnel or which results in cutting, defacing, or other injury to any real or personal property owned by the District.
4. Use, sale or possession on campus of, or presence on campus under the influence of any controlled substance, or any poison classified as such by Schedule D in section 4160 of the Business and Professions Code.
5. Willful or persistent smoking in any area where smoking has been prohibited by law or by regulation of the Governing Board.
6. Persistent serious misconduct where other means of correction have failed to bring about proper conduct.
7. Other behavior that has good cause for disciplinary action.

Protecting the Well Being of the Student

Labeling of a student’s behavior, i.e., paranoid, psychotic, or sociopathic, may be detrimental to a student. This determination should be done only by a licensed psychologist or psychiatrist. Simply describe the behavior when communicating or documenting the problem.

A person who is a danger to him/herself or others or is gravely disabled

The California Mental Health Service Act, Section 5150 (Welfare and Institutions code) states that, “A person who is a danger to him/herself or others is gravely disabled, may be taken against his/her will by a peace officer to a designated mental health facility for evaluation.” Examples of cases which are covered by this section include persons who are seriously suicidal, psychotic, depressed, manic depressive, or delirious. Only a person in authority, i.e., campus police, the person’s doctor, or a relative can effect this action.

APPENDIX B – Counseling Responsibilities

Counseling Responsibilities

The Academic Senate for the California Community Colleges adopted the Standards of Practice for the counseling in the colleges in spring 1997. They defined the “Core Functions” of counseling as those derived from the California Education Code and from the American Counseling Association. The two that pertain to Crisis Intervention are as follows:

The college counseling function is to provide:

1. Personal counseling, in which the student is assisted with personal, family or other social concerns, when that assistance is related to the student’s education.
2. Crisis intervention, either directly or through cooperative arrangements with other resources on campus or in the community. Crisis Intervention is defined below.
 - a. Crisis Intervention is defined as follows:
 - i. As part of provision of personal counseling, programs should have a system that assists students in acute emotional distress, including an intervention plan for students in personal crisis who require immediate attention.
 - ii. For situations when a student is a potential danger to self or others, districts should have a clear policy of who has authority to make such determinations, and specific procedures to be followed.
 - iii. Counseling programs should work closely with administration and outside agencies to ensure that the needs of students in crisis are met and that personnel appropriate to such situations are available.
 - iv. Counseling programs should take leadership in creating and participating in campus-wide crisis intervention teams.
 - v. Counseling programs should be familiar with district disaster plans, and be prepared to assist students in the event of disaster on campus.

APPENDIX C – AVC Language Resource Listing

[INSERT LANGUAGE RESOURCE LISTING]

The Language Resource Listing should only be utilized when all other intervention options have been explored and have not yielded positive results. Please make the initial attempt to assist and resolve all students concerns before using this listing.

Quote by Dr. Karl Menninger



Dr. Karl Menninger devoted his life to working with people whose lives were in trouble. He saw a side of life that many of us will never experience. The following comments were taken from an address he gave at the United Nations in 1981.

“People are unreasonable, illogical, self-centered. Love them anyway. If you do good, people will accuse you of selfish, ulterior motives. Do good, anyway. If you are successful, you will win false friends and true enemies. Try to be successful, anyway.

The good you do today will be forgotten tomorrow. Do it, anyway. Honesty and frankness make you vulnerable. Be honest and frank, anyway.

People favor underdogs, but I notice they follow the top dogs. Fight for some underdogs, anyway. What you spend years building may be destroyed overnight. Build, anyway.

People really need help, but they may attack you if you help them. Try to help people, anyway. Give the world the best you have, and you could get kicked in the teeth. Give the world the best you have, anyway.”